



Media, Technology, and Public Perception of Mental Health and National Security in Kenya

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Abstract

This study examines how media and technology shape public perceptions of mental health in relation to national security in Kenya. The research adopts a qualitative empirical design based on desktop research, analysing media narratives and technological interventions documented across mainstream and digital platforms, policy documents, institutional reports, and scholarly literature. Mainstream and digital media sources reviewed include Kenyan news outlets such as The Standard and The Star, as well as public discourse on social media platforms such as Facebook, X (formerly Twitter), Instagram, and mental health blogs. Policy frameworks analysed include the Kenya Mental Health Policy (2015–2030) and the Ministry of Health’s national workplace mental wellness guidelines. Institutional reports from organizations such as the Media Council of Kenya and the World Health Organization further informed the analysis. Findings indicate that responsible and empathetic media representations can enhance mental health literacy, reduce stigma, and strengthen community engagement in mental health initiatives. Conversely, sensationalist reporting and digital misinformation contribute to misconceptions and social anxiety that may undermine social cohesion. The study highlights the need for ethical media practices, strengthened journalist training in mental health literacy, and strategic use of digital platforms to support public awareness, early intervention, and community resilience.

Keywords: *media, mental health, national security, technology*

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Introduction

Mental health is an increasingly recognised determinant of societal stability, socio economic development, and national resilience. The World Health Organization identifies mental well-being as essential to individual quality of life, social cohesion, and community engagement (WHO, 2022; Hollis, 2022). In Kenya, policy frameworks such as the Kenya Mental Health Policy (2015–2030) envision a society where mental health is valued, promoted, and protected, free from stigma and discrimination, and grounded in rights-based care systems. This policy aligns with constitutional guarantees that every person has the right to the highest attainable standard of health, including mental health services (Kenya Mental Health Policy, 2015–2030; Constitution of Kenya, 2010). Despite progressive policy ambitions, mental health remains under-resourced—a challenge highlighted by officials who note that only a tiny fraction of national health budgets is allocated to mental health, contributing to infrastructure and workforce gaps across counties. Meanwhile, suicide remains a significant public health issue, reported to be among the leading causes of death for young people, with estimates of around nine deaths per 100,000 population annually (Bertuccio et al., 2024).

Media and technology play central roles in shaping public understanding of mental health. Media narratives are powerful in agenda setting and framing public discourse, influencing perceptions that drive societal attitudes, policy priorities, and resource allocation (Entman, 1993; McCombs & Shaw, 1972). In a digital era where internet and social media penetration is high, especially among youth demographics, digital platforms shape how mental health information and misinformation travel, affecting public perception and behaviour.

However, discourses remain contested. Some media narratives humanise mental health, promoting empathy and awareness, while others frame mental illness in sensationalist ways that reinforce stigma and fear. Likewise, technology offers digital interventions and support networks that expand access to mental health resources, yet it carries risks of misinformation, addictive consumption patterns, and social comparison stress. In this context, this study seeks to map how media and technology shape Kenyan public perceptions of mental health and how these perceptions intersect with national security considerations. The overarching goal is to assess whether media and technological narratives help or hinder efforts to promote mental well-being and contribute to national security objectives such as social cohesion, community resilience, and sustainable development. This study concludes that while media and technology possess significant potential for enhancing mental health discourse and practice, responsible reporting, policy alignment, and digital literacy remain critical for realising these benefits.

Theoretical Basis

This study is guided by an integrated theoretical framework combining one media theory and two mental health-related theories to explain how media narratives influence public understanding of mental health and how these perceptions can affect social cohesion and national security. The selected theories are Framing Theory, Mental Health Literacy Theory, and the Stress and Coping Theory. Together, these frameworks provide complementary insights into how media representation shapes public interpretation of mental health issues, influences help-seeking behaviour, and affects societal resilience.

The primary media theory informing this study is Framing Theory, developed by Robert Entman. Framing theory suggests that media do not simply present information but actively

construct meaning by selecting certain aspects of reality and making them more salient (Entman, 1993). Frames shape how issues are defined, interpreted, and evaluated by audiences. In the context of mental health reporting, the framing of mental illness as either a medical condition requiring support or as a source of danger and instability can significantly influence public attitudes and responses. Positive frames emphasising recovery, treatment, and community support may promote empathy and reduce stigma, while sensationalist frames linking mental illness with violence or deviance may reinforce stereotypes and fear. Framing theory, therefore, provides a critical lens for analysing how Kenyan media portray mental health issues and how these portrayals shape public discourse.

To complement the media perspective, the study incorporates Mental Health Literacy Theory, which focuses on the knowledge and beliefs that individuals hold about mental health disorders and their treatment. According to Anthony F. Jorm, mental health literacy includes the ability to recognize mental health conditions, understand available treatment options, and seek appropriate help (Jorm, 2012). Media and digital platforms play a central role in shaping this literacy because many individuals rely on media narratives and online information to understand mental health issues. Accurate and informative reporting can therefore enhance mental health literacy, encourage early intervention and reduce stigma. Conversely, misinformation or sensationalized coverage may reinforce misunderstanding and discourage help-seeking behaviour.

The study also draws on Stress and Coping Theory, developed by Richard Lazarus and Susan Folkman, which explains how individuals perceive and respond to psychological stress (Lazarus & Folkman, 1984). This theory posits that individuals evaluate stressful situations through cognitive appraisal processes and adopt coping strategies based on perceived resources and social support. Media and digital platforms can influence this process by shaping how individuals interpret mental health challenges and the coping mechanisms they consider acceptable. For example, exposure to supportive narratives, mental health campaigns, and online support communities may encourage adaptive coping and help-seeking behaviour, while exposure to distressing or misleading content may intensify anxiety, stigma, or avoidance of professional care.

When integrated, these three theories provide a comprehensive framework for understanding the relationship between media narratives, mental health awareness, and societal outcomes. Framing Theory explains how media representations construct meaning around mental health issues. Mental Health Literacy Theory clarifies how these representations influence public knowledge, attitudes, and willingness to seek help. Stress and Coping Theory further explains how individuals process and respond to the psychological information encountered through media and digital platforms. Together, these perspectives allow the study to examine not only how mental health is portrayed in Kenyan media but also how such portrayals influence public understanding, coping behaviours, and community resilience. This integrated theoretical approach is particularly relevant for analysing how media narratives about mental health may contribute to broader societal stability and national security by shaping public awareness, reducing stigma, and strengthening collective resilience.

Methodology

This study adopted a qualitative empirical research design based on desktop research. Desktop research involves the systematic collection and analysis of publicly available materials,

allowing researchers to examine media content, policy frameworks, digital discourse, and scholarly literature without direct field engagement. This approach was appropriate for the study because it enabled a comprehensive assessment of how media narratives and digital technologies shape public perceptions of mental health within the Kenyan context. The research drew data from four main categories: policy documents, mainstream media content, digital platforms, and scholarly literature. A purposive sampling strategy was used to select materials that explicitly addressed mental health, media representation, digital communication, or public discourse related to psychological well-being in Kenya. The sampling timeframe focused primarily on content produced between 2022 and 2024, capturing recent developments in media coverage and online discussions concerning mental health.

Policy analysis centred on national frameworks that guide mental health governance and communication in Kenya. Key documents reviewed included the Kenya Mental Health Policy (2015–2030) developed by the Ministry of Health, and the National Guidelines on Workplace Mental Wellness issued by the Ministry of Health. Additional insights were obtained from policy briefs and analytical reports produced by the Kenya Institute for Public Policy Research and Analysis (KIPPRA). These documents provided the institutional context for understanding how mental health communication is integrated into national health strategies and governance frameworks. To assess how mental health is represented in mainstream media discourse, the study analysed twenty media texts, including newspaper articles, online news reports, and opinion commentaries published in prominent Kenyan news outlets. These included coverage from newspapers and digital platforms such as The Standard, The Star, Nation Africa, and Kenya News Agency. The selected articles addressed issues such as the mental health effects of social media pressures among Kenyan youth, rising public concern over depression and suicide, and discussions surrounding national mental health policy reforms. Examples of articles reviewed included The Standard report on the psychological effects of unrealistic social media lifestyles among young people and The Star commentary addressing growing mental health awareness in Kenyan society.

In addition to mainstream media sources, the study examined digital discourse on widely used social media platforms in Kenya. A purposive sample of thirty social media accounts and pages that regularly produce mental health-related content was reviewed. These included ten Facebook pages or groups, ten X (formerly Twitter) accounts, and ten Instagram accounts linked to mental health advocacy, counselling services, and awareness campaigns. The Facebook pages reviewed included mental health advocacy platforms and community support groups such as Chiromo Mental Health Hospital, Befrienders Kenya, Basic Needs Kenya, and Mental360 Kenya, which frequently share mental health awareness content, counselling resources, and public education materials. On X (formerly Twitter), the study examined accounts belonging to mental health advocates, professional organizations, and public awareness initiatives that actively participate in mental health discussions and hashtag campaigns. Examples include accounts associated with Mental360 Kenya, Befrienders Kenya, and prominent mental health advocates who regularly contribute to public conversations on mental health awareness, suicide prevention, and youth well-being. The Instagram accounts reviewed included digital platforms dedicated to mental wellness education and youth engagement. These included pages such as Mental360 Kenya, Chiromo Mental Health Hospital, and other mental wellness advocacy pages that disseminate motivational content, coping strategies, and campaign materials during initiatives such as World Mental Health Day and Mental Health Awareness Week. These digital platforms were selected because of their widespread usage among Kenyan youth and urban populations and their growing influence in shaping online discussions about mental health and psychological well-being.

To contextualize the media and digital findings within broader academic scholarship, the study also reviewed fifteen peer-reviewed journal articles addressing media framing, digital communication, mental health literacy, and misinformation. These articles were drawn from established academic journals, including *Journal of Communication*, *African Journalism Studies*, *Communication Research*, and *Epidemiology and Psychiatric Sciences*. The scholarly literature provided theoretical and empirical grounding for interpreting patterns observed in Kenyan media narratives and digital discourse. The collected materials were analysed using qualitative content analysis. This involved systematically reviewing policy texts, media articles, and social media posts to identify recurring themes related to stigma, mental health awareness, digital misinformation, advocacy initiatives, and representations of psychological well-being. These thematic patterns were subsequently interpreted through the analytical lenses of Framing Theory, Agenda Setting Theory, and Media Dependency Theory, enabling the study to assess how media narratives and digital communication practices shape public perceptions and their broader implications for social cohesion and national security in Kenya.

Table 1

Summary of Data Sources and Sample Size

| Data Source Category | Type of Source | Examples Consulted | Sample Size |
|---------------------------------|---|--|-----------------------|
| Policy Documents | National mental health policy and government guidelines | Kenya Mental Health Policy (2015–2030); National Guidelines on Workplace Mental Wellness (Ministry of Health); KIPPRA policy briefs | 3 key documents |
| Mainstream Media | Newspaper articles, online news reports, opinion commentaries | <i>The Standard</i> , <i>The Star</i> , <i>Nation Africa</i> , <i>Kenya News Agency</i> | 20 media articles |
| Digital Platforms – Facebook | Advocacy pages and community support groups | Chiromo Mental Health Hospital, Befrienders Kenya, Mental360 Kenya, Basic Needs Kenya | 10 Facebook pages |
| Digital Platforms – X (Twitter) | Mental health advocacy and awareness accounts | Mental360 Kenya, Befrienders Kenya, mental health advocates and public awareness campaigns | 10 X accounts |
| Digital Platforms – Instagram | Mental wellness education and awareness pages | Chiromo Mental Health Hospital, Mental360 Kenya, mental health advocacy pages | 10 Instagram accounts |
| Scholarly Literature | Peer-reviewed journal articles on media, mental health, and digital communication | <i>Journal of Communication</i> , <i>African Journalism Studies</i> , <i>Communication Research</i> , <i>Epidemiology and Psychiatric Sciences</i> | 15 journal articles |

Source: Authors (2026)

Table 1 summarizes the categories of sources analysed and the corresponding sample sizes used in the study. The collected materials were analysed using qualitative content analysis, a systematic method for interpreting textual and visual data by identifying patterns, themes, and meanings within communication content. The analysis involved several stages. First, all policy documents, media articles, and social media posts were carefully reviewed to gain an overall

understanding of how mental health issues were discussed across different platforms. During this initial familiarisation stage, relevant segments of text related to mental health representation, media framing, digital discourse, and public perception were identified and organized.

Second, the selected materials were subjected to thematic coding, where recurring concepts and narratives were categorized into analytical themes. Key themes that emerged included mental health awareness, stigma and stereotyping, digital misinformation, advocacy initiatives, and the role of media in shaping public understanding. These themes were derived both inductively from the data and deductively from existing literature on media communication and mental health discourse. Third, a comparative analysis was conducted across the different categories of sources—policy documents, mainstream media, and digital platforms—to examine similarities and differences in how mental health issues were represented and discussed. This step allowed the study to identify whether media narratives aligned with or diverged from national policy priorities and public health messaging.

Finally, the interpreted themes were analysed through the integrated theoretical lenses of Framing Theory, Mental Health Literacy Theory, and Stress and Coping Theory. Framing Theory explains how media narratives construct meaning by emphasizing particular interpretations of mental health, such as recovery, vulnerability, or risk, thereby shaping how audiences understand and respond to mental health issues (Entman, 1993). Mental Health Literacy Theory provides insight into how these media representations influence public knowledge, beliefs, and attitudes toward mental illness, including the ability to recognize mental health conditions, understand available treatments, and seek appropriate support (Jorm, 2012). In addition, Stress and Coping Theory helps explain how individuals interpret and respond to mental health information encountered through media and digital platforms, particularly in contexts of social stress, uncertainty, or psychological vulnerability (Lazarus & Folkman, 1984).

By synthesizing insights from these three frameworks, the analysis examined how media framing interacts with public mental health literacy and individual coping processes to shape broader societal responses to mental health challenges. This integrated theoretical approach enabled the study to move beyond descriptive observation toward a deeper analytical understanding of how media and digital communication practices influence mental health discourse, public awareness, and help-seeking behavior. Ultimately, the framework allowed the study to assess how these dynamics contribute to or undermine social cohesion and community resilience, which are critical components of sustainable national security in Kenya.

Analysis of Findings

Media Framing of Mental Health Issues

A central pattern emerging from the analysis is the dominant framing of mental health in mainstream media and digital platforms. Media analyses reveal a complex and varied portrayal of mental health in Kenyan news environments, reflecting both progress in awareness and persistent challenges in representation. The sampled newspaper articles from Daily Nation, The Standard, and The Star frequently frame mental health issues within three broad narratives: public health concern, social crisis, and personal struggle. These narratives shape how audiences interpret mental health challenges and determine whether such issues are viewed

through supportive or stigmatizing lenses. For example, a report published in the Daily Nation discussing rising depression rates among university students framed mental health as a public health challenge requiring institutional intervention, emphasizing the need for counseling services and mental health awareness programs within universities. Similarly, online reports from Citizen Digital highlighted increasing cases of anxiety and suicide linked to economic pressures, youth unemployment, and academic stress, thereby situating mental health within broader socioeconomic realities. Such coverage demonstrates how media organizations connect psychological well-being to structural conditions affecting Kenyan society.

At the same time, a growing number of reports highlight advocacy efforts, awareness campaigns, and personal narratives of resilience and recovery. These stories often focus on individuals overcoming mental health challenges, community initiatives promoting psychological well-being, and educational campaigns led by NGOs and governmental bodies. For instance, mental health professionals and organizations have increasingly used media platforms to caution young people about the psychological impacts of excessive social media use, including anxiety, depression, and harmful social comparison arising from exposure to unrealistic lifestyle portrayals (The Standard, 2023). Such reporting aligns with public health objectives by promoting mental health awareness and encouraging open dialogue around psychological well-being. Feature stories also highlight advocacy initiatives led by organizations such as BasicNeeds Kenya and Kenya Red Cross, which seek to reduce stigma and expand access to mental health services through community outreach and awareness campaigns.

From the perspective of Framing Theory (Entman, 1993), these narratives demonstrate how media outlets select and emphasize certain aspects of mental health realities, thereby shaping how audiences interpret and respond to these issues. By highlighting crisis narratives—such as suicide statistics or severe psychological distress—media coverage can increase public awareness and draw attention to the urgency of mental health challenges. However, such framing can also unintentionally reinforce perceptions of mental illness as closely associated with danger, unpredictability, or tragedy. Indeed, some reports continue to portray mental illness in sensationalized ways. In certain media accounts, mental health conditions are discussed in connection with violent or criminal incidents, reinforcing stereotypes that individuals living with mental illness are inherently dangerous or unstable (Ongeri et al., 2021; Markowitz, 2011). Such portrayals are problematic because they misrepresent the realities of mental health conditions and contribute to social stigma and marginalization. The persistence of these narratives has been linked to journalistic practices that prioritize attention-grabbing headlines over nuanced reporting, as well as the limited mental health literacy among some media practitioners (Amponsah, 2024).

Digital media further amplifies both constructive and problematic narratives surrounding mental health. Social media platforms facilitate the rapid dissemination of educational content, advocacy campaigns, and peer support networks that promote mental health awareness and access to resources (Besschetnova et al., 2021). At the same time, digital environments can also spread misinformation, sensationalist content, or unverified claims about mental health conditions, potentially reinforcing stigma and social fear (Mamun, 2025; Kharono et al., 2022; Jorm, 2012). The coexistence of these competing narratives highlights the complex role of media in shaping public understanding of mental health issues.

Overall, the analysis suggests that while Kenyan media has made notable progress in promoting awareness and supporting mental health advocacy, sensationalism and misinformation remain

significant challenges. These patterns underscore the importance of responsible media reporting and improved mental health literacy among journalists and digital content creators. Strengthening ethical reporting practices and promoting balanced narratives can contribute to more informed public discourse, reduced stigma, and stronger community resilience—factors that are essential for social cohesion and long-term national stability.

Media Narratives, Technology, and Mental Health Literacy

The findings further demonstrate that media narratives and digital communication technologies play a significant role in shaping public mental health literacy, particularly through the dissemination of information across online platforms. Analysis of online news articles, social media campaigns, and digital discussions indicates that media platforms increasingly function as informal educational environments where individuals encounter explanations of mental health conditions, coping strategies, and available support services. In Kenya's rapidly expanding digital media environment, these platforms have become influential sources of information, particularly for younger audiences who rely heavily on online spaces for health-related knowledge.

For instance, several articles published in *The Standard* explained the symptoms of depression, anxiety disorders, and stress-related conditions, often referencing professional psychologists and mental health practitioners. Similarly, awareness campaigns disseminated through social media accounts of organizations such as Mental 360 Kenya and the Ministry of Health Kenya have provided simplified explanations of mental health conditions while promoting access to counseling services and community-based support programs. These initiatives frequently utilize interactive formats such as webinars, live question-and-answer sessions, and educational infographics to reach diverse audiences. Digital engagement strategies such as these have been particularly effective in reaching youth populations and urban communities who often encounter logistical barriers to accessing in-person mental health services (Piers et al., 2023; Mwavua et al., 2023).

From the perspective of Mental Health Literacy Theory (Jorm, 2012), these informational narratives contribute significantly to improving public understanding of mental health conditions by helping individuals recognize symptoms, understand available treatment options, and reduce stigma associated with mental illness. Digital platforms therefore function as complementary channels to formal health services by expanding access to psychosocial education and encouraging help-seeking behaviour. Research suggests that online mental health communities and digital awareness campaigns can strengthen public knowledge and foster supportive peer networks, thereby promoting broader mental health awareness (Naslund et al., 2016). Campaigns such as "Mind the Gap" and various online Mental Health Awareness initiatives have also used hashtags, short videos, and interactive polls to educate communities about depression, anxiety, and stress management strategies (Weigle & Shafi, 2024; Elmore, 2022). Through these digital strategies, mental health advocates have successfully normalized conversations around psychological well-being and contributed to stigma reduction within public discourse.

However, the analysis also revealed the presence of misinformation and oversimplified explanations of mental health conditions circulating within some digital discussions. On platforms such as Facebook and X, certain posts attributed mental health challenges to purely spiritual or moral causes without referencing psychological or medical explanations. Such narratives can undermine mental health literacy by reinforcing stigma and discouraging

individuals from seeking professional care. In addition, sensationalized posts, unverified health advice, and alarmist narratives frequently distort public understanding of mental illness, reinforcing stereotypes and contributing to anxiety among audiences (Mamun, 2025; Kharono et al., 2022). Digital environments also expose users to potentially harmful content that can negatively affect psychological well-being. Graphic reports of suicide or violence circulating online have been shown to increase emotional distress, particularly among vulnerable groups such as youth and individuals with pre-existing mental health conditions (Mack, 2025; Baghaei et al., 2020). In Kenya, prolonged exposure to disturbing online material has also been associated with severe psychological effects among content moderators working for international digital platforms, including symptoms of post-traumatic stress disorder (PTSD), an issue that has recently attracted legal scrutiny and international attention (The Guardian, 2024).

Furthermore, lifestyle-focused digital platforms such as Instagram and TikTok often promote idealized portrayals of beauty, wealth, and success that may provoke harmful social comparison among users. Exposure to these unrealistic standards has been linked to low self-esteem, anxiety, and emotional distress among young people in Kenya (The Star, 2023). Such patterns highlight the complex role of digital media in shaping psychological well-being: while these platforms offer opportunities for education and support, they can simultaneously create social pressures that challenge mental resilience. The findings illustrate the dual nature of digital media within the mental health landscape. On one hand, digital platforms facilitate the rapid dissemination of educational information, advocacy campaigns, and peer support networks that enhance public mental health literacy and encourage help-seeking behaviour. On the other hand, these same platforms can amplify misinformation, sensationalized narratives, and harmful content that undermine accurate understanding of mental health issues. Addressing this tension requires coordinated efforts involving ethical media practices, improved digital media literacy among audiences, and stronger collaboration between mental health professionals, policymakers, and technology companies (Green et al., 2023; Lewandowsky et al., 2020). Strengthening these interventions will help maximize the benefits of digital communication technologies while mitigating the risks associated with misinformation and psychological harm.

Policy Narratives and Media Responsibilities

The Kenya Mental Health Policy (2015–2030) explicitly recognizes the media as a strategic partner in promoting mental health awareness. The policy emphasizes that “the mass media will play a key role in positive advocacy and creation of awareness on matters related to mental health” (Besschetnova et al., 2021). By integrating media engagement into national strategy, the government envisions a collaborative ecosystem where journalists and broadcasters actively support public education, destigmatization campaigns, and policy advocacy. This framework aligns with broader health objectives, positioning mental health not merely as a clinical issue but as a social development and security concern requiring informed public discourse (McQuail, 2010). Despite these aspirations, desktop analyses of Kenyan media reveal significant gaps between policy goals and actual practice. While some outlets consistently highlight advocacy efforts, community initiatives, and NGO-led programs, others continue to focus on sensational or individual crisis stories. Multiple mainstream reports have linked mental illness to violence, unpredictability, or criminality, reinforcing harmful stereotypes (Miche et al., 2019; Zeeni et al., 2018).

Such reporting contradicts the policy's stigma-reduction objectives and undermines public confidence in mental health interventions. Experts recommend stronger media standards, including specialized journalist training on mental health reporting and adoption of clear, standardized reporting guidelines. However, reporting remains uneven, indicating a need for systematic monitoring, capacity building, and collaboration between media stakeholders and regulatory bodies (Ferland, 2024; Montague et al., 2015; Holland, 2018). Beyond media engagement, the government has initiated reforms to expand access to mental health services. In late 2025, the Ministry of Health announced that mental health services would be incorporated into Kenya's national health insurance (Social Health Authority), a milestone aimed at ensuring "quality healthcare for every Kenyan without financial hardship" (Ministry of Health, 2023). Complementing this, Kenya issued its first Workplace Mental Wellness Guidelines in 2023 to promote employer-supported mental health programs. Community Health Promoters, leveraging both traditional outreach and digital tools, play a pivotal role in early intervention, bridging gaps between formal healthcare systems and local populations (Tell, 2023; Aramouni, 2025). These initiatives reflect the policy's emphasis on preventive care and community-based resilience, treating mental health as a public good with implications for social cohesion and national security.

Nevertheless, structural and systemic challenges constrain effective implementation. Mental health remains underfunded, with budget allocations historically less than 1% of the total health sector budget. Specialist resources are scarce and unevenly distributed; many counties lack dedicated inpatient units, and rural areas face acute shortages of trained professionals and facilities (Aramouni, 2025; Tell, 2023). These disparities mean that, despite robust policy frameworks, large segments of the population remain underserved. Inconsistent media coverage further exacerbates these gaps, as communities with limited access to accurate reporting may remain unaware of available services or continue to internalize stigmatizing misconceptions (Zeeni et al., 2018). The intersection of policy frameworks and media practices thus presents both opportunities and challenges. On one hand, the national policy explicitly positions media as a partner in public education and advocacy, and recent reforms provide concrete narratives for positive reporting. On the other hand, the persistent gap between policy ambitions and actual media practice—compounded by resource limitations—highlights critical needs.

Addressing these challenges requires targeted interventions: strengthening collaboration between policymakers, media stakeholders, and healthcare providers; developing standardized reporting protocols; and leveraging digital media platforms (social networks, SMS campaigns) to reach underserved communities (Holland, 2018; McQuail, 2010). Effective alignment of media practice with policy objectives would enhance public understanding, reduce stigma, reinforce community resilience, and foster a more informed and supportive society, thereby contributing to Kenya's broader development and national security goals.

Media Literacy, Professional Capacity, and Ethical Communication

A critical theme emerging from the analysis is the role of media literacy and professional capacity in shaping the quality and societal impact of mental health communication in Kenya. While national policy frameworks recognise the media as a strategic partner in mental health promotion, the effectiveness of this partnership is significantly influenced by journalists' levels of mental health literacy, ethical sensitivity, and institutional support structures (Holland, 2018; Moreno et al., 2018). Desktop analysis of media reports, regulatory guidelines, and scholarly literature indicates that gaps in professional knowledge contribute to inconsistent framing,

superficial reporting, and, in some cases, harmful representations of mental health issues (Media Council of Kenya [MCK], 2022; World Health Organization [WHO], 2021).

Media literacy in this context extends beyond basic journalistic competence to include an informed understanding of mental health concepts, trauma-informed reporting practices, and the ethical implications of language and imagery. Studies have shown that inaccurate or stigmatizing media portrayals—such as linking mental illness with violence or moral failure—are often rooted in limited engagement with mental health expertise rather than deliberate intent to harm (Gould et al., 2018; WHO, 2019). Nevertheless, such portrayals have significant consequences. They reinforce stigma, discourage help-seeking behaviour, and perpetuate misconceptions that undermine public health objectives and weaken community cohesion. From a national security perspective, these outcomes are particularly concerning, as social trust and collective resilience are critical for maintaining stability in times of crisis (Norris et al., 2021).

Regulatory and professional bodies, including the Media Council of Kenya, have developed ethical guidelines for reporting on sensitive issues such as suicide, trauma, and mental illness (MCK, 2022). However, the analysis reveals uneven adherence to these standards across media platforms. Commercial pressures, competition for audience attention, and the demand for rapid content production often incentivise sensationalism over accuracy and depth (Wasserman & Madrid-Morales, 2019). This tension between ethical responsibility and market-driven imperatives highlights the structural constraints within which journalists operate. Without sustained professional training and institutional reinforcement, ethical guidelines alone are insufficient to transform entrenched reporting practices.

The digital media environment further intensifies these challenges. The proliferation of user-generated content, citizen journalism, and algorithm-driven content distribution has reduced traditional editorial gatekeeping, allowed misinformation and emotionally charged narratives to circulate widely (Wardle & Derakhshan, 2018). While this democratization of communication expands participation and visibility, it also increases the risk of unverified claims, harmful stereotypes, and panic-inducing content related to mental health. In this environment, media literacy becomes not only a professional concern but also a public one. Audiences with limited critical digital literacy skills are more vulnerable to misinformation, exaggeration, and emotionally manipulative narratives, amplifying their psychological and social effects (UNESCO, 2023).

Media Dependency Theory offers valuable insight into why these dynamics carry heightened significance in Kenya's socio-political context. Periods of economic uncertainty, public health emergencies, and security threats increase public reliance on media and digital platforms for information and meaning-making, thereby amplifying media influence on attitudes and behaviour (Ball-Rokeach, 2021). In such contexts, ethical lapses or misinformation can have disproportionate effects, shaping public perceptions at moments of heightened vulnerability and anxiety. The findings further suggest that strengthening media literacy and professional capacity represents a critical preventive intervention. Training journalists in trauma-informed reporting, mental health literacy, and ethical digital communication has been shown to improve reporting quality and reduce harmful framing (Gould et al., 2018; WHO, 2021). Such capacity-building initiatives align with Framing Theory by enabling journalists to construct narratives that emphasise context, recovery, and systemic factors rather than fear or individual blame. They also support Agenda Setting processes by ensuring that when mental health gains

prominence in public discourse, it is presented in ways that encourage understanding, policy engagement, and constructive social action.

Importantly, ethical and informed mental health reporting contributes to national security indirectly by reinforcing social trust and cohesion. Communities exposed to accurate and empathetic narratives are better positioned to support vulnerable individuals, recognise early warning signs of distress, and engage with formal mental health services. This reduces the likelihood that untreated psychological distress escalates into social conflict, radicalisation, or other security-relevant outcomes (Norris et al., 2021). From this study, media literacy and professional capacity emerge as central determinants of how effectively media and technology contribute to mental health promotion and national security in Kenya. Addressing these dimensions requires coordinated efforts involving media institutions, regulatory bodies, training institutions, and policymakers. Without sustained investment in ethical communication and professional development, the transformative potential of media and digital technologies remains constrained, and their risks to public well-being and societal stability persist.

Intersecting Mental Health and National Security

Mental health is increasingly recognized as a critical factor in national security, reflecting the interdependence between individual psychological well-being, community cohesion, and societal stability. In Kenya, as in many other contexts, mental health challenges are not solely personal or clinical concerns; they have broader social and political implications that can directly influence national security outcomes. Desktop analyses of media coverage, policy frameworks, and scholarly literature underscore the ways in which mental health intersects with security, particularly through the dynamics of stigma, misinformation, and social resilience. Stigma and misinformation surrounding mental illness pose significant risks to social cohesion and collective resilience. When communities perceive mental health conditions through the lens of fear, moral weakness, or criminality, social bonds weaken, and trust in local support systems diminishes (Leavey, 2024). Misrepresentations propagated by media or digital platforms can exacerbate these challenges; reinforcing stereotypes and marginalizing vulnerable populations.

Such social fragmentation has broader consequences: communities that are less cohesive, less informed, or more fearful are more susceptible to unrest, radicalization, or recruitment into extremist networks (Leavey, 2024). In this sense, poor public understanding of mental health does not merely harm individuals; it can undermine the collective capacity of society to respond to threats, manage conflict, and maintain stability. Conversely, informed and responsible public narratives can function as a strategic asset for national security. Media outlets, professional organizations, and digital campaigns that provide accurate information on mental health contribute to social resilience by normalizing help-seeking behavior, promoting early intervention, and fostering supportive community environments. For example, when journalists report responsibly on mental health issues, highlighting recovery, available services, and evidence-based coping strategies, they strengthen public awareness and reduce the stigma that prevents individuals from accessing care. Similarly, digital communities—such as moderated online support groups and interactive awareness campaigns—create networks of social support that buffer psychological stress, facilitate early detection of mental health crises, and encourage engagement with formal mental health services.

This strategic potential of media and technology is particularly salient in contexts of national concern, such as countering radicalization or managing post-conflict reconstruction. Research

suggests that individuals experiencing untreated psychological stress, social isolation, or trauma may be more vulnerable to extremist messaging, inter-communal tensions, or other forms of social unrest (Norris, 2000). By contrast, communities where mental health is openly discussed, understood, and supported exhibit higher resilience, reduced social fragmentation, and enhanced capacity to respond collectively to crises. In this way, responsible media portrayal, coupled with digital interventions, contributes not only to individual well-being but also to broader societal security.

Moreover, integrating mental health considerations into national security planning underscores the importance of multi-sectoral collaboration. Government agencies, media institutions, civil society, and health professionals must work together to create coherent narratives, reduce misinformation, and ensure equitable access to mental health resources. Policies that embed media engagement and digital literacy into mental health strategies amplify these effects, turning public awareness campaigns into instruments that reinforce social cohesion, mitigate the risks of radicalization, and support early interventions that protect societal stability (Wamalwa, 2025). Mental health, therefore, intersects with national security through its impact on social cohesion, collective resilience, and vulnerability to unrest or radicalization. Accurate media portrayals and responsible digital interventions serve as strategic tools to strengthen community bonds, promote early help-seeking, and foster supportive environments. Recognizing and leveraging this intersection is essential for building a stable, resilient society where public mental well-being underpins sustainable national security outcomes.

Conclusion

This study demonstrates that media and technology play a decisive role in shaping public perceptions of mental health in Kenya, with clear and consequential implications for national security and sustainable development. Through qualitative empirical desktop analysis, the research shows that empathetic, accurate, and contextualized media reporting contributes to improved public understanding, stigma reduction, and increased community engagement with mental health initiatives. Such narratives support early help-seeking behavior and reinforce social cohesion, which are essential components of societal resilience and long-term security. Conversely, the study finds that sensationalist media portrayals and the unchecked circulation of harmful or misleading digital content continue to pose significant risks. Framing mental illness in association with violence, instability, or moral failure perpetuates fear and exclusion, discourages individuals from seeking care, and deepens social fragmentation. In digital environments, exposure to distressing content, misinformation, and unrealistic social comparisons exacerbates psychological vulnerability, particularly among young people and digitally dependent populations. These dynamics can weaken collective resilience and create conditions that heighten susceptibility to social unrest, radicalization, or community-level instability.

The findings further highlight the dual nature of digital technologies. When strategically harnessed, digital platforms offer unprecedented opportunities to expand access to mental health information, peer support networks, and early intervention mechanisms, particularly in underserved or hard-to-reach communities. However, these benefits are contingent upon the presence of digital literacy, ethical content governance, and evidence-based health communication. Without such safeguards, the same platforms can amplify harm, misinformation, and emotional distress, undermining public well-being and trust in mental health systems. At the policy level, Kenya has made notable progress in recognizing mental

health as a public priority and in integrating media and technology into national health and development agendas. Existing frameworks demonstrate political commitment to stigma reduction, service integration, and community-based approaches. Nonetheless, persistent implementation gaps—driven by limited resources, uneven service distribution, and inconsistent media practices—constrain the realization of these policy objectives. Strengthening alignment between policy intent and media performance remains critical for translating institutional commitments into tangible social outcomes.

Ultimately, this study underscores that mental health communication is not a peripheral concern but a strategic component of national security. By situating media and technological interventions within broader frameworks of mental health, governance, and security, the research affirms their central role in fostering social stability, collective resilience, and inclusive development. Effective media engagement and responsible digital practices are therefore essential not only for improving mental health outcomes but also for safeguarding societal cohesion and advancing Kenya's sustainable development goals.

Recommendations

Based on the findings, several key recommendations are proposed to improve the reporting and communication of mental health issues. First, national media councils and professional associations should develop and implement ethical guidelines for media reporting, providing clear frameworks that promote accuracy, empathy, and the destigmatisation of mental health. Second, journalists and media practitioners should receive targeted training in mental health literacy, equipping them with the skills to interpret and report mental health issues responsibly, thereby reducing sensationalism and enhancing public understanding.

Third, government agencies, non-governmental organisations, and community partners should leverage digital technologies to support early intervention. This could involve expanding online campaigns, mobile applications, and other digital platforms to disseminate reliable mental health information and connect individuals with support networks. Fourth, policymakers should ensure that national strategies align media engagement with mental health and national security priorities, including mechanisms to monitor the impact of media coverage on public perception and behaviour. Finally, dedicated monitoring teams should be established to detect and counter misinformation on social and digital media platforms, ensuring that false or misleading information about mental health is promptly addressed.

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