

Ethical Issues Associated With Brain-Computer Interfaces (BCIs)

Corey Zhang^{†*}, Leah Song^{‡*}, Viraj Pahuja^{§*}, Jerry Gu^{¶*}

[†] Eastlake High School, Sammamish, WA 98074, USA, [‡] Maclay School, Tallahassee, FL 32312, USA, [§] The Wheatley School, Roslyn Heights, NY 11577, USA, [¶] Princeton International School of Mathematics and Science, Princeton, NJ 08540, USA *Indicates equal contribution

Abstract

Brain-computer interfaces (BCIs) are advanced technologies that facilitate communication between the brain and an external device. They are often used in research to map, assist, augment or repair human cognitive or sensory motor functions and in help with medical recovery, disability mitigation and skill enhancement. These interfaces can help restore mobility to individuals with paralysis and enable movement for those with severe disabilities. Some experts say BCIs have the potential to completely revolutionize how we interact with technology and understand the human brain.

This paper explores potential ethical issues of BCIs, including safety, autonomy, privacy, accountability, and personal identity. As BCIs are directly connected to a human body part, ensuring their safety becomes paramount to protect users from potential physical and psychological harm. BCIs raise questions about how a person's autonomy might be affected, as BCIs can influence or override an individual's free will. Privacy concerns are also amplified by the intimate nature of neural data, necessitating robust measures to protect against unauthorized access and misuse of sensitive information. Accountability addresses the challenges in determining responsibility for actions potentially influenced by BCIs. Lastly, the impact of BCIs on personal identity is examined. By looking at these ethical issues, this paper aims to help provide recommendations for the ethical deployment and regulation of BCIs.

I. INTRODUCTION

Brain-computer interface (BCI) is a transformative technology that establishes a direct communication pathway between the brain and computational devices by translating neural signals into actionable commands. This technology, which has roots in the field of neuroprosthetics, has rapidly evolved and have expanded applications beyond the biomedical field. Initially designed to assist individuals with disabilities by restoring lost functions or enhancing existing capabilities, BCI now holds promise in diverse sectors including arts, entertainment, robotics, and mental health [2].

BCIs have demonstrated remarkable

potential to enhance human interaction with technology, enabling individuals with severe motor impairments to control prosthetic limbs, communicate through text generation, or operate computer systems using only their neural activity. This advancement not only offers unprecedented independence and improved quality of life for individuals with disabilities but also opens up new possibilities for augmenting human capabilities. For example, artists may be able to new forms of expression by directly translating their brainwaves into visual or auditory art, while mental health practitioners can develop novel therapeutic interventions that utilize real-time

brain monitoring to manage conditions such as depression or anxiety.

Despite its immense potential, the deployment of BCIs has ignited significant ethical debates. Concerns about safety, autonomy, privacy, accountability, and personal identity are critical elements that demonstrate the complexity of integrating such powerful and intimate technology into human lives. The direct interface between the human brain and external devices raises unique safety concerns, particularly regarding the risks of cyberattacks and unintended neurological consequences. Autonomy is another key ethical consideration, as BCIs can influence or potentially override an individual's free will, raising questions about informed consent and the voluntary use of such technology.

Privacy concerns are amplified by the intimate nature of neural data, necessitating robust measures to protect against unauthorized access and misuse of sensitive information. Additionally, the integration of BCIs into daily life poses challenges in determining legal and moral responsibility and accountability for wrongful actions that these devices may influence. Personal identity might also be fundamentally altered by the continuous interaction with BCIs, blurring the lines between human and machine, and raising profound questions about what it means to be human in an increasingly technological world.

This paper addresses these ethical concerns, aiming to provide a balanced perspective on the benefits and risks associated with the current and future utilization of BCIs. By examining the multifaceted ethical issues implicating safety, autonomy, privacy, accountability, and personal identity, we seek

to offer suggestions and insights for the responsible integration of BCIs into society, aiming to maximize the positive impacts of BCIs while mitigating potential risks, to promote the development and deployment of this transformative technology uphold the highest ethical standards and greatest respect for human dignity.

II. CURRENT STATUS

BCI technology has experienced significant growth since its inception in the 1970s. Over the past two decades, the field has primarily focused on developing new system paradigms and exploring real-world applications. While event-related potential (ERP), sensorimotor rhythm (SMR), and steady-state visual evoked potential (SSVEP) BCIs were established before the 21st century, a range of other BCIs, including affective, speech, hybrid, passive, collaborative, co-adaptive, emotional, augmented, cognitive, and mood BCIs, have emerged relatively recently.[2] These advancements have opened up new possibilities for specific applications of BCI technology.

Current applications of BCI are commonly found in the biomedical and bioengineering fields, where they support diagnosis and evaluation of central nervous system (CNS) disorders, improvement or replacement of CNS, cognitive rehabilitation, alternative communication and speech therapy.

Additionally, BCI has also shown promise in the arts, entertainment, robotics, transportation and mental health care [1], [3].

Prominent companies in the industry include OpenBCI, Emotiv, Neurosky, BrainGate, and Neuralink. Notably, Neuralink, founded in 2016 by Elon Musk, has developed the N1

Implant, a miniature chip that translates the users' brain signals through electrodes, and a surgical robot that inserts the threads of an implant into the human brain [4]. As such, the BCI companies have turned the technology from a working idea in academia to a practical item available to the public.

III. ETHICAL ISSUES

A. Safety

Recent years have seen major developments within the field of BCI technology, which have significant technical implications, but also raise a number of safety risks and concerns. Pressingly, cyberattacks and bad actors can pose a significant threat to BCI systems. Per Bernal et al. [5], advancements in cybersecurity have simply not kept pace with the field of cyberattacks, leaving BCI technology vulnerable to foreign interference. Ajrawi et al. [6] corroborates this idea, citing the fact that cybersecurity in BCI has generally been viewed as a less important aspect of the field over the years, opening BCI to a number of risks[5]. A lack of focus on physiological and psychological effects in the studies that have been conducted only increases the risk that users face.

BCIs evoke the specter of brain-hacking,[7] a form of neuro-crime that involves illegally gaining access to the brain and manipulating it in such a way. Brain hacking by feedback manipulation is a particularly troubling phenomenon; this method allows hackers to induce certain thoughts, actions, and ideas within the mind of the user, meaning that, essentially, brain-hacking can directly lead to behavioral alterations for victims. This sudden decline in ability contributes to psychological distress, which

further adds to the list of problems for BCI users. Brain-hacking also leads to major setbacks for humans attempting to use BCI to operate wheelchairs, improve vision, or bolster other key aspects of their lives.

B. Autonomy

Autonomy, the ability to make independent decisions, is a significant ethical consideration in the use of BCIs. BCIs can significantly enhance autonomy by enabling individuals, particularly those with disabilities, to interact with their environment in ways previously impossible. For example, BCIs can allow individuals to control prosthetic limbs, communicate through text generation, or operate computer systems using only their neural activity. These advancements can immensely improve quality of life by fostering greater independence and self-determination.

However, the integration of BCIs also presents challenges to autonomy. One major concern is the potential for coercion or undue influence. Users must have the freedom to choose whether to adopt BCI technology without pressure from external parties, such as employers, insurers, or even family members. Ensuring that the decision to use a BCI is genuinely voluntary is essential to respecting individual autonomy [8].

Another critical issue is informed consent. The complexity of BCI technology necessitates that users have a thorough understanding of what the technology entails, including its capabilities, limitations, and potential risks. This understanding is crucial for users to make truly informed decisions about whether to use BCIs. Developers and healthcare providers must provide clear and comprehensive information about the BCI's functionality and the implications of its use

[9]. Furthermore, BCIs could potentially blur the lines between actions initiated by the user and those influenced or executed by the device. This can lead to ambiguities about the source of actions and decisions, potentially undermining the user's sense of agency. Maintaining a clear distinction between user-driven and device-driven actions is vital to preserving the user's autonomy and self-perception [10].

It is essential to establish ethical guidelines and regulatory frameworks that protect the rights of BCI users. These should include ensuring voluntary adoption, robust informed consent processes, and safeguards against coercion. By addressing these issues, we can maximize the positive impacts of BCIs while upholding the fundamental ethical principle of autonomy [8].

C. Privacy and Security

The brain holds arguably the most private information about an individual. Unlike write-in BCIs, which induce reactions in targeted brain regions, read-out BCIs decode brain signals into intended actions. Thus, they receive a wide range of brain signals, including subconscious thoughts[10]. Currently, the line between unintentional, intimate thoughts and deliberate, public actions remains unclear [8]. That said, BCI outputs may reveal information against the will of the user, and required informed consent may fail to fully protect the user's privacy. EEG signals translated through BCIs can also transmit personal data, such as passwords, bank information, residence location, health records, and genetic data, as well as socially sensitive data, such as race/ethnic origin, gender identity, sexual orientation, religious identity, and political

beliefs [11]. Unethical uses of this data, such as through manipulation by companies and leakage to hackers, can significantly hurt the user's privacy, even under anonymity.

D. Accountability

Introducing a BCI-like system to the brain introduces a complex issue of responsibility. The system's ability to execute unwanted decisions blurs the lines of accountability. Consider a scenario where a BCI prosthetic user and another person get into an argument, and during the argument, the BCI prosthetic user unexpectedly punches another person, claiming it was unintentional immediately afterward. Should this prosthetic user be held accountable?

On the one hand, the prosthetic user should theoretically have a high degree of control over the prosthetics' movement, meaning the user likely influenced the punching action. However, dismissing claims of potential prosthetic malfunction could lead to injustice in determining accountability. In serious situations, the prosthetic user's argument would likely remain within reasonable doubt. Additionally, it's hard to determine whether or not the prosthetic user could have foreseen the punching action or how severe of an injury it could cause, which could further blur the lines when determining responsibility.

In most instances, the prosthetic user should be held primarily responsible for the harm the punching action was unintentional suggests that it was involuntary rather than pre-meditated. Still, it's essential to consider their perspective and not dismiss their claim. The lines become even more unclear when

considering the specific conditions that likely caused the prosthetic to act out of control. For instance, consider a scenario where the same BCI user from before was found to control the prosthetic by generating patterns of neural activity in his motor cortex, which an algorithm then translates and predicts the intended movement. In essence, to ensure a fair assessment, the circumstances surrounding an incident, including the functionality of the BCI at the time, need to be thoroughly investigated. However, an in-depth investigation into each case just isn't feasible for the masses, necessitating new and robust practices.

E. Mental Wellbeing and Personal Identity

Many look at the potential benefits of BCIs excitedly, and rightfully so; they have potential to revolutionize standards of living for millions around the globe. However, this may be at the cost of one's personal identity and mental wellbeing[12].

Therein lies a core debate regarding BCIs: advocating for gene enhancement versus prioritizing one's sense of self. Further, we must also weigh the benefits of gene enhancement itself-many would argue that if it allows one to restore their mobility or hearing then it is advantageous, but researchers must also consider at what point BCI's go too far in altering the core composition of the human body. Roelfsema et al. [13] discusses the possibility of BCI's being able to eventually bolster cognitive functioning within humans, but at possible detriment to one's control of their emotional state. An analysis from Aggarwal and Chugh [14] reveals that researchers have conflicting viewpoints on the impact of closed-loop devices on one's personal identity. Perhaps most alarmingly, some cite

concerns over changes in both narrative identity, a combination of one's perspective of their past and future, and numerical identity, in which an alteration would entail one becoming another person entirely. Regardless of if one believes in the impact of BCI on personal identity, one fact is clear: there is not yet sufficient empirical data to draw a conclusion in favor of either side.

IV. CONCLUSION

While many ethical issues still plague the development of BCIs, with innovative techniques and ideas, humanity as a species can harness the transformative potential of BCIs responsibly. Addressing safety concerns through advanced cybersecurity measures and robust protocols is crucial to protect users from physical and psychological harm. Ensuring autonomy by establishing stringent informed consent procedures and safeguarding against coercion will respect individuals' freedom to make independent decisions about using BCIs.

Privacy concerns demand rigorous protection of neural data, preventing unauthorized access and misuse.

Accountability requires Society to hold BCI users accountable for actions and inactions mediated by properly functioning devices, and hold manufacturers and installers accountable for BCIs that cause harm because of failure due to design or manufacturing defects.

By fostering continuous research, dialogue, and ethical considerations, we can navigate these challenges and integrate BCIs into society in a way that maximizes their benefits while mitigating risks. Through a collective effort, BCIs can revolutionize the way we interact with technology and improve lives, all while upholding the highest ethical standards.

REFERENCES

- [1] M. F. Mridha *et al.*, “Brain-computer interface: Advancement and challenges,” *Sensors (Basel, Switzerland)*, vol. 21, no. 17, p. 5746, Aug 2021.
- [2] X. Gao *et al.*, “Interface, interaction, and intelligence in generalized brain-computer interfaces,” *Trends in cognitive sciences*, vol. 25, no. 8, pp. 671–684, 2021.
- [3] M. Fried-Oken *et al.*, “Human visual skills for brain computer interface use: a tutorial,” *Disability and rehabilitation. Assistive technology*, vol. 15, no. 7, pp. 799–809, 2020.
- [4] Neuralink, “Neuralink – pioneering brain computer interfaces,” <https://www.neuralink.com/>, 2024.
- [5] S. L. Bernal, A. H. Celdran, G. M. Perez, M. T. Barros, and S. Balasubramaniam, “Security in brain-computer interfaces: state-of-the-art, opportunities, and future challenges,” *ACM Computing Surveys (CSUR)*, vol. 54, no. 1, pp. 1–35, 2021.
- [6] S. Ajrawi, R. Rao, and M. Sarkar, “Cybersecurity in brain-computer interfaces: Rfid-based design-theoretical framework,” *Informatics in Medicine Unlocked*, vol. 22, p. 100489, 2021.
- [7] M. Ienca and P. Haselager, “Hacking the brain: Brain-computer interfacing technology and the ethics of neurosecurity,” *Ethics and Information Technology*, vol. 18, no. 2, pp. 117–129, Apr 2016. [Online]. Available: <https://link.springer.com/article/10.1007/s10676-016-9398-9>
- [8] L. Drew, “The ethics of brain-computer interfaces,” *Nature*, vol. 571, no. 7766, pp. S19–S21, 2019.
- [9] E. Karikari and K. A. Koshechkin, “Review on brain computer interface technologies in healthcare,” *Biophysical reviews*, vol. 15, no. 5, pp. 1351–1358, Sep 2023.
- [10] X.-y. Sun and B. Ye, “The functional

- differentiation of brain–computer interfaces (bcis) and its ethical implications,” *Humanity and Social Sciences Communication*, vol. 10, p. 878, Nov 2023.
- [11] A. Agarwal *et al.*, “Protecting privacy of users in brain computer interface applications,” *IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in Medicine and Biology Society*, vol. 27, no. 8, pp. 1546–1555, 2019.
- [12] S. Burwell, M. Sample, and E. Racine, “Ethical aspects of brain computer interfaces: a scoping review,” *BMC Medical Ethics*, vol. 18, p. 60, 2017.
- [13] P. R. Roelfsema, D. Denys, and P. C. Klink, “Mind reading and writing: The future of neurotechnology,” *Trends in Cognitive Sciences*, vol. 22, no. 7, pp. 598–610, 2018. [Online]. Available: <https://www.sciencedirect.com/science/article/pii/S1364661318300925>
- [14] S. Aggarwal and N. Chugh, “Ethical implications of closed loop brain device: 10-year review,” *Minds and Machines: Journal for Artificial Intelligence, Philosophy and Cognitive Science*, vol. 30, no. 1, pp. 145–170, 2020.