



The Relationship between Experiencing Shocking and Non-Shocking Life Events and the Onset of Major Depression among Individuals without Depression 12 Months Ago



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Introduction

- Two significant risk factors for developing major depression are experiencing major life events (defined as shocking events) and experiencing major life stressors (defined as non-shocking events) (Kendler 1995, Slavich 2014).
- The majority of individuals with major depression experienced negative life events in the 6 months before its onset (Kohn 2001).
- However, existing studies only look at either shocking or non-shocking events and their association with the onset of major depression. These two types of events are never compared.

Research Questions

- Is experiencing a shocking/non-shocking event significantly associated with the onset of major depression?
- Which type of event is more strongly associated with developing major depression?

Methods

Sample

- Individuals who did not have major depression over 12 months ago (n=36,042) were drawn from Wave 1 of the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC).
- NESARC is a nationally representative sample of non-institutionalized U.S. adults.

Measures

- Major depression prior to and during the last 12 months was assessed using the NIAAA, Alcohol Use Disorder and Associated Disabilities Interview Schedule – DSM-IV (AUDADIS-IV).
- Having experienced a shocking event is defined as experiencing at least one of the three specified shocking events in the past 12 months.
- Having experienced a non-shocking event is defined as experiencing at least one of the three specified non-shocking events in the past 12 months.

Results

Univariate

- 38.0% of individuals who did not have major depression over 12 months ago experienced a shocking event.
- 15.5% of individuals who did not have major depression over 12 months ago experienced a non-shocking event.

Bivariate

- Chi-Square analysis showed that individuals who experienced a shocking event were significantly more likely to have developed major depression (3.6%) than those who didn't experience a shocking event (1.3%), $X^2=202.3$, 1 df, $p<.0001$.
- Chi-Square analysis showed that individuals who experienced a non-shocking event were significantly more likely to have developed major depression (5.5%) than those who didn't experience a non-shocking event (1.6%), $X^2=331.8$, 1 df, $p<.0001$.

Multivariate

- Logistic regression analyses showed that experiencing a shocking event (O.R. 2.32, CI: 2, 2.7, $p<.0001$) is significantly and positively associated with odds of developing major depression after controlling for experiencing a non-shocking event, age, and biological sex (Fig. 2).
- Logistic regression analyses showed that experiencing a non-shocking event (O.R. 2.55, CI: 2.18, 2.98, $p<.0001$) is significantly and positively associated with odds of developing major depression after controlling for experiencing a shocking event, age, and biological sex (Fig. 2).
- Biological sex (O.R. 1.72, CI: 1.48, 2, $p<.0001$) is significantly and positively associated with odds of developing major depression, with women having an expected odds that is 1.72 times higher than men, holding all other variables fixed.

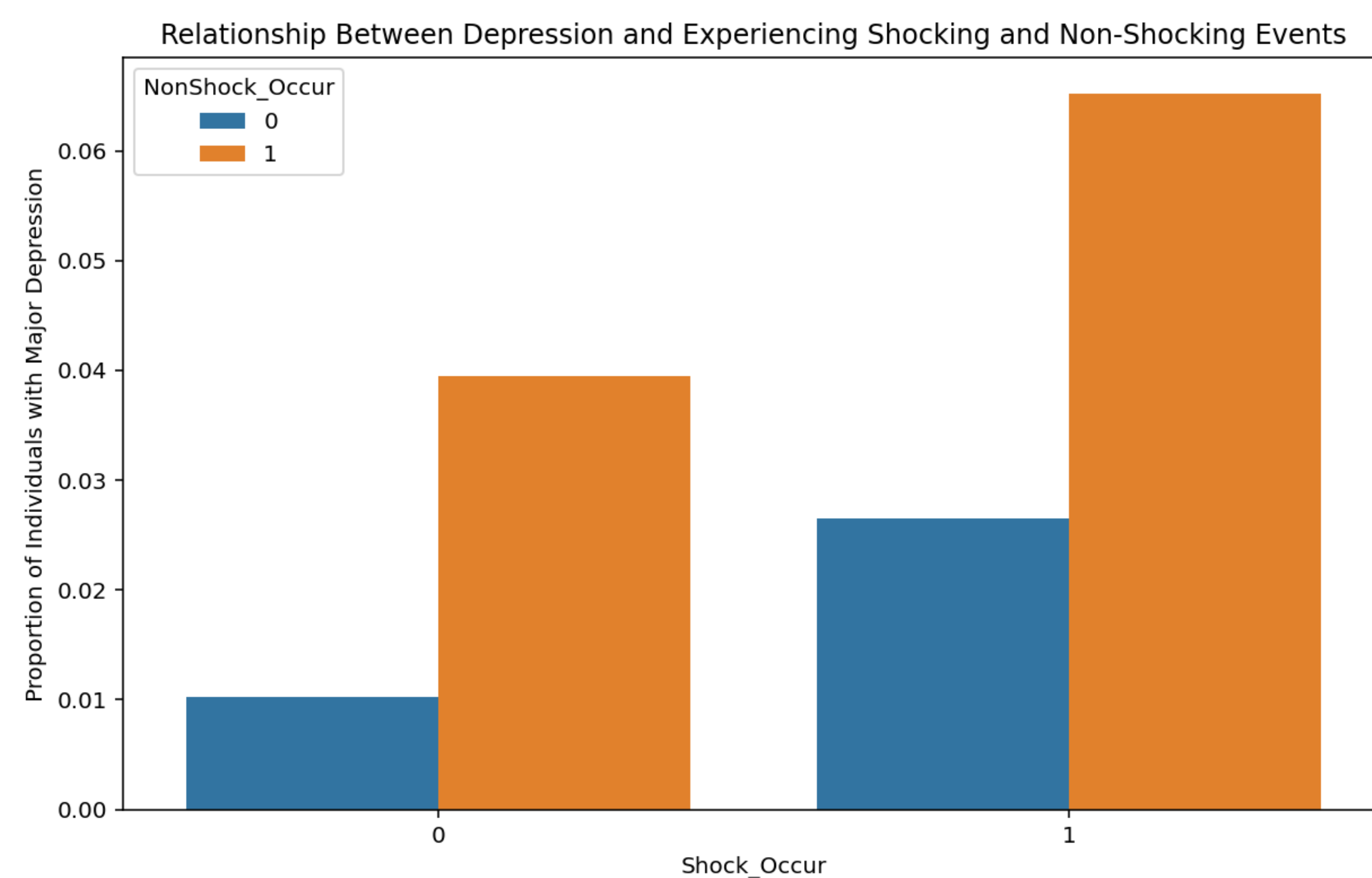


Figure 1: Relationship Between Depression and Experiencing Shocking and Non-Shocking Events

Predicted Probability of Having Depression by Shocking and Non-Shocking Events

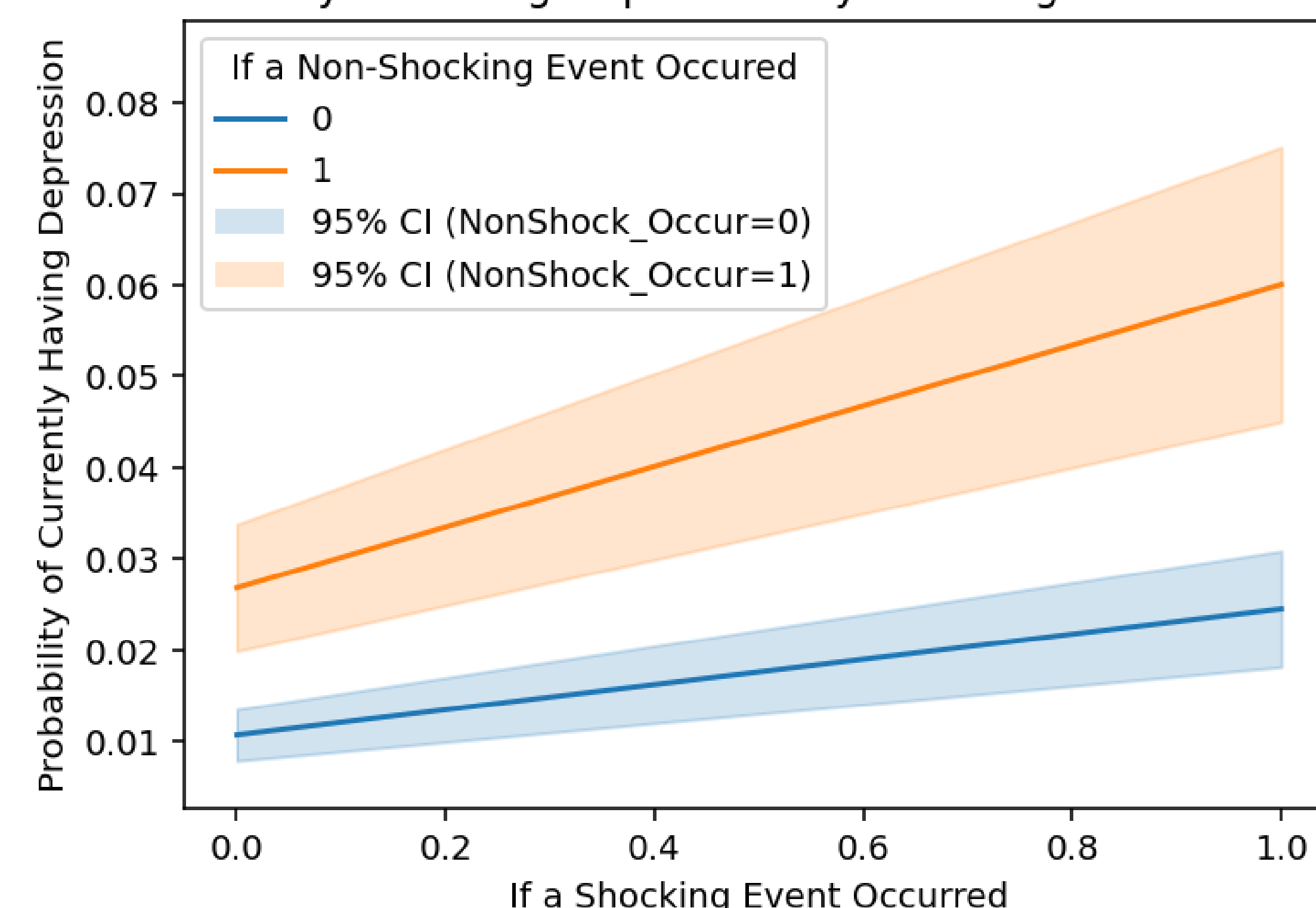


Figure 2: Predicted Probability of Having Depression by Shocking and Non-Shocking Events

Discussion

- Experiencing a shocking/non-shocking event is significantly and positively associated with the onset of major depression.
- However, experiencing a non-shocking event is more strongly associated with developing major depression as compared to a shocking event.
- These results may allow mental health professionals to make more informed decisions regarding patients who have experienced major life events.
- Further research is needed to determine whether the presence of other mental illnesses is also associated with the onset of major depression.

References

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