

The Influence of Faith Practice on Depression Rates: A Cross-Gender Analysis

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Abstract

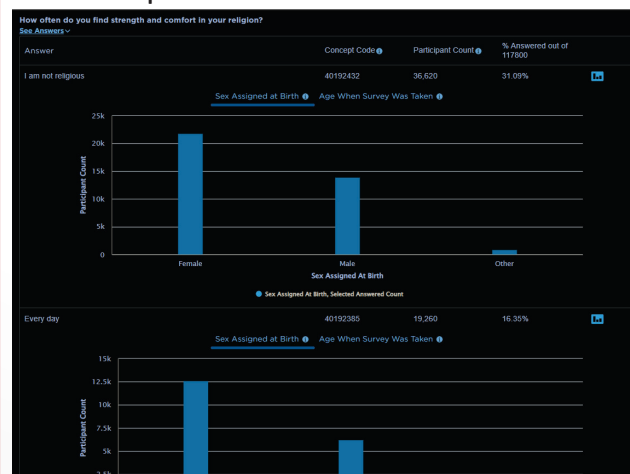
This research proposal aims to explore the potential relationship between practicing faith and depression rates in different cultural contexts. Depression is a prevalent mental health condition that affects millions of people worldwide. This study will investigate whether engaging in religious or spiritual practices has an impact on depression rates, and if so, how these practices may act as potential protective factors against depressive symptoms. The research will employ a cross-gender approach to assess the varying effects of faith practice on depression rates across diverse populations.

Background

In the All of Us Patient Responded Database, patients reported “I am not religious” to the statement How often do you find strength and comfort in your religion at 31.09% of the participant count. 16.35% responded everyday to that question. This suggests there is about a third of patient population represented here who are not finding comfort and strength in faith. Additionally out of 30,540 people, 11,680 people responded yes to being diagnosed with depression. Proportionally, woman have ~3% higher rate of depressive episodes

Materials and Methods

- Utilizing the All of Us Health Database, I am essentially synthesizing and simplifying the idea that less strength and comfort tends to lead to depressive episodes. Proportionally females experience more strength and comfort everyday compared to men by ~2%.
- Analyzing 5-Hydroxyindoleacetate (a metabolite of serotonin in the urine) and 5-hydroxytryptamine chemistry (serum serotonin in the blood), data suggests that men have more serotonin in the body, ostensibly suggesting they experience less depression rates than men, however, woman practicing faith experience more comfort and strength suggesting faith has a inverse relationship with depression.



Results



Conclusion

Results indicate that women tend to experience more comfort and strength when tied to their faith everyday in contrast to man by a couple of percentage points proportionally. Although men are examined to have higher serotonin concentrations, and little difference in depressive episodes compared to woman, men who do not practice faith have greater incidence of feeling less strength and comfort in their lives compared to their female counterparts.

Future Direction

Ultimately, there is not enough data on the amount of serum serotonin in patients as the n=720 patients reported. Future plans intend on finding more representative serotonin population size samples to examine a greater trend in faith alleviating depressive episodes.

Acknowledgments