

Sleep, Physical Activity, and Depressive Symptoms

Exploring wearable-derived behavioral signals and mental health

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Motivation & Research Questions

Why this dataset?

- Wearables offer continuous, real-world behavioral data
- Mental health is often under-measured between clinical visits

Research Questions

- Is sleep duration associated with depressive symptom severity?
- Is physical activity (step count) associated with depressive symptoms?

Data Overview

Dataset Used

- GLOBEM Dataset: Multi-Year Datasets for Longitudinal Human Behavior Modeling Generalization

Key Details

- Unit of analysis: participant-day
- Final merged dataset: ~159 observations
- Key variables:
 - Sleep duration (daily & 7-day rolling)
 - Average daily steps
 - BDI-II score

Data Cleaning & Feature Selection

What I did:

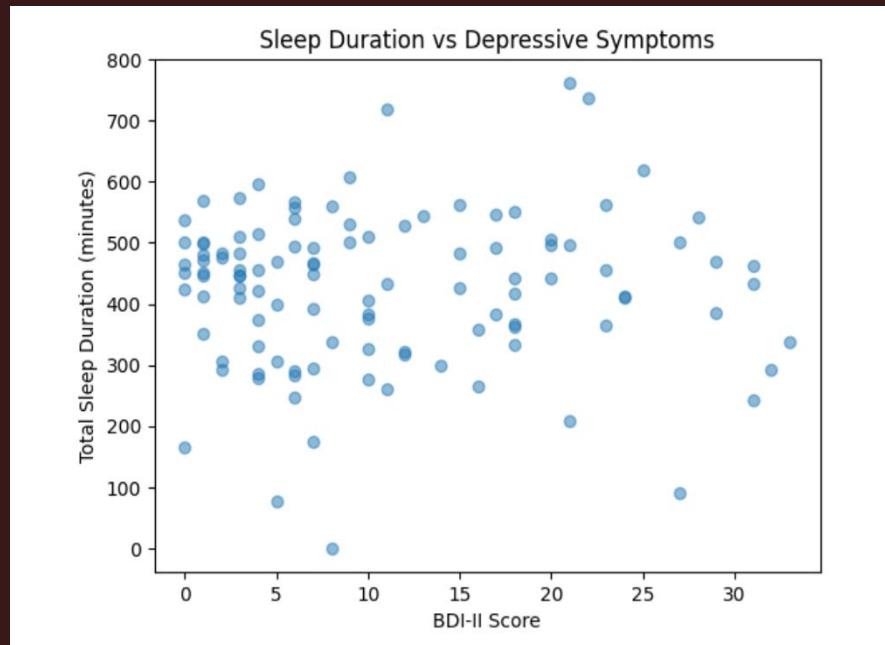
- Filtered to daily (:allday) and 7-day (:7dhist) summaries
 - Removed:
 - Intraday features
 - Normalized (_norm) and discretized (_dis) columns
 - Dropped features with >95% missingness
 - Merged datasets on pid and date

```
sleep_activity_end = sleep_activity.merge(  
    endterm[["pid", "date", "BDI2"]],  
    on=["pid", "date"],  
    how="inner"  
)  
  
sleep_activity_end.head()  
[9] ✓ 0.0s Open 'sleep_activity_end' in Data Wrangler
```

Sleep Duration vs Depressive Symptoms

Visualization: Scatterplot (BDI-II vs sleep duration)

- Key Observations
 - High variability in sleep across all BDI-II scores
 - No strong linear trend
 - Higher depression scores appear more frequently among shorter or irregular sleep durations
- Takeaway
 - Sleep may be weakly associated with depressive symptoms, but the relationship is noisy.

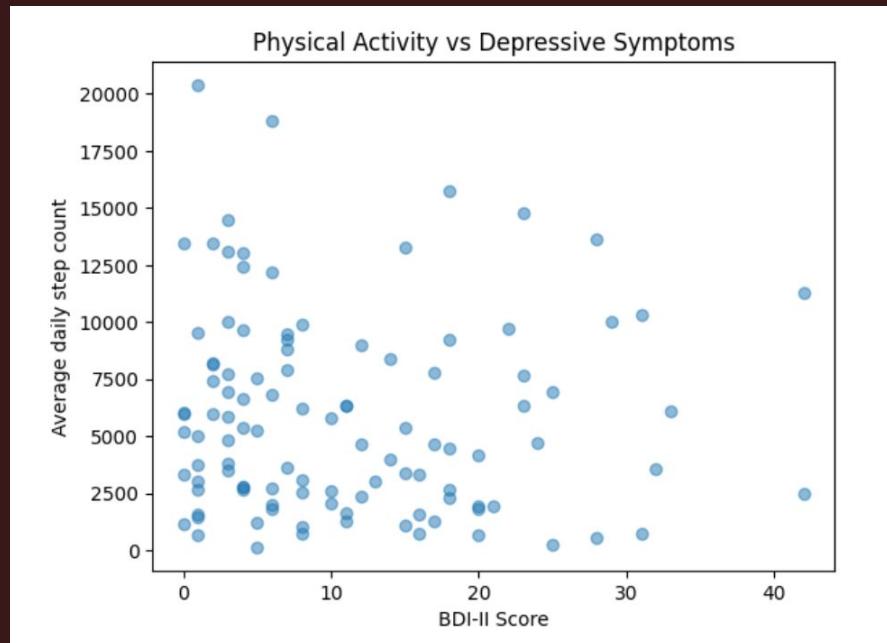


Sleep Duration vs Depressive Symptoms

Visualization: Scatterplot (BDI-II vs average daily steps)

Key Observations

- Wide range of activity at all depression levels
- No clear monotonic or linear relationship
- Takeaway
 - Step count alone does not appear to meaningfully distinguish depressive symptom severity.



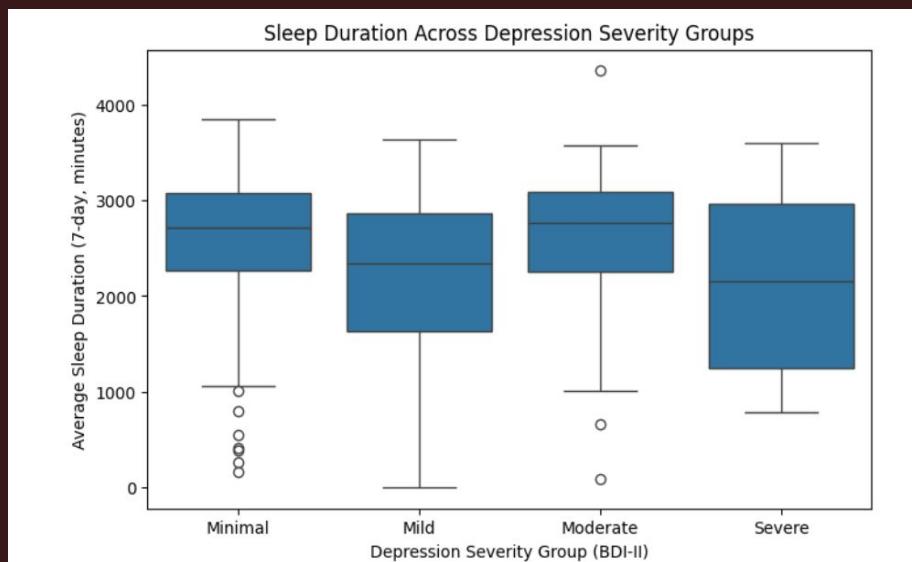
Regression Analysis

- Outcome: BDI-II score
- Predictors:
 - 7-day average sleep duration
 - 7-day average step count
- Results
 - Sleep duration: small but statistically significant negative association
 - Step count: not statistically significant
 - Low R² (~0.04)
- Interpretation
 - Sleep contributes modest explanatory power
 - Physical activity does not add much in this model.

```
OLS Regression Results
=====
Dep. Variable:      BDI2    R-squared:       0.036
Model:              OLS     Adj. R-squared:   0.023
Method:             Least Squares  F-statistic:     2.897
Date:          Fri, 30 Jan 2026  Prob (F-statistic): 0.0582
Time:           16:58:44    Log-Likelihood:  -591.28
No. Observations:  159     AIC:            1189.
Df Residuals:     156     BIC:            1198.
Df Model:          2
Covariance Type:  nonrobust
=====
                                         coef    std err      t      P>|t|   [0.025
-----
const                           18.8948    2.785   6.784   0.000   13.393
f_slp:fitbit_sleep_summary_rapids_sumdurationasleepmain:7dhist  -0.0019    0.001  -2.071   0.040   -0.004
f_steps:fitbit_steps_summary_rapids_avgsumsteps:7dhist        -0.0003    0.000  -1.167   0.245   -0.001
=====
Omnibus:                  18.327   Durbin-Watson:    2.047
Prob(Omnibus):            0.000    Jarque-Bera (JB): 21.270
Skew:                      0.885    Prob(JB):      2.41e-05
Kurtosis:                 3.282    Cond. No.    2.48e+04
=====
Notes:
[1] Standard Errors assume that the covariance matrix of the errors is correctly specified.
[2] The condition number is large, 2.48e+04. This might indicate that there are
strong multicollinearity or other numerical problems.
```

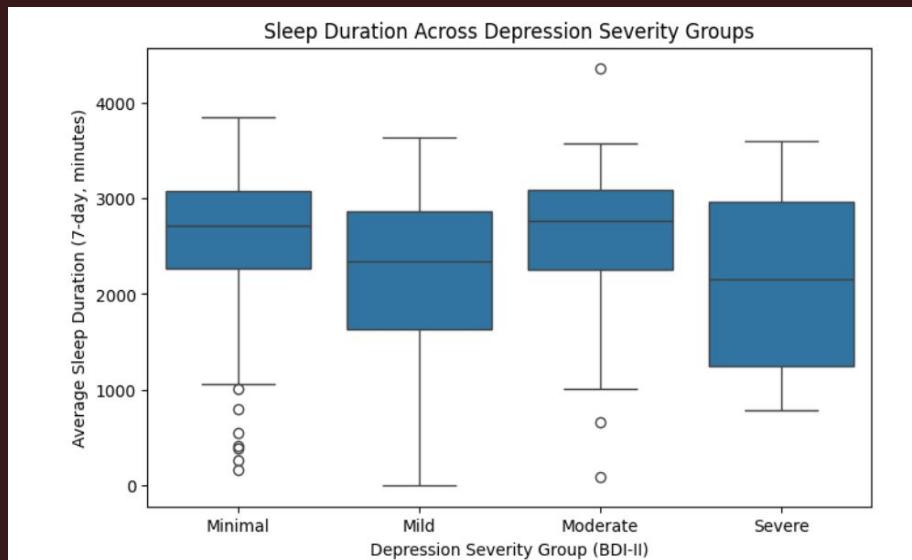
Depression Severity Groups

- Clinical Cutoffs Used
 - Minimal: 0–13
 - Mild: 14–19
 - Moderate: 20–28
 - Severe: 29+
- Things to note:
 - Higher severity groups tend to have:
 - Lower median sleep duration
 - Greater variability in sleep
 - Substantial overlap between groups remains
- Interpretation
 - Disrupted or insufficient sleep may be associated with more severe depressive symptoms, but it is not a standalone predictor.



Limitations & Future Work

- Limitations
 - Cross-sectional analysis
 - Missingness in wearable data
 - Control for confounders? (age, medication, etc.)
 - Wearable compliance variability
- Future Directions
 - Longitudinal modeling (within-person changes)
 - Use mixed-effects or time-series models





Conclusion

Exploring wearable-derived behavioral signals and mental health

Key Takeaways

- Sleep shows a modest association with depressive symptoms
- Physical activity (steps) shows little relationship
- Wearable data provides useful behavioral context but is insufficient alone in this context