**Analysis Plan**

**1.  Title Information**

a. **Proposal Title:** Association between Flood Risk and Health Outcomes

b. **Abbreviated Title:**

c. **Suggested key words:**  **Keywords that are often used in publications**

**2.**   **Lead Author Name:**

**3.**   **Co-authors, Contact Information, and Responsibilities:**

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| **Name** | **Contact Information** | **Responsibilities** |
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**5.**   **Background/Rationale:**

**A brief literature review and the knowledge gap. You can think of this is a precursor to the first 1 or 2 paragraphs in a manuscript introduction.**

Health effects (see Taylor’s lit review)

Flood risk

BHM

**6**. **Brief Overview**:

**A summary of your proposed analysis. This can build upon the background/rationale to include your analysis and some expected results. You can think of this as the penultimate or last paragraph in a manuscript introduction.**

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**7.**   **Research Questions & Hypotheses:**

**One to three aims or objectives of the manuscript. Since these aims are intended for one manuscript, then they are likely related but not necessarily dependent. One to four sentences each.**

**Aim #1:** To investigate associations between flood risk and mortality.

***Hypotheses:*** *We hypothesize that higher flood risk is associated with higher mortality. If longer term flood risk predictions are associated with higher health impacts, that would imply that long-term effects of climate change can have health impacts over the short term.*

**Aim #2:** To investigate whether the relationship between flood risk and mortality is modified by social vulnerability factors.

***Hypothesis:*** *We hypothesize that the relationship between flood risk and mortality will be enhanced in areas of high social vulnerability.*

**8.**   **Data:**

1. Study domain and/or population:

All counties in the conterminous United States.

Relevant data include the County Adjacency File provided by the Census Bureau (<https://www.census.gov/programs-surveys/geography/library/reference/county-adjacency-file.html>).

To-do: sort the states by environmental characteristics, i.e. whether it’s inland or coastal (see plots in <https://assets.firststreet.org/uploads/2020/06/first_street_foundation__first_national_flood_risk_assessment.pdf>)

1. Study years:
   * Outcome:
     1. Life Expectancy: 2014
     2. Age-specific mortality risk: 2014
     3. Deaths due to various CVD causes: 2016-2018
   * Exposures:
     1. Flood Risk: 2020 (present) and 2050 (climate-adjusted future)
   * Other Covariates:
     1. CACES air pollution
     2. Smoking prevalence
   * Mediators, Moderators, etc.
     1. CDC SVI: 2018

There may be a mismatch of years between the outcome and exposures. The assumption is that the exposure doesn’t change drastically over the short term.

1. Outcomes:

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| **Outcome Type** | **Variable Names and Description of Variable from Orig Source** | **Details from Orig Source** | **Analytical Treatment** |
| Life Expectancy | “Life expectancy, 2014\*”  Data also available for 1980, 1985, 1990, 1995, 2000, 2005, and 2010  \*Life expectancy at birth (years). Numbers in parentheses are 95% uncertainty intervals.  “% Change in Life Expectancy, 1980-2014” | Results of the study were published in JAMA in May 2017 in "Inequalities in life expectancy among US counties, 1980-2014."  <http://ghdx.healthdata.org/record/ihme-data/united-states-life-expectancy-and-age-specific-mortality-risk-county-1980-2014> (see README\_1.txt for suggested citation) | Uncertainty interval provided. Including uncertainty in outcome is probably standard in BHMs. |
| Age-specific Mortality Risk | “Mortality risk, 2014\*”  Available for age ranges 0-5, 5-25, 25-45, 45-65, and 65-85 y.o.  Data also available for 1980, 1985, 1990, 1995, 2000, 2005, and 2010  \*Probability of death, for given age range (%). Numbers in parentheses are 95% uncertainty intervals.  “% Change in mortality risk, 1980-2014” | Mortality risk is the probability of death during the given age range conditional on being alive at the beginning of the age range.  Same source as for life expectancy (see above). | Uncertainty interval provided.  If I can find proportion of people alive at the start of the age ranges, I can recalculate the mortality risk for other age ranges. |
| Specific Health Outcomes | "Current asthma among adults aged >=18 years"  "High blood pressure among adults aged >=18 years"  "Mental health not good for >=14 days among adults aged >=18 years"  "Coronary heart disease among adults aged >=18 years"  "Physical health not good for >=14 days among adults aged >=18 years"  And 8 other health outcomes | In addition to the health outcomes of interest on the left, there are 5 chronic disease-related unhealthy behaviors, and 10 on use of preventative services.  <https://chronicdata.cdc.gov/500-Cities-Places/PLACES-Local-Data-for-Better-Health-Census-Tract-D/cwsq-ngmh>  Data sources used to make dataset include BRFSS 2018 or 2017 data (just for HBP and cholesterol on left side), Census Bureau 2010 population data, and ACS 2014-2018 or 2013-2017 estimates |  |

1. Covariates:
   * Exposure definition:

The main exposure of interest is flood risk as measured by the First Street Foundation (FSF) model. Source of dataset: <https://registry.opendata.aws/fsf-flood-risk/>. All details from original source can be found in <https://assets.firststreet.org/uploads/2020/06/first_street_foundation__first_national_flood_risk_assessment.pdf>.

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| **Flood Risk Type** | **Variable Names and Description of Variable from Orig Source** | **Details from Orig Source** | **Analytical Treatment** |
| Comparison with Federal Emergency Management Agency (FEMA) Special Flood Hazard Areas (SFHA) | count\_property (the number of First Street properties in the county),  count\_fema\_sfha (number of properties in FEMA SHFA),  pct\_fema\_sfha (percent of properties in FEMA SFHA),  pct\_fs\_fema\_difference\_2020 (percent difference between number of First Street properties and FEMA properties at risk in 2020) | FEMA classifies 8.7 M properties as having substantial risk (1% annual), i.e. within SFHAs. By contrast, the FSF classifies 14.6 M properties with same level of risk. Discrepancy is due to FSF using current climate data, mapping precip as a stand-alone risk, and includes areas FEMA doesn’t  (https://firststreet.org/mission/) | These variables will probably not be directly used in the model. They may be used to process other variables. |
| Percent of First Street Properties at 3 levels of severity and 2 time points | pct\_fs\_risk\_2020\_5,  pct\_fs\_risk\_2050\_5,  pct\_fs\_risk\_2020\_100,  pct\_fs\_risk\_2050\_100,  pct\_fs\_risk\_2020\_500,  pct\_fs\_risk\_2050\_500.  2020 refers to present-time, and 2050 refers to the climate adjusted future. See right for the 5, 100, 500. | Table  Description automatically generatedAccording to environmental factors, there will be ~11% increase in flood risk over the next 30 years (to 2050). | Can subtract 2020 variable from 2050 variable to get percent change in properties at certain risk |
| Average Risk Score of Properties | avg\_risk\_score\_all,  avg\_risk\_score\_2\_10,  avg\_risk\_fsf\_2020\_100,  avg\_risk\_fsf\_2020\_500,  avg\_risk\_score\_sfha,  avg\_risk\_score\_no\_sfha | The Flood Factor (FF) is an indicator of a property’s practical flood risk from 1 to 10. High flood factors correspond to being more likely to flood and/or more likely to experience high floods. FF is determined by the property’s likelihood of flooding and the potential depth of that flood. Flood risks accumulate over time, so FF specifically looks at the likelihood of water reaching the building/center of empty lot at least once within the next 30 years.  Properties with less than 0.2% chance of experiencing any depth of flooding in any year within the next 30 years have FF of 1 (minimal risk). | The uncertainty can be measured by count\_property |
| Percent of Properties with a given Flood Factor | pct\_floodfactor1,  …,  pct\_floodfactor10 | Divide by count\_property |

* + Confounders/other covariates

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| **Other Covariate Type** | **Variable Names and Description of Variable from Orig Source** | **Details from Orig Source** | **Analytical Treatment** |
| Smoking Prevalence (<http://ghdx.healthdata.org/record/ihme-data/united-states-smoking-prevalence-county-1996-2012>) | total\_mean (% of people who currently smoke)  daily\_mean (% of people who currently smoke daily) | Prevalences available for male, female, and both; for individual years 1996-2012.  Variables ending in \_lb, \_ub are 95% uncertainty bounds | “As of 2012 there were 3,143 counties and county equivalents. To account for changes over the study period, we merged some counties to get consistent areas, for a total of 3,127 counties.”  -From assoc. paper |
| CACES LUR Air Pollution (<https://www.caces.us/data>) | Population-weighted concentration based on block level centroid predictions for 6 pollutants: co (ppm), no2 (ppb), o3 (ppb), pm10 (µg/m^3), pm25 (µg/m^3), so2 (ppb)  Population-weighted latitude and longitude based on block level centroid: lat/lon | Citation:  "This article includes concentration estimates developed by the Center for Air, Climate and Energy Solutions using v1 empirical models as described in Kim S.-Y.; Bechle, M.; Hankey, S.; Sheppard, L.; Szpiro, A. A.; Marshall, J. D. 2020. “Concentrations of criteria pollutants in the contiguous U.S., 1979 – 2015: Role of prediction model parsimony in integrated empirical geographic regression.” PLoS ONE 15(2), e0228535. DOI: 10.1371/journal.pone.0228535  ." | Data is for the year 2015. There are other years available.  Model estimates except for O3 are annual-average values. Ozone model estimates are the average during May-Sept of the daily maximum 8-hr moving average. Either way, only for years with available monitoring data. |

* + Mediators: N/A
  + Moderators:

These are variables that will interact with the covariates above. One can stratify on SVI (low/medium/high). Categorical and continuous variable interactions are more interpretable than continuous and continuous variable interactions. Can see <https://jenfb.github.io/bkmr/overview.html> for example model set ups and ggplot visualizations.

CDC Social Vulnerability Index (SVI) <https://www.atsdr.cdc.gov/placeandhealth/svi/data_documentation_download.html> (includes suggested citation). All variables are calculated from the 5-year American Community Survey (2014-2018 for the 2018 SVI version). Data also available for 2000, 2010, 2014, 2016.

There are four themes of social vulnerability: socioeconomic, household composition/disability, minority status/language, housing type/transportation. The EPL\_ variables (see below) are percentile ranks for each of the variables, ordered by county. Higher values of the EPL\_ variables indicate higher social vulnerability.

There are several prefixes that can go before each variable listed in the next table.

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| **Prefix** | **Meaning** |
| E\_ | estimate |
| M\_ | 90% margins of error for the estimates. Can be incorporated in BHM. |
| EP\_ | Percentage of … |
| MP\_ | Margin of error for the percentage of… Can be incorporated in BHM. |
| EPL\_ | Percentile of the percentage of… (in Excel, calculated as PERCENTRANK.INC on EP\_ variable) |
| SPL\_ | Sum of the EPL\_ variables for the theme, suffixes are THEME1, THEME2, THEME3, THEME4 |
| RPL\_ | Percentile ranking of SPL\_ variable across counties (in Excel, calculated as PERCENTRANK.INC on SPL\_ variable) |
| F\_ | Binary indicator where 1 means the county is in the top 10% (above 90th percentile) in a certain variable, and 0 means the county is not in the top 10%. Indicates high vulnerability |

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| **Aggregated Variable** | **Meaning** |
| SPL\_THEMES | sum of SPL\_THEME1 + … + SPL\_THEME4 |
| RPL\_THEMES | percentile ranking of SPL\_THEMES across county |
| F\_THEME# | Sum of flags for THEME1, … THEME4 |
| F\_TOTAL | Sum of flags for the four themes |

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| **SVI Type** | **Variable Names and Description of Variable from Orig Source** | **Details from Orig Source** | **Analytical Treatment** |
| Description of County | TOTPOP (population),  HU (# housing units),  HH (# households) |  | These variables will not be directly used in the model. They may be used to process other variables. |
| Socioeconomic | POV (below poverty)  UNEMP (16+ unemployed)  PCI (per capita income)  NOHSDP (25+ no high school) | E\_PCI/EP\_PCI and M\_PCI/MP\_PCI are the same |  |
| Household Composition/Disability | AGE65 (≥ 65 y.o.)  AGE17 (≤ 17 y.o.)  DISABL (civilian noninstitutionalized w/ disability)  SNGPNT (single parent household with < 18 y.o. children) |  |  |
| Minority Status/Language | MINRTY (all except white non-hispanic)  LIMENG (≥5 y.o. speak English “less than well”) |  |  |
| Housing Type/Transportation | MUNIT (housing in structures w/ ≥ 10 units)  MOBILE (mobile homes)  CROWD (household level, more people than rooms) NOVEH (households with no vehicles)  GROUPQ (persons in group quarters) |  |  |
| Other Variables | UNINSUR (those w/o health insurance in the total civilian noninstitutionalized population)  E\_DAYPOP (estimated daytime population) | UNINSUR has E\_, M\_, EP\_, MP\_ versions  These variables are excluded from the SVI rankings |  |

1. Missingness/ Exclusion criteria: **Missing, censored, or excluded data – both outcome and covariates.**
2. **Statistical Analysis Plan and Methods:**

**Discuss the proposed statistical models – plain English explanation and some equations if applicable**

A Conditional Autoregressive model will be fitted. An adjacency matrix will be calculated, where 1 indicates pairs that are neighbors and 0 indicates pairs with only one county or counties that are not neighbors. The adjacency matrix will be calculated from the County Adjacency File provided by the Census Bureau (<https://www.census.gov/programs-surveys/geography/library/reference/county-adjacency-file.html>).

Can also try S.CARdissimilarity, if you have dissimilarity metrics handy

Can redo in rstan, for greater control

Can use MVS.CARleroux() for multiple response variables

* List of expected or potential tables: *consult Dominici paper*
* List of expected or potential figures/graphics:

# Anticipated pitfalls/challenges and limitations

# Challenges:

# *Solution:*

# Limitations:

1. **Manuscript Timeline**

**Goal for manuscript submission and other relevant subgoals (e.g. Methods, Results, Conference abstract).**

1. **References:**