

US EPA ARCHIVE DOCUMENT

# PROXIMITY TO ENVIRONMENTAL HAZARDS: ENVIRONMENTAL JUSTICE AND ADVERSE HEALTH OUTCOMES: DISCUSSION

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# OBJECTIVES

- Comment on appropriateness of proximity and exposure to envl hazards to be considered in envl analysis and decision / policy making.
- Should other factors be considered in envl justice decision / policy making besides the 7?

# OBJECTIVES

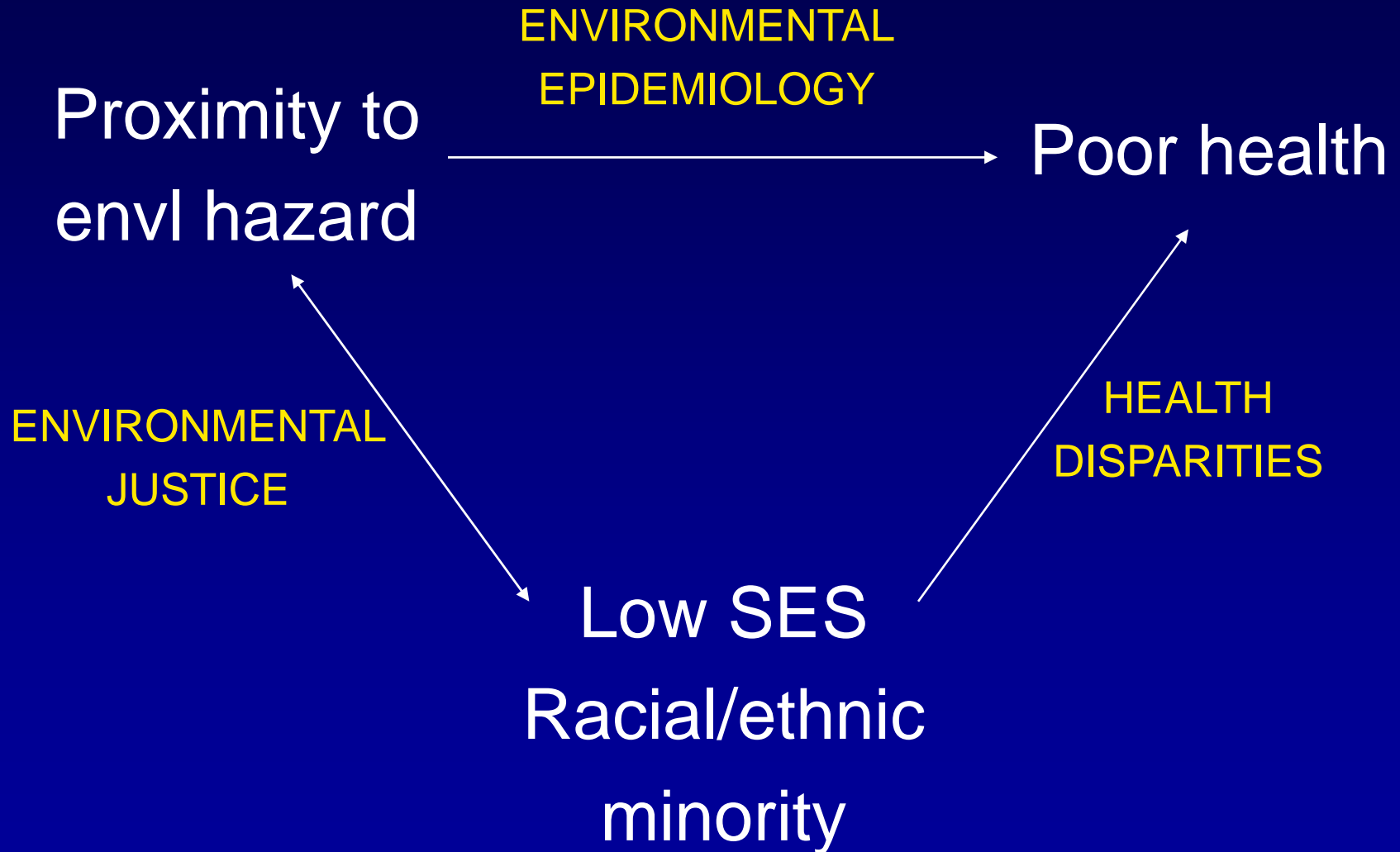
- (Provide framework for concepts)
- Potential future applications or directions
- Issues

# APPROPRIATENESS AND OTHER FACTORS

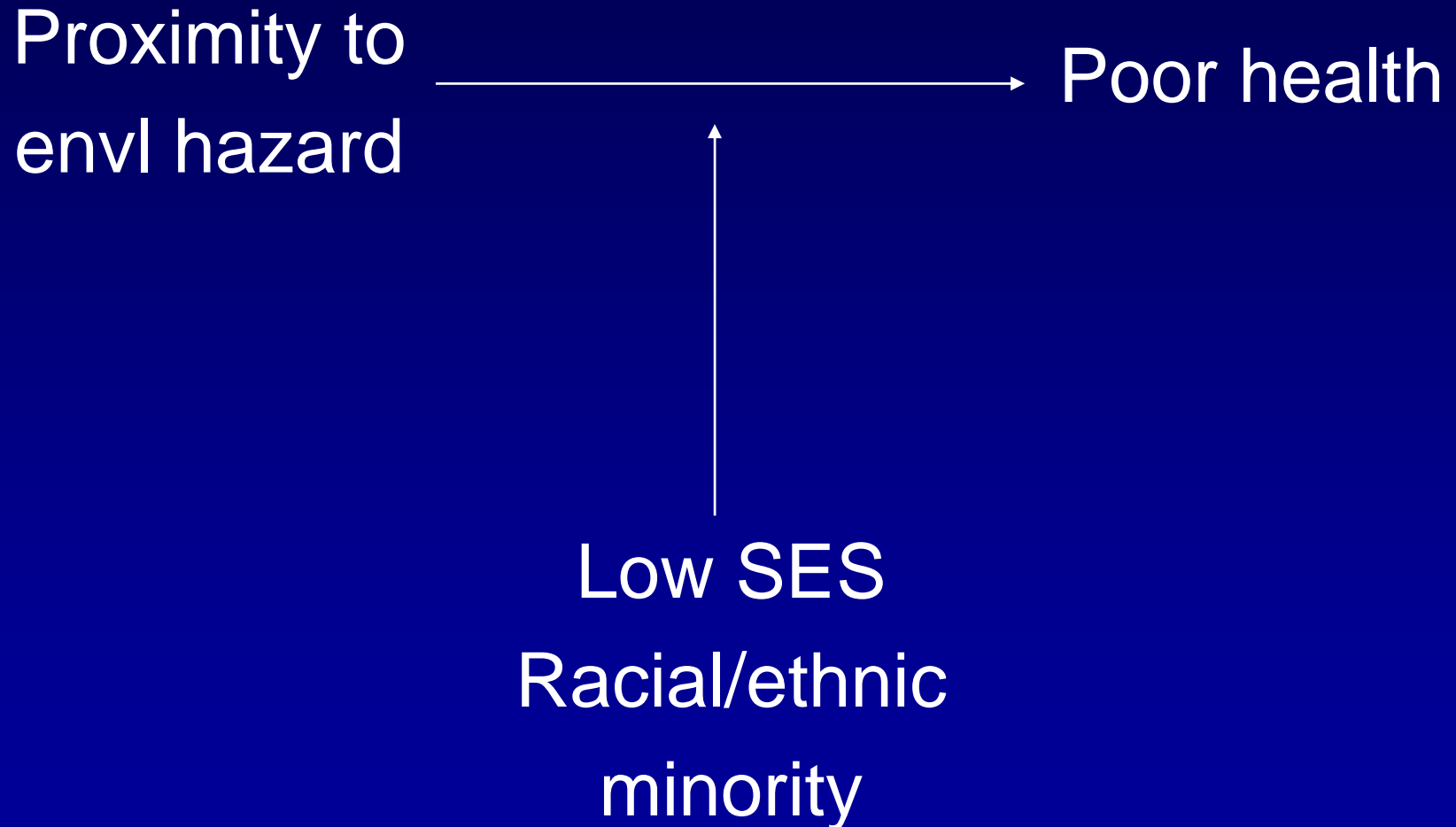
- Appropriate to consider proximity in decision-making and policy? Yes
  - What people are concerned about
  - Often best we can do without in-depth exposure assessment or biomarkers of exposure
- May be challenging to implement
- Other factors?
  - Possibly not at present; the 7 good start

# CONCEPTUAL FRAMEWORK





# Effect Modification





# POTENTIAL ISSUES, APPLICATIONS, AND IMPLICATIONS

My goal: Stimulate discussion

# EXPOSURE ASSESSMENT: PROXIMITY AS PROXY

- **MAIN LIMITATION:** Using proximity to substitute for actual amount of exposure
- **Disadvantages:**
  - May not be accurate
  - Hard to interpret
  - Conditions differ between studies, areas
- **Advantages:**
  - What people think about
  - May be useful screen for further in-depth studies

# EXPOSURE ASSESSMENT: METHODS TO DEFINE PROXIMITY

- **STATED CONCLUSION:** Generally:  
Spatial coincidence analysis < distance-based analysis < pollution plume modeling
- **COMMENT:** All have advantages and disadvantages
- Distance-based advantages may include...
  - What people think about?
  - Still air and resulting peak exposures?

# EXPOSURE ASSESSMENT: DAYTIME ADDRESSES

- **STATED RECOMMENDATION:** To better understand environmental impact, need to also consider where people are in daytime, not just residential address.

# EXPOSURE ASSESSMENT: DAYTIME ADDRESSES

- **POTENTIAL ACTION:** Encourage studies that combine info from home/work/school addresses
  - Data: Interview studies, time-based weighting?
  - Advantage: Combine with occupational exp?
- **POTENTIAL ACTION:** Encourage studies that look at people staying at one address
  - Data: Homemakers? Elderly? Incarcerated?

# EXPOSURE ASSESSMENT: IMPACT OF MOBILITY

- **STATED RECOMMENDATION:** Basing exp assessment on single residence address can lead to:
  - misclassification of exposure (often producing lower measures of association with disease)
  - temporal sequence issues (may impact interpretation)

# EXPOSURE ASSESSMENT: IMPACT OF MOBILITY

- **POTENTIAL ACTIONS:**

- More studies on impact of mobility (may vary)
- Journal reviewers: impose higher standards
- Encourage studies where can obtain relevant residence history
  - surveys?
  - credit reports?
- Encourage studies on addresses in relevant time frame for exposure/outcome latency period

# EXPOSURE ASSESSMENT: IMPACT OF MOBILITY

- POTENTIAL ACTIONS:

- Encourage studies on outcomes with short latency periods (e.g. where probability of moving < 50% before disease diagnosed)
- Discourage studies on populations with high mobility unless can follow them (e.g. migrant farmworkers)
  - PROBLEM: EJ: poorer folks more likely to move?



# EXPOSURE ASSESSMENT: IMPACT OF MOBILITY

## Residential Mobility During Pregnancy

- Percent of mothers changing residence between conception and delivery:
  - Cases: 33%                      Controls: 31%
- Case mothers more likely to move if:
  - Younger
  - Lower household income
  - Non-Hispanic
  - Lower parity
- Control mothers more likely to move if:
  - Younger

# EXPOSURE ASSESSMENT: IMPACT OF MOBILITY

## Residential Mobility and Exposure

- Median distance moved (ns):
  - NTD cases: 3.5 mi      Controls: 3.7 mi
- Benzene exposure from ASPEN (gives CT level estimates):
  - No sig difference in benzene exposure (yes/no) or benzene quartiles based on address at conception vs delivery

# STATISTICAL APPROACHES

- **STATED PROBLEM:** Most studies use conventional statistics (e.g. regression) that assume:
  - Independent observations
  - Generating process that is homogeneous
- **POTENTIAL ACTION:** Encourage more studies that use geostatistical approaches

# CUMULATIVE, SYNERGISTIC IMPACTS

- **STATED RECOMMENDATION:** Look at cumulative and synergistic impacts

# CUMULATIVE, SYNERGISTIC IMPACTS

- **POTENTIAL ACTIONS:**
  - Look at exposure to same substance from multiple sources (residence proximity & air, residence location & water, diet, occupational)
  - Look at exposure to multiple substances shown to interact in tox literature
  - Encourage exposure biomarker studies

# GENERAL RESEARCH GAPS

- **STATED RECOMMENDATION:** Research gaps, paucity of envl impacts investigated

# GENERAL RESEARCH GAPS

- **POTENTIAL ACTION:** More hypothesis-generating studies for screening?
  - Borrow techniques from GWAS, Bayesian approaches, data mining
  - Relate more exposure databases with more/broader outcome databases
- **POTENTIAL ACTION:** Encourage more gene x environment interaction studies?
  - Envl justice may also be effect modification

# PUBLIC HEALTH PRACTICE

- **STATED CONCLUSION:** Few studies have examined whether exposure/proximity is more/less likely to increase risk for adverse health among minority and lower-income populations.



# PUBLIC HEALTH PRACTICE

- **POTENTIAL ACTION:** When determining association btw proximity to envl hazard X and health outcome Y:
  - Don't just adjust for SES or race/ethnicity
  - Examine stratum-specific associations
  - Can check for effect modification
  - Consider largest attributable risk? (combines magnitude of association and prevalence of exposure)

# PUBLIC HEALTH PRACTICE

- **ISSUE:** Might be unrealistic to expect similar findings across proximity studies
  - May vary in climatic conditions, topography, contaminants
  - Thus proximity effect varies between studies (heterogeneous)
- **POTENTIAL ACTION:** States, localities do proximity studies in own jurisdictions?
  - May lack resources
  - May lack statistical power

# PUBLIC HEALTH PRACTICE

- **ISSUE:** How should EPA / other agencies consider environmental justice and proximity to hazards in decision-making?
- **POTENTIAL ACTIONS:**
  - Discount proximity-based studies?
  - Base on most susceptible population group?
  - Others?

# LOGISTICS

- What's needed to provide useful studies?
  1. Data on exposures
  2. Data on outcomes
  3. (Helpful) Useful/unusual situations re: 1 and 2
  4. People with skills to analyze data
  5. Time to analyze them (usually = \$\$)
  6. Connecting 1-5
  
- Main limiting factor: #5

# LOGISTICS

- **POTENTIAL ACTIONS:**
  - Directed funding to address specific questions
  - More, smaller grants e.g. to fund small directed projects, dissertation / thesis / practicum work
  - Connections database / clearinghouse

# SOCIAL IMPLICATIONS

- Who was there first?
  - Industry
  - Residents
- What to do about that (if anything)?

Thanks