

# Preparing for Al-driven Research on ScHARe - Part 2

A Comprehensive Review and Brainstorming Session

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## ScHARe

Science collaborative for Health disparities and Artificial intelligence bias Reduction



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Terra

SIDEM

RLA

**Broad Institute** 

#### **CDE Working Group**

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## **Experience poll**

Please check your level of experience with the following:

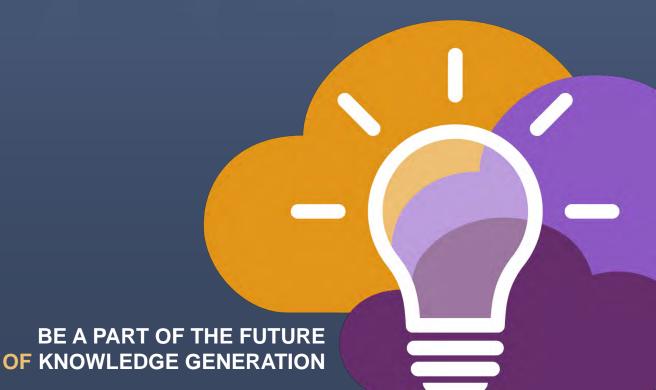
	None	Some	Proficient	Expert
Python				
R				
Cloud computing				
Terra				
Health disparities research				
Health outcomes research				
Algorithmic bias mitigation				

### **Outline**

- 5' Introduction
  - Experience poll
- 15' Schare overview
  - Interest poll
- **35'** Computational strategies
  - Polls
- **20'** Python data science libraries
- 15' Testing and monitoring in algorithm development
- **15'** Open science and reproducible research
- 45' Research Think-a-Thons brainstorming
  - Final poll

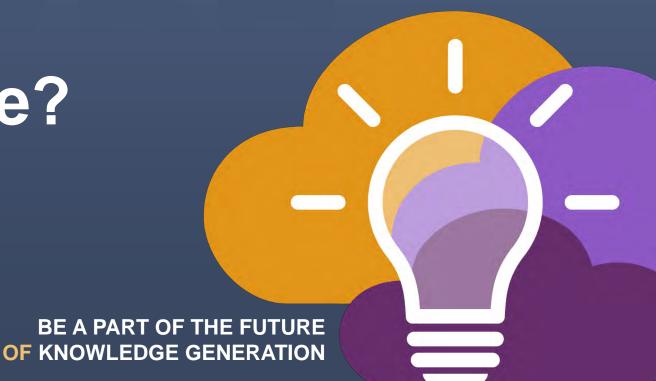
# SCHARe

Overview



# SCHARe

What is ScHARe?



Schare is a cloud-based population science data platform designed to accelerate research in health disparities, health and healthcare delivery outcomes, and artificial intelligence (AI) bias mitigation strategies

#### Schare aims to fill four critical gaps:

- Increase participation of women & underrepresented populations with health disparities in data science through data science skills training, cross-discipline mentoring, and multi-career level collaborating on research
- Leverage population science, SDoH, and behavioral Big Data and cloud computing tools to foster a paradigm shift in healthy disparity, and health and healthcare delivery outcomes research
- Advance Al bias mitigation and ethical inquiry by developing innovative strategies and securing diverse perspectives
- Provide a data science cloud computing resource for community colleges and low resource minority serving institutions and organizations

## ScHARe





## ScHARe



## **Google Platform Terra Interface**

- Secure workspaces
- Data storage
- Computational resources
- Tutorials (how to)
- Cut and paste code in Python and R



Mapping across cloud platforms with Terra Interface





Terra recommends using **Chrome**Must have a **Gmail** friendly account





## Data Ecosystem structure Population Science/SDoH

240+
FEDERATED
PUBLIC
DATASETS

- Population Science / SDoH / Behavioral
- Hosted by Google & ScHARe

REPOSITORY

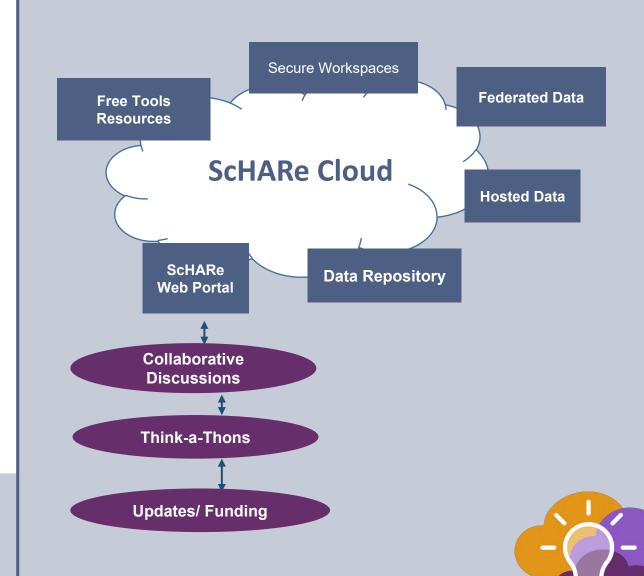
**CDE** FOCUSED

 CDEs enhance data interoperability (aggregation) by using semantic standards and concept codes

Innovative Approach: CDE Concept Codes Uniform Resource Identifier (URI)

#### **COMPONENTS**

#### **Intramural and Extramural Resource**



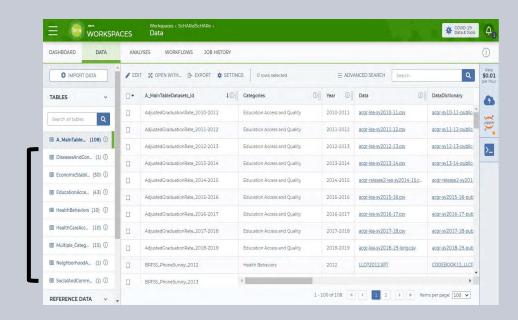
## **Schare** Data Ecosystem

Researchers can access, link, analyze, and export **a wealth of datasets** within and across platforms relevant to research about health disparities, health care outcomes and bias mitigation, including:

- Google Cloud Public Datasets: publicly accessible, federated, de-identified datasets hosted by Google through the Google Cloud Public Dataset Program
  - **Example**: American Community Survey (ACS)
- Schare Hosted Public Datasets: publicly accessible, deidentified datasets hosted by Schare
  - **Example**: Behavioral Risk Factor Surveillance System (BRFSS)
- Funded Datasets on ScHARe: publicly accessible and controlled-access, funded program/project datasets using Core Common Data Elements shared by NIH grantees and intramural investigators to comply with the NIH Data Sharing Policy

**Examples**: Jackson Heart Study (JHS); Extramural Grant Data; Intramural Project Data

#### **OVER 240 DATA SETS CENTRALIZED**



### Datasets are categorized by content based on the CDC **Social Determinants of Health categories**:

- 1. Economic Stability
- 2. Education Access and Quality
- Health Care Access and Quality
- 4. Neighborhood and Built Environment
- 5. Social and Community Context

#### with the addition of:

- Health Behaviors
- Diseases and Conditions

Users will be able to map and link across datasets

## Schare Ecosystem: Google hosted datasets

Examples of interesting datasets include:

- American Community Survey (U.S. Census Bureau)
- US Census Data (U.S. Census Bureau)
- Area Deprivation Index (BroadStreet)
- GDP and Income by County (Bureau of Economic Analysis)
- US Inflation and Unemployment (U.S. Bureau of Labor Statistics)
- Quarterly Census of Employment and Wages (U.S. Bureau of Labor Statistics)
- Point-in-Time Homelessness Count (U.S. Dept. of Housing and Urban Development)
- Low Income Housing Tax Credit Program (U.S. Dept. of Housing and Urban Development)
- US Residential Real Estate Data (House Canary)
- Center for Medicare and Medicaid Services Dual Enrollment (U.S. Dept. of Health & Human Services)
- Medicare (U.S. Dept. of Health & Human Services)
- Health Professional Shortage Areas (U.S. Dept. of Health & Human Services)
- CDC Births Data Summary (Centers for Disease Control)
- COVID-19 Data Repository by CSSE at JHU (Johns Hopkins University)
- COVID-19 Mobility Impact (Geotab)
- COVID-19 Open Data (Google BigQuery Public Datasets Program)
- COVID-19 Vaccination Access (Google BigQuery Public Datasets Program)

Organized based on the CDC SDoH categories, with the addition of *Health Behaviors* and *Diseases and Conditions*:

What are the Social Determinants of Health?

Social determinants of health (SDoH) are the nonmedical factors that influence health outcomes.

They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.



www.cdc.gov/about/sdoh/index.html

Examples of datasets for each category include:

#### **Education access and quality**

Data on graduation rates, school proficiency, early childhood education programs, interventions to address developmental delays, etc.

- EDFacts Data Files (U.S. Dept. of Education) Graduation rates and participation/proficiency assessment
- NHES National Household Education Surveys Program (U.S. Dept. of Education) Educational activities

#### **Health care access and quality**

Data on health literacy, use of health IT, emergency room waiting times, preventive healthcare, health screenings, treatment of substance use disorders, family planning services, access to a primary care provider and high quality care, access to telehealth and electronic exchange of health information, access to health insurance, adequate oral care, adequate prenatal care, STD prevention measures, etc.

- MEPS Medical Expenditure Panel Survey (AHRQ) Cost and use of healthcare and health insurance coverage
- Dartmouth Atlas Data Selected Primary Care Access and Quality Measures Measures of primary care utilization, quality of care for diabetes, mammography, leg amputation and preventable hospitalizations

#### **Neighborhood and built environment**

Data on access to broadband internet, access to safe water supplies, toxic pollutants and environmental risks, air quality, blood lead levels, deaths from motor vehicle crashes, asthma and COPD cases and hospitalizations, noise exposure, smoking, mass transit use, etc.

- National Environmental Public Health Tracking Network (CDC) Environmental indicators and health,
   exposure, and hazard data
- LATCH Local Area Transportation Characteristics for Households (U.S. Dept. of Transportation) Local transportation characteristics for households

#### Social and community context

Data on crime rates, imprisonment, resilience to stress, experiences of racism and discrimination, etc.

- Hate crime statistics (FBI) Data on crimes motivated by bias against race, gender identity, religion, disability, sexual orientation, or ethnicity
- General Social Survey (GSS) Data on a wide range of characteristics, attitudes, and behaviors of Americans.

#### **Economic stability**

Data on unemployment, poverty, housing stability, food insecurity and hunger, work related injuries, etc.

- Current Population Survey (CPS) Annual Social and Economic Supplement (U.S. Bureau of Labor Statistics) Labor force statistics: annual work activity, income, health insurance, and health
- Food Access Research Atlas (U.S. Dept. of Agriculture) Food access indicators for low-income and other census tracts

#### Health behaviors

Data on health-related practices that can directly affect health outcomes.

- BRFSS Behavioral Risk Factor Surveillance System (CDC) State-level data on health-related risk behaviors,
   chronic health conditions, and use of preventive services
- YRBSS Youth Risk Behavior Surveillance System (CDC) Health behaviors that contribute to the leading causes of death, disability, and social problems among youth and adults

#### **Diseases and conditions**

Data on incidence and prevalence of specific diseases and health conditions.

- U.S. CDI Chronic Disease Indicators (CDC) 124 chronic disease indicators important to public health practice
- UNOS United Network of Organ Sharing (Health Resources and Services Administration) Organ
   transplantation: cadaveric and living donor characteristics, survival rates, waiting lists and organ disposition

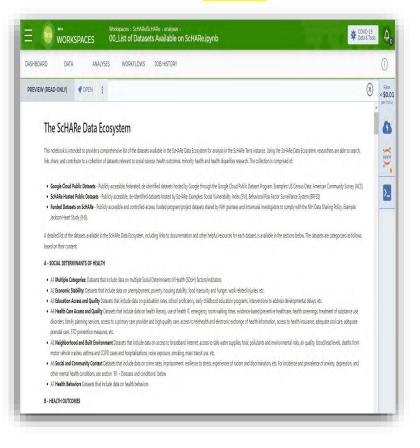


### Terra Interface: Datasets and Access to Data

#### **Analyses**

Tab in ScHARe workspace, the notebook 00 List of **Datasets** Available on **Schare** lists all of the datasets available in the ScHARe Datasets collection

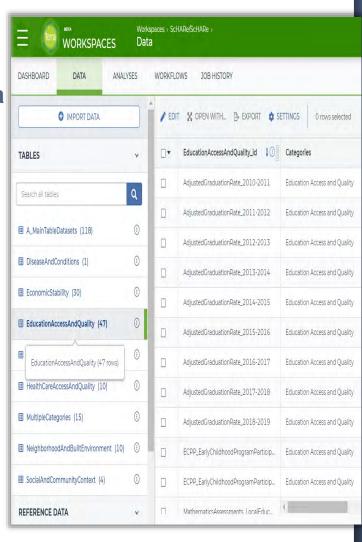
#### What?



Data Tab in
ScHARe workspace,
data tables help
access ScHARe data
and keep track of
your project data:

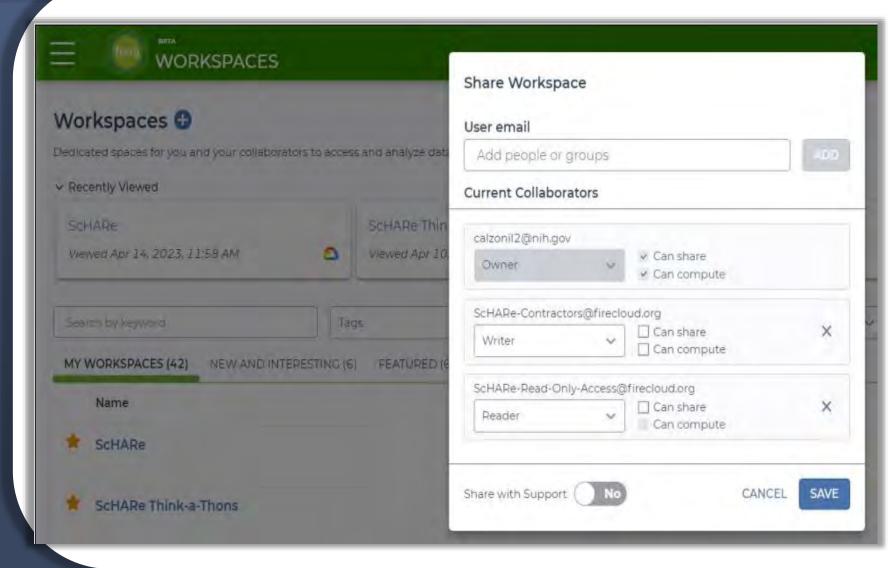
- ScHARe workspace, click on the Data tab
- Under Tables, see a list of dataset categories
- Click on a category, to see a list of relevant datasets
- Scroll to the right to learn more abouteach dataset

#### Where?





### Terra Interface: Secure workspace

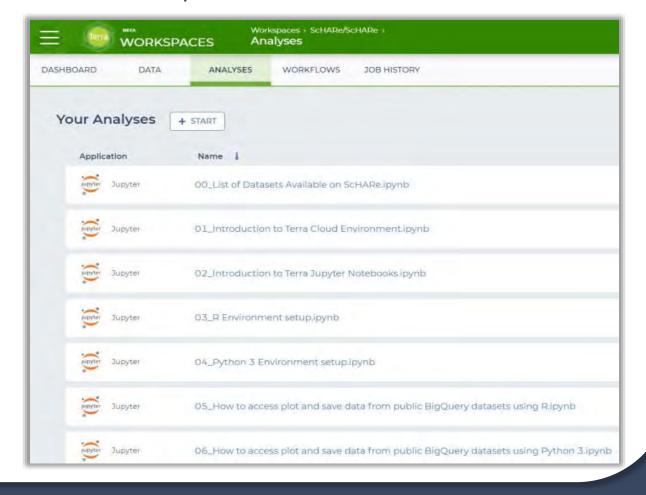


- Secure workspace for self or collaborative research
- Assign roles: review or admin
- Host own data and code



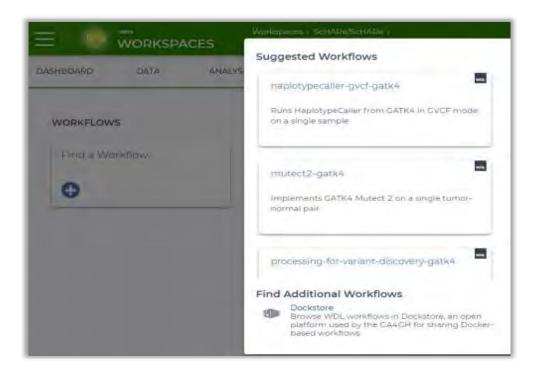
## Terra Interface: Notebooks for Analytics & Tutorials

A notebook integrates code and its output into a single document where you can run code, display the output, and also add explanations, formulas, and charts



## Workflows Modular codes

#### **Easy to Use--Cut and Paste Analytics**



- Modular codes developed for reuse
- Adding SAS



COMPUTING AI –
HEALTH DISPARITY AND
CARE RESEARCH USING
BIG DATA

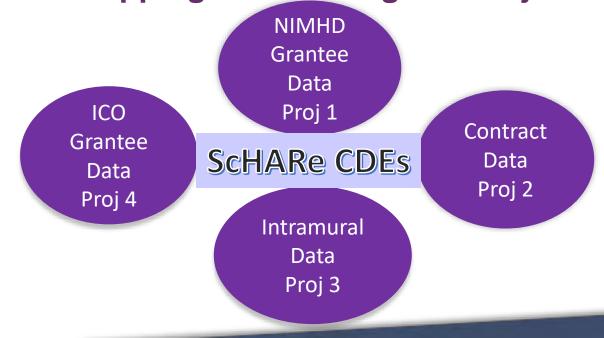
#### AGGRAGATING DATA SETS TOOL: Variables & CDEs

#### **CDE Mapping Project & Federated Data**



**Data Dictionary** 

#### **CDE Mapping across Program Projects**



BE A PART OF THE FUTURE OF KNOWLEDGE GENERATION

#### **COMMON DATA ELEMENTS**

#### **DATA UPLOAD**

#### DATA MAPPING, DOWNLOAD AND EXPORT

#### **NLM CDE Repository**

**Coded NIMHD Common Data Elements** 

- Labels
- **Questions**
- Permissible Values

Acquired

**Google and** Schare Hosted **Datasets** 

Overview

**Data Dictionaries** 

Data Updates

**Data** 

**Project and Key Acquired Datasets** 

**ScHARe** 

REPOSITORY

#### **Overview**

Description and Links to Overview Material

4-Privacy Levels

**COMMON DATA ELEMENTS** 

**Data** 

Metadata

Data **Dictionaries** 

**Analysis Ready** 

**RAS Single Sign-on** 

**DATA MAPPING** 

**Other Cloud Platforms** AnVil, BDC, All of Us

**ACROSS DATASETS AND PLATFORMS BASED ON CDES** 

**EXAMPLE: CDE linked** 

**ACS** NIMHD Project BioData Catalyst

**Aggregated Data Set** 

**CDE Linked Project Data** 

**Data Download in a Variety of Formats** CSV, TSV, XLSX

**Data Export to Terra for Analysis** 

Workspaces

**Visualizations Tools** Shiny

**Data Access** 

**Based On PII Levels and User Needs:** 

- Public
- Data Use Agreement

Common Data Elements | +

Private

URI approach for data interoperability

# SCHARe

## **CDE Adoption**

- Making Data Interoperable (URI Approach)
- Concept Code Mapping (Data Harmonization)



BE A PART OF THE FUTURE OF KNOWLEDGE GENERATION



### **Adopted CDEs to:**

- Standardize data for people & computers (human and machine readable)
- Enable data sharing across studies (data interoperability)
- Enhance data interpretation & analysis (semantically defined and standardized coded)
- Simplify collaboration
- Reduces project start-up & results time

BIG DATA AND AI: REQUIRES NEW APPROACHES FOR COLLECTION, MANAGEMENT, ANALYSIS



Covid revealed the need to have real time data



## Schare "Core" CDE Development

#### **Core Set:**

- Few critical questions required from all studies/sites
- Minimal burden
- Allows for questions to be asked in any way, but reported in a standardized format
- Allows for any number of other questions to be collected as collector chooses

#### **Criteria:**

- PhenX Toolkit first
- Validated source
- Adaptation of a validated source
- Generate new gap area CDE

# Importance of <u>Concept Code</u> <u>Mapping</u> and Interoperability (<u>Uniform Resource Identifier (URI)</u>

**CDE Metadata** NCI Thesaurus C34661 **Terminology Mappings SNOMED CT 2564002 CDE Metadata** 

- CDE unique CONCEPT CODES represent data semantics
  - OHuman readable
  - Machine readable format
- Mapping enables interoperability even if the same standard terminology was not used in another CDE
- CDE Metadata enables searching for concept codes across CDEs to compare data

### Questions become CDEs When Defined and Coded

#### Education

What is the highest level of education you have completed?

#### **Shared Semantics and Concept Code:**

An indication of the years of schooling completed in graded public, private, or parochial schools, and in colleges, universities, or professional schools. **C17953** 

URI approach in data repository uses codes to harmonize data rather than semantics (words).

Human Readable w Shared Meaning

Codes facilitate Machine Readable

## CDES: Words Precisely Defined-Shared Meaning

#### Words can be **SEMANTICALLY AMBIGUOUS**.

- Context is important in conveying meaning when using CDEs
  - o Words have different meanings depending on words around it and context.
- Some examples:
  - o **Seizure:** uncontrolled electrical activity between brain cells / spiritual experience?
  - Agent: chemical compound or government employee?
  - O Alcohol: disinfecting or drinking?
  - o Colon: sentence punctuation or biological organ?
  - o Mole: animal, blemish, unit of measure, or spy?
  - o **Probe:** examination, investigation, or instrument?



Words can mean different things in different contexts

## Questions become CDEs When Defined and Coded

#### Education

What is the highest level of education you have completed?

#### **Shared Semantics and Concept Code:**

An indication of the years of schooling completed in graded public, private, or parochial schools, and in colleges, universities, or professional schools. C1795

<u>URI approach</u> in data repository uses codes to harmonize data rather than semantics (words).

Human Readable w Shared Meaning

Machine-Readable format—excel spreadsheet: codes increase interoperability and use of pipes to separate concepts & codes

Pey Assible Value (PV) Labels	PV Definitions	PV Concept Identifiers
No formal Schooling	Indicates that a person has never attended an educational program or formal schooling.	67122
Primary/Grade/Elementary School (approximately grades 1st through 5th)	Indicates that 5th grade potentially is the highest level of educational achievement.	C67127
Middle School/Lower Secondary Education (approximately grades 6th through 8th)	Indicates that 8th grade potentially is the highest level of educational achievement.	C67130

## Some Concept Coding Systems One NOT Better Than the Other

General use....

LoinC Laboratory and Clinical Research

ULMS (CUI) Biomedical

FHIR Electronic Health Records

\*NCIt Cancer

<sup>\*</sup>ScHARe used NCIt because it has several population concepts

## How a Survey Question Became a CDE

Please select the racial category or <u>categories</u> with which you most closely identify. (select all that apply)		
	American Indian or Alaska Native	
	Asian or Asian American	
	Black or African American	
	Hispanic or Latino	
	Native Hawaiian or Other Pacific Islander	
	Middle Eastern or North African (in current reporting tables will be reported as white)	
	White	

## Survey Questions become CDEs when they are:

- semantically defined by a standardized coding system for shared meaning
- in a format that is human and machine readable for ease of reuse

### Making of a CDE from a Protocol/Question

Need a standardized defined concept and related code.

**Source: NCI Thesaurus** 

#### **Race/Ethnicity Self-Identification**

A textual description of a person's race. C17049 | The ethnicity of a person. C16564 | An individual's perspective or subjective interpretation of an event or information. C74528

American Indian or Alaska Native |
Asian or Asian American |
Black of African American |
Hispanic, Latino, or Spanish |
Native Hawaiian or Other Pacific Islander |
Middle Eastern or North African |
White

URI approach in data repository uses codes to harmonize data rather than semantics. This improves data interoperability.

## Making of a CDE from a Protocol/Question

- A person having origins in any of the original peoples of North and South America (including Central America) and who
  maintains tribal affiliation or community attachment. (OMB) C41259 |
- A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including
  for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. (OMB)
   C41260
- A person having origins in any of the Black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American". (OMB) C16352 |
- A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
   The term, "Spanish origin" can be used in addition to "Hispanic or Latino". (OMB) C17459 |
- A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. (OMB) C41219 |
- Denotes a person having origins in the region of southwest Asia, between the India subcontinent and Europe, including
  Kuwait, Turkey, Lebanon, Israel, Iraq, Iran, Jordan, Saudi Arabia, lands east of Pakistan or the other countries of the Arabian
  Peninsula. Also includes people of Jewish ethnicity including Sephardic and Ashkenazic. C77820:
- Denotes a person whose ancestry is in any of the countries of the northern part of the African continent: Algeria, Egypt,
   Libya, Morocco, Sudan, Tunisia, and Western Sahara. C126529 |
- A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. (OMB) C41261

## Making of a CDE from a Protocol/Question

Need a standardized defined concept and related code. Source: NCI Thesaurus

		- Code Mapping -	
	NCIT	Loinc	UMLS CUI
American Indian or Alaska Native	C41259	LA10608-0	C0282204
Asian or Asian American	C41260	LA6156-9	C0003988
Black of African American	C16352	LA10610-6	C0085756
Hispanic, Latino, or Spanish	C17459	LA6214-6	C0086409
Native Hawaiian or Other Pacific	C41219	LA10611-4	C1513907
Islander	C43866	Mena no loinc	C1553353
Middle Eastern or North African	C41261	LA4457-3	C0043157
White			

### Matched CDE

Income (Project 1)

Income (Project 2)

```
Less than $10,000 | $10,000-$24,999 | $25,000-$34,999 | $35,000-$49,999 | $50,000-$74,999 | $75,000-$99,999 | $150,000-$149,999 | $150,000-$199,999 | $200,000 or more
```

```
Less than $10,000 | $10,000-$24,999 | $25,000-$34,999 | $35,000-$49,999 | $50,000-$74,999 | $75,000-$99,999 | $150,000-$149,999 | $150,000-$199,999 | $200,000 or more
```

Collected this way

## Mappable CDE

Income (Project 1)

Less than \$10,000 | \$10,000-\$24,999 | \$25,000-\$34,999 | \$35,000-\$49,999 | \$50,000-\$74,999 | \$75,000-\$99,999 | \$150,000-\$149,999 | \$200,000 or more

Income (Project 2)

Less than \$10,000 | \$10,000-\$19,999 | \$20,000-\$29,999 \$30,000-\$39,999 \$40,000-\$49,999 \$50,000-\$59,999 \$60,000-\$69,999 \$70,000-\$79,999 \$80,000-\$89,999 \$90,000-\$99,999

•••••

\$200,000 or more

Collected this way

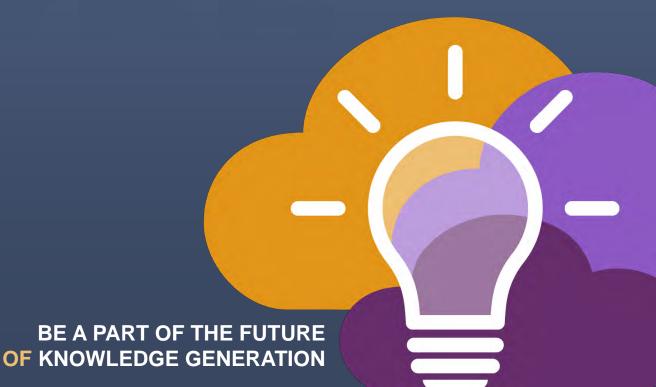
Mapped using algorithms



Reported this way

## SCHARe

CDEs in Survey Format



## Schare Core CDEs

**NIH CDE Repository:** https://cde.nlm.nih.gov/home

## NIH **Endorsed**



- Age
- Birthplace
- Zip Code
- Race and Ethnicity
- Sex
- Gender
- Sexual Orientation
- Marital Status
- Education
- Annual Household Income
- Household Size

- English Proficiency
- Disabilities
- Health Insurance
- **Employment Status**
- Usual Place of Health Care
- Financial Security / Social Needs
- Self Reported Health
- Health Conditions (and Associated Medications/Treatments)
- NIMHD Framework\*
  Health Disparity Outcomes\*

  \* Project Level CDEs

For FUNDED PROJECT DATA – CDEs Centralized for Interoperability and Data Sharing

1		Λ	_	_
1		Α	ĸ	е

What is the person's age? sking full birthdate)	(collapse data over 89 yrs old / 2 yrs and under, report in months-does not exclude
D years	□ months
Project 5 Covid-19 Age https://co	le.nlm.nih.gov/cde/search?q=PROJECT%205&nihEndorsed=true

#### 2. Birthplace

#### Where were you born?

- In the United States, including U.S. Territories (Puerto Rico, Guam, U.S. Virgin Islands, American Samoa and Northern Mariana Islands) (Select from Drop Down-not doable on word doc)
- □ Outside the United States (Select from Drop Down-ISSO categories-not doable on word doc)

PhenX - Birthplace <a href="https://www.phenxtoolkit.org/protocols/view/10201">https://www.phenxtoolkit.org/protocols/view/10201</a> ADAPTED-Territoires with US; instead of seperate

Source for PhenX: American Community Survey (ACS), 2008

#### Potential new ZIP code (caveat collapse zip codes w less than 10) approach! What is your current postal ZIP code? Project 5 Covid-19 Address Postal Code https://cde.nlm.nih.giov/deView?tinyld=w BHatlMoA Self-Identification (This question's intent is to get at bare minimum of identification, which will be determined by the changes proposed by OMB. Study can collect details of Race and Ethnicity as preferred. This does not supplant other required R/E reporting. Awaiting OMB.) Please select the racial category or categories with which you most closely identify. (select all that apply) American Indian or Alaska Native Asian or Asian American П Black or African American Hispanic or Latino Native Hawaiian or Other Pacific Islander Middle Eastern or North African (in current reporting tables will be reported as white) П White SchARe working group preference based on potential classifications in 2030 census https://www.npr.org/2021/09/30/1037352177/2020census-results-by-race-some-other-latino-ethnicityhispanic#:~:text=And%20under%20that%20combined%20question%2C%20the%20list%20of,federal%20agencies%20collect%20data%20on%2

Orace%20and%20ethnicity.

## **Potential new** approach!

Sex	approacin
What	was your sex assigned at birth, on your original birth certificate?
	Female
	Male
	Intersex
	None of these describe me
	Prefer not to answer
PhenX	Protocol - Biological Sex Assigned at Birth <a href="https://www.phenxtoolkit.org/protocols/view/11601">https://www.phenxtoolkit.org/protocols/view/11601</a>
All of U	Is Research Program, Participant Provided Information (PPI), 2018
Nation	al Academies Sciences, Engineering, Medicine report: Measuring Sex, Gender Identity, and Sexual Orientation
https:/	/www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health
and Al	
chrom	e-extension://efaidnbmnnnibpcaipcglclefindmkai/https://allofus.nih.gov/sites/default/files/aou_ppi_basics_version.pdf

#### 6. Gender

#### What is your current gender? [Select only one]

Man	
Woman	
Non-Binary	
Transgender	
None of these describe me-I would like to consider additional options	
Are any of these a closer description to your gender identity?	
[ ] Trans man/Transgender Man/FTM	
[] Trans woman/Transgender Woman/MTF	
[] Genderqueer	
[ ] Genderfluid	
[ ] Gender variant	
[ ] Questioning or unsure of your gender identity	
[ ] None of these describe me, and I want to specify	

PhenX Protocol - Gender Identity <a href="https://www.phenxtoolkit.org/protocols/view/11801">https://www.phenxtoolkit.org/protocols/view/11801</a>

All of Us Research Program, Participant Provided Information (PPI), 2018

Prefer not to answer

National Academies Sciences, Engineering, Medicine report: Measuring Sex, Gender Identity, and Sexual Orientation

<a href="https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health">https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health</a>
<a href="https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health">https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health</a>
<a href="https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health</a>
<a href="https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health">https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health</a>
<a href="https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health">https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health</a>
<a href="https://www.nationalacademies.org/">https://www.nationalacademies.org/</a>
<a href="https://www.nationalacademies.org/">https://www.nationalaca

## Potential new approach!

#### 7. Sexual orientation

### Potential new approach!

Which of the following best represents how you think of yourself? [Select only one]

	Lesbian
	Gay
	Straight, that is, not gay or lesbian, etc.
	Bisexual
If nor	ne of the above represents you, are any of these a closer description of how you think of yourself (drop down)
	[] Queer
	[ ] Polysexual, omnisexual, sapiosexual or pansexual
	[] Asexual
	[] Two-spirit
	[] Have not figured out or are in the process of figuring out your sexuality
	[] Mostly straight, but sometimes attracted to people of your own sex
	[ ] Do not think of yourself as having sexuality
	[] Do not use labels to identity yourself
	[] Don't know the answer
	[ ] No, I mean something else (optional free text)
П	Profer not to answer

Phen X Sexual Orientation Protocol. https://www.phenxtoolkit.org/protocols/view/11701?origin=subcollection

All of Us Research Program Participant Provided Information (PPI) Version: December 17, 2018

National Academies Sciences, Engineering, Medicine report: Measuring Sex, Gender Identity, and Sexual Orientation https://www.nationalacademies.org/our-work/measuring-sex-gender-identity-and-sexual-orientation-for-the-national-institutes-of-health

#### 8. Marital status

#### What is your current marital status?

	Married
	Living as married or living with a romantic partner
	Divorced
	Widowed
	Separated
	Single, never been married-not living with romantic partner
П	Prefer not to answer

Hints 5 Cycle 4 (2020) https://hints.cancer.gov/view-questions-topics/question-details.aspx?qid=593 (BRFSS Questionnaire (2001), Section

13: Demographics modified)

All of Us

chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://allofus.nih.gov/sites/default/files/aou\_ppi\_basics\_version.pdf

#### 9. Education

#### What is the highest level of education you have completed?

Unique –
potentially
mappable

No formal schooling
Primary/Grade/Elementary School (approximately grades 1st through 5th)
Middle School/Lower Secondary Education (approximately grades 6 <sup>th</sup> through 8 <sup>th</sup> )
Secondary/High School/Upper Secondary (grades 9 <sup>th</sup> through 11 <sup>th</sup> ) without a high school diploma
General Educational Diploma (GED)
Secondary/High School/Upper Secondary (grades 9 <sup>th</sup> through 12 <sup>th</sup> ) with a high school diploma
Occupational/Technical/Vocational Programs/Short Cycle Tertiary Education - <u>Associate's Degree</u> (approximately 2 years)
College/University/Bachelor's Degree/Equivalent Tertiary Education (approximately 3-5 years)
Graduate/post-graduate degree/professional degree/ (JD, PhD, MD, EdD, Eng, Master's Degree, etc.)

International Standard Classification of Education (ISCED)

 $\frac{https://datatopics.worldbank.org/education/wRsc/classification\#:\sim:text=The\%20International\%20Standard\%20Classification\%20of,revised\%20in\%201997\%20and\%202011}{0in\%201997\%20and\%202011}$ 

and

USA standards of Education <a href="https://nces.ed.gov/programs/digest/d01/fig1.asp">https://nces.ed.gov/programs/digest/d01/fig1.asp</a>

#### 10. Annual household income range

## Potentially mappable

What is your annual household income from all sources within family, not including roommates?

- ☐ Less than \$10,000
- □ \$10,000-\$24,999
- \$25,000-\$34,999
- \$35,000-\$49,999
- \$50,000-\$74,999
- \$75,000-\$99,999
- \$100,000-\$149,999
- □ \$150,000-\$199,999
- □ \$200,000 or more

All of Us - Basic Information Survey https://allofus.nih.gov/sites/default/files/aou ppi basics version.pdf

BRFSS = Behavioral Risk Factor Surveillance System (CDC)

#### 11. Household family size

Approximately how many individuals (adult and children) does your household family income support?

Project 5 Covid-19 Shared Living Space Number of Individuals https://cde.nlm.nih.gov/cde/search?q=PROJECT%205&nlhEndorsed=true

#### 12. English proficiency

We are	interested in your own opinion of how well you speak English. Would you say you speak English:
	Very well
	Well
	Not well
	Not at all
	Refused
	Don't Know

PhenX Toolkit - English Proficiency <a href="https://www.phenxtoolkit.org/protocols/view/270201">https://www.phenxtoolkit.org/protocols/view/270201</a>

Regents of the University of California. (2019). CHIS 2018 Adult Questionnaire, question number "QA18\_G8" is represented in this protocol as question 1. Retrieved from http://healthpolicy.ucla.edu/chis/design/Pages/questionnairesEnglish.aspx

#### 13. Disabilities

Do you have a disability or have serious difficulty with any of the following? Select all that apply.

- □ Deafness or difficulty hearing
- □ Blindness or difficulty seeing
- □ Difficulty concentrating, remembering, and deciding
- □ Difficulty walking or climbing stairs
- □ Difficulty dressing or bathing
- □ Difficulty doing errands alone
- □ Not disabled

CDC Standard Disability Questions <a href="https://www.cdc.gov/ncbddd/disabilityandhealth/datasets.html">https://www.cdc.gov/ncbddd/disabilityandhealth/datasets.html</a> (format adapted)

#### 14. Health insurance

Are you currently covered by any of the following types of health insurance or health coverage plans?

Insurance through a current or former employer or union (of yours or another family member's). This would include COBRA coverage.
Insurance purchased directly from an insurance company (by you or another family member). This would include coverage purchased through an exchange or marketplace
Medicare, for people 65 and older, or people with certain disabilities.
Medicaid, Medical Assistance (MA), the Children's Health Insurance Program (CHIP), or any kind of state or government-sponsored assistance plan based on income or a disability.
TRICARE or other military health care, including VA health care.
Indian Health Service
Any other type of health insurance. coverage or health coverage plan
Uninsured

PhenX Health Insurance Coverage https://www.phenxtoolkit.org/protocols/view/11502

#### 15. Employment status

stude	ent, or what?
	Working now or paid sick leave/parental leave/family leave/administrative leave
	Only temporarily laid off, or unpaid sick leave/parental leave/family leave/administrative leave
	Looking for work, unemployed
	Retired
	Disabled, permanently or temporarily
	Raising children full-time, full-time caregiver, or keeping house
	Student
	Other/specify:

We would like to know about what you do: are you working now, looking for work, retired, keeping house, a

PhenX - Current Employment Status <a href="https://www.phenxtoolkit.org/protocols/view/11301">https://www.phenxtoolkit.org/protocols/view/11301</a> (Adapted-used parental instead of maternal, and family leave added with paid/unpaid)

#### 16. Usual place of health care

Is there a place that you USUALLY go to when you are sick or need advice about your health? Select all that apply.

A doctor's office or community health center, including Indian Health Service, or hospital-based clinics

☐ Walk-in clinic, urgent care center, or retail clinic in a pharmacy or grocery store

☐ Emergency room

□ A VA Medical Center or VA outpatient clinic

☐ Some other place

Does not go to one place most often

□ Don't know

PhenX Protocol Access to Health Services Ques #5 <a href="https://www.phenxtoolkit.org/protocols/view/270101">https://www.phenxtoolkit.org/protocols/view/270101</a> (adapted with hospital-based clinics)

Project 5 Covid-19 Usual Place of Health Care Type <a href="https://cde.nlm.nih.gov/cde/search?q=PROJECT%205&nihEndorsed=true">https://cde.nlm.nih.gov/cde/search?q=PROJECT%205&nihEndorsed=true</a> (adapted with hospital-based clinics)

#### 17. Economic Stability - Social Needs

In the past year, have you or any family members you live with been <u>unable</u> to get any of the following when it was <u>really needed</u>? Select all that apply.

	Childcare
	Clothing
	Food
	Housing
	Internet/Broadband
	Phone (e.g., mobile or landline)
	Transportation (e.g., private or public)
	Utilities (e.g., gas, electric, propane, natural gas, etc.)
	Medicine or any health care (medical, dental, mental health, vision)
П	Other/specify:

Source: Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE) tool (Adapted-internet, housing, transportation added to question #14) Housing and transportation is included in survey. <a href="https://prapare.org/wp-content/uploads/2023/01/PRAPARE-English.pdf">https://prapare.org/wp-content/uploads/2023/01/PRAPARE-English.pdf</a>

U.S. Census Bureau, 2015 and 2016 American Community Survey – Internet/Broadband <a href="https://www.census.gov/content/dam/Census/library/publications/2018/acs/ACS-39.pdf">https://www.census.gov/content/dam/Census/library/publications/2018/acs/ACS-39.pdf</a>

High-level SDoH assessment

#### 18. Self-reported health

Would	Would you say your health in general is excellent, very good, good, fair, or poor?		
	Excellent		
	Very good		
	Good		
	Fair		
	Poor		

Patient-Reported Outcomes Measurement Information (PROMIS)

https://www.healthmeasures.net/index.php?option=com\_instruments&task=downloadComponentFile&file=PROMI\_ S%20Scale%20v1.2%20-%20Global%20Health%20Physical%202a%2009062016.pdf

#### 19. Health conditions and medications or other Treatments

Has a health care provider told you that you have any one or more of the following conditions? Select all that apply currently. Check the second box if you are taking medications or receiving some other treatment for the condition.

☐ Cancer
☐ Coronary heart disease
☐ Heart failure
☐ High blood pressure/hypertension
☐ Stroke
☐ Thrombotic disorders
☐ High cholesterol
☐ Diabetes (type I)
☐ Diabetes (type II)
☐ Obesity
☐ Hepatitis
☐ Other chronic liver disease

Addresses co-morbidities

	Asthma
	Other chronic respiratory disease (e.g., COPD, emphysema)
	Chronic kidney disease
	Psychological and/or psychiatric disease or disorder (e.g., anxiety, depression, bipolar disorder)
	Alzheimer's disease
	Dementia
	Epilepsy
	Multiple sclerosis
	Other chronic neurological condition (e.g., Parkinson's disease, migraine)
	Immunodepression
	HIV/AIDS
	Autoimmune condition (e.g., rheumatoid arthritis, systemic lupus erythematosus, vasculitis)
	Chronic musculoskeletal condition (e.g., back pain, osteoarthritis, osteoporosis)

☐ Sickle cell disease
☐ Sleep disorder (e.g., insomnia, sleep apnea, narcolepsy)
☐ Solid organ transplant
☐ Smoking
☐ Other substance use disorder (e.g., drugs and/or alcohol dependence)
☐ Long Covid (also known as long-haul COVID, long-term effects of COVID, chronic COVID, post-acute COVID-19, and PASC - post-acute sequelae of SARS-CoV-2)
☐ Chronic fatigue
☐ Dental diseases and conditions (e.g., caries, periodontal disease, oral and pharyngeal cancer)
$\square$ Eye diseases and conditions (e.g., cataract, glaucoma, amblyopia, myopia and other refractive errors, age-related macular degeneration, diabetic retinopathy, ocular trauma, uveitis, keratoconus)
☐ Other chronic disease/specify:
None of the above

Project 5 Covid-19 Comorbidity or Underlying conditions

https://cde.nlm.nih.gov/cde/search?q=PROJECT%205&nihEndorsed=true\ (Adapted for Medications-Added Chronic musculoskeletal conditions, High Cholesterol, Sleep Disorders and Stroke)

### **Project level**

#### 20. Minority Health and Health disparities research content area

	following content areas of research is this study addressing, if any? t apply.	
Mino	rity health study focused on a one race or ethnic population and not addressing a health disparity.	
Health Disparity Outcome (select the focus area)		
	Higher incidence and/or prevalence of disease, including earlier onset or more aggressive progression of disease	
	Premature or excessive mortality from specific health conditions	
	Greater global burden of disease, such as Disability Adjusted Life Years (DALY), as measured by population health metrics	
	Poorer health behaviors and/or clinical outcomes using established measures	
	Worse outcomes on validated self-reported measures that reflect daily functioning or symptoms from specific conditions	
Othe	r Health Outcomes / Healthcare Delivery	
0.30/50/500	Stable, E. Novel Approaches to Advance Minority Health and Health Disparities; Am J Public Health. 2019, Jan;109(S1):S8-S10.	

### **Project level**

#### 21. NIMHD Framework

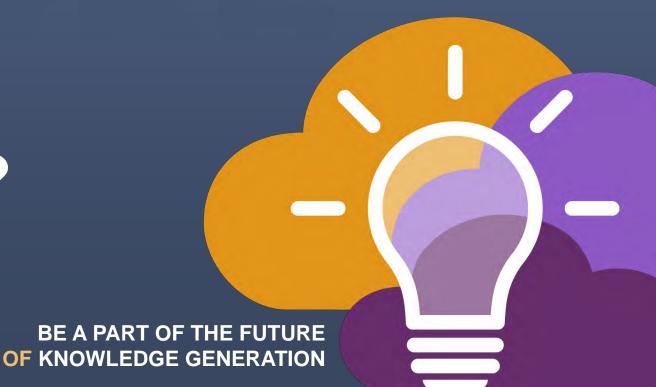
What NIMHD Research framework levels and domains of influence is your study targeting? (Select all that apply)

Levels of Influence	<u>Domains of Influence</u>
☐ Individual	☐ Biological
☐ Interpersonal	☐ Behavioral
☐ Community	☐ Physical/Built Environments
☐ Societal	☐ Sociocultural Environment
	☐ Health Care Systems and Clinical Care

NIMHD Research Framework. https://www.nimhd.nih.gov/about/overview/research-framework/nimhd-framework.html

## SCHARe

What are Think-a-Thons?





## Think-a-Thons (TaT)

- Monthly sessions (2 1/2 hours)
- Instructional/interactive
- Designed for new and experienced users
- Research & analytic teams to:
  - Conduct health disparities, health outcomes, bias mitigation research
  - Analyze/create tools for bias mitigation
- Publications from research team collaboration
- Networking
- Mentoring and coaching
- Focus:

## Types:

- ✓ Instructional / Tutorial ✓ Collaborative Research Teams
- ✓ Bias mitigation

## ScHARe

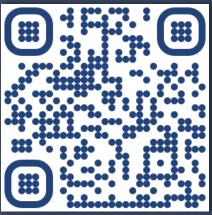
Think-a-Thon

**Artificial Intelligence and Cloud Computing Basics** 

**Terra: Datasets and Analytics** 



Register:



bit.ly/think-a-thons

#### **Think-a-Thon Instructional Tutorials**

February Artificial Intelligence and Cloud Computing 101

March ScHARe 1 – Accounts and Workspaces

April ScHARe 2 – Terra Datasets

May ScHARe 3 – Terra Google-hosted Datasets

June Schare 4 – Terra Schare-hosted Datasets

July An Introduction to Python for Data Science – Part 1

August An Introduction to Python for Data Science – Part 2

September Schare 5: A Review of the Schare Platform and Data Ecosystem

October Preparing for AI 1: Common Data Elements and Data Aggregation

November Preparing for AI 2: An Introduction to FAIR Data and AI-ready Datasets

January Preparing for AI 3: Computational Data Science Strategies 101

February Preparing for AI 4: Overview Prep for AI Summary with Transparency, Privacy, Ethics

Schare for Educators (Community Colleges & Low Resource MSIs)

ScHARe for American Indian / Alaska Native Researchers

ScHARe for Non-Biomedical Researcher Coders and Programmers to conduct Research





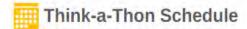
The monthly **ScHARe Think-a-Thons** scheduled or archived below are designed so participants reach one of these goals (as noted with each session):

- Goal 1: Achieve a better understanding of both the fields and the terminology used to describe the Al/cloud computing infrastructure, components and processes.
- Goal 2: Develop research questions and projects relevant to AI and cloud computing that leverage the cutting-edge technology and data/computing resources now available to health disparities researchers (including the ones at their disposal on the ScHARe platform).

Upcoming Think-a-Thons

Past Think-a-Thons

See FAQs



Think-a-Thons are held on the third Wednesday of each month. Accommodations information | Think-a-Thon recordings

develop innovative and publishable research projects

Date	Time	Торіс	Register
March 20, 2024	2:00 – 4:30 p.m. ET	Preparing for Al-driven Research on ScHARe: A Comprehensive Review and Brainstorming Session – Part 2 Toward Goal 2:	Register
		Prepares participants for ScHARe research collaborations by covering:	Registration closes at 12:00 p.m. ET on the day of the event.
	<ul> <li>Choosing computational st</li> </ul>	<ul> <li>Choosing computational strategies (Al, ML, statistics)</li> </ul>	
		<ul> <li>An overview of Python data science libraries</li> </ul>	
	<ul> <li>The significance of testing and monitoring in algorithm developed</li> </ul>	<ul> <li>The significance of testing and monitoring in algorithm development</li> </ul>	
		<ul> <li>The role of open science in ensuring reproducible and transparent Al-based research</li> </ul>	
		For researchers and students at all levels who want to collaborate on ScHARe to	



#### Think - a - Thons

#### **PAST Think-a-Thons Posted**

November 15, 2.5

View video: Preparing for Al 2: An Introduction to FAIR Data and Al-ready Datasets

View slides (PDF, 4 MB)

hours Toward Goal 1:

How to prepare an Al-ready dataset using gold standard data management principles, including:

- Making datasets findable, accessible, interoperable, and reusable (FAIR)
- Using transparent data documentation to foster data re-use
- Ensuring that selected data addresses expected outcomes and drives meaningful Al insights
- Handling missing data through strategies, proxies, and synthetic data

https://www.nimhd.nih.gov/resources/schare/think-a-thons.html



#### **Upcoming**



## Think-a-Thons (TaT) Research Teams

Title: Data Science Projects 1 – Health Disparities and Individual SDoH

Description: Exploring the impact of individual Social Determinants of Health on health outcomes: a hands-on session for researchers and students at all levels interested in collaborating on ScHARe to develop innovative research questions and projects leading to publications.

Title: Data Science Projects 2 - Health Disparities and Structural 50oH

Description: Assessing the impact of structural Social Determinants of Health on health outcomes: a hands-on session for researchers and students at all levels interested in collaborating on ScHARe to develop innovative research questions and projects leading to publications.

Title: Data Science Projects 3 – Health Outcomes

Description: Investigating the influence of non-clinical factors on disparities in health care delivery: a hands-on session for researchers and students at all levels interested in collaborating on SchARe to develop innovative research questions and projects leading to publications.

- Foster a research paradigm shift to use Big Data
- Promote use of Dark Data
- Generational Career & Discipline Exchange

- Multi-career (students to sr. investigators)
- Multi-discipline (data scientist & researchers)
- Feature Datasets with Guest Expert Leads
- Secure experts in topic area, analytics, data sources etc. to provide guidance
- Generate research idea decide potential design, datasets & analytics
- Select co-leads to coordinate completion outside of TaT
- Publications

Register:



bit.ly/think-a-thons





## Research Think - a - Thons



#### **Expectation of the Research Project.**

- The launch of the project will occur during the Think-a-Thon.
  - o Pre-Assigned Co-Leads: Data Science Expert and a Health Disparity/Health Care Delivery Expert
  - o There will be 4 sessions: 2 python, 1 R and 1 Statistic defined research collaborative
  - Volunteers who want to participate in health disparity/health care delivery research will select one of the 4 sessions based upon the analytics expected to be used
  - o In the breakouts, the group will decide the research topic and which data sets will be used.
- The co-leads will assign tasks to the participants for the next **three months** to complete the project in preparation for publication. There will be meetings other than Think-a-Thons to:
  - review progress of tasks
  - help/teach others what each participant is contributing
  - assessing what else needs to be completed



## Research Think - a - Thons



#### **During Think-a-Thon**

- Schare Terra Workspace (Data Co-lead is primary to create and to monitor workspace collaborators
- Research Topic (Science co-lead will guide the discussion to the consensus topic)
- Likely data sets to be used for topic

#### **Project Expectations:**

- Literature review
- Data set assessment for AI readiness (i.e. complete variables needed for project, fair representation of populations, missing variables, incompleteness of variables, data gaps, etc)
- Data Dictionary
- Data Sheet and Data Set Facts
- Design description to ensure that the outcome expected is probable.
- Decision on analytics and training to be used (complete a methodology description, including a model card)
- Test results for biases (document the types of biases encountered and how each addressed)
- Draft Publication



## Research Think - a - Thons

# Generational Career & Discipline Exchange

## **Experience Conducting Ethical AI**

#### TRANSPARENCY:

- Def:
- Public Perception & understanding of how AI works
- Comprehend the algorithmic views and decisions taken based on them
- Technical Documentation for duplication / re-use
- Tools:
  - Data Dictionary
  - Health Sheet (Data Sheet)
- Model Cards (capabilities & purpose of algorithms are openly and clearly communicated to relevant stakeholders)
- Documentation of methodologies
- Doesn't disclose intellectual property

#### **FAIRNESS:**

- Findable: providing metadata, documentation, and clear identifiers
- Accessible: wide audience
- •Interoperable: standardized formats and APIs enable seamless integration.
- Reusable: clear documentation, licensing, reduce redundancy

Metadata and data should be easy to find for both humans and computers

Ensure that data represents relevant populations

https://www.nimhd.nih.gov/resources/schare/think-a-thons.html

## Think-a-Thons Training/Mentoring Pipeline

NLM OIC Experts Fellows

Using experts

Think-a-Thons

✓ Instructional

✓ Research

To train and mentor novice users



To increase diverse perspectives in biomedical research

#### Goal: "Upskilling"

- ✓ Data science specialist into health disparities and health outcomes research
- ✓ Health Disparity/Outcomes researchers into using big data and cloud computing

#### **Target Audience:**

- ✓ Underrepresented populations (women, race/ethnic) users not trained in data science
- ✓ Data scientist with no or little research experience.
- ✓ Resource & Tool for Community Colleges and Low Resource MSIs and Organizations

# Interest poll

#### I am interested in (check all that apply):

- ☐ Learning about Health Disparities and Health Outcomes research to apply my data science skills
- □ Conducting my own research using Al/cloud computing and publishing papers
- ☐ Connecting with new collaborators to conduct research using Al/cloud computing and publish papers
- $\square$  Learning to use AI tools and cloud computing to gain new skills for research using Big Data
- ☐ Learning cloud computing resources to implement my own cloud
- ☐ Developing bias mitigation and ethical Al strategies
- □ Other

# SCHARe

Computational Strategies



## **Data Science Computational Strategies**

#### **Choosing Between Traditional Statistics and AI/ML**

Welcome to the second part of our workshop on conducting research projects

- Today's overview will cover selecting computational strategies in data science. We'll explore the decision-making process involved in choosing between traditional statistics and Artificial Intelligence (AI)/Machine Learning (ML)
- We will help you understand the fundamental differences between these approaches and their respective advantages and disadvantages, and point you to helpful Python libraries for each strategy

## **Decision-Making Process**

Choosing the **right approach to analyzing data** is critical for achieving research objectives effectively

The decision-making process in selecting computational strategies involves several **key steps**:

- 1. We must clearly define the research problem or question we aim to address
- 2. Next, we must consider the **nature of the data we have**, our **research goals**, and the **resources available** to us

Based on these factors, we then choose the most appropriate computational strategy

#### Traditional Statistics vs. Al and ML

Traditional Statistics and modern computational techniques such as Artificial Intelligence (AI) and Machine Learning (ML) offer **distinct approaches to data analysis**:

- Traditional Statistics focuses on hypothesis testing, inference, and the application of parametric and non-parametric methods. It emphasizes interpretability, reliance on assumptions, and limitations in handling complex datasets
- In contrast, Al and ML prioritize pattern recognition, prediction, and the development of predictive models. They emphasize scalability, complexity management, and the ability to process large volumes of data efficiently. However, Al and ML models often trade interpretability for increased predictive power, leading to challenges in understanding their decision-making processes

## **Analyses Enabled by Al and Big Data**

- Artificial Intelligence (AI) and Big Data enable a wide range of advanced analyses that go beyond traditional statistical methods, including:
  - predictive analytics
  - natural language processing
  - image recognition
  - anomaly detection (identifying unusual patterns or data points that deviate significantly from the expected norm)
- All and Big Data empower researchers to extract valuable insights from vast and complex datasets, leading to more accurate predictions, enhanced decision-making and problem-solving capabilities
- Examples of Al and Big Data analyses include predictive modeling for disease outbreak prediction and sentiment analysis of social media data for public health monitoring

#### **Conclusion and Recommendations**

It's important to consider the nature of the research problem, the characteristics of the data,
 and the desired outcomes when choosing a computational strategy

#### Recommendations:

- 1. Assess the **research objectives and data characteristics** before selecting a strategy
- 2. Leverage the **strengths of each approach** to maximize the insights gained from data analysis
- 3. Stay informed about **emerging technologies and methodologies** in data science to adapt to evolving research needs
- By making informed decisions about computational strategies, researchers can enhance the quality and impact of their research outcomes

# SCHARe

**Traditional Statistics** 



#### **Overview**

- Strengths: robust, interpretable, well-established methodologies
- Weaknesses: limited predictive power, assumption-dependent, often focused on hypothesis testing
- Data types & use cases: numerical data, identifying trends, correlations, causal relationships

Popular Python libraries: NumPy, SciPy, Pandas

## 1. Descriptive Statistics

 Strategy: Summarizing and describing key features of healthcare data, such as mean, median, standard deviation, and percentiles

Applications: Understanding the central tendency and variability in healthcare variables

Python Libraries: NumPy, pandas

#### 2. Inferential Statistics

 Strategy: Making predictions or inferences about a population based on a sample from that population

 Applications: Drawing conclusions about healthcare disparities from a subset of relevant data

Python Libraries: SciPy, statsmodels

# 3. Hypothesis Testing

 Strategy: Evaluating statistical significance to determine whether observed differences are likely to be real or due to chance

Applications: Testing hypotheses about healthcare interventions or disparities

Python Libraries: SciPy, statsmodels

# 4. Analysis of Variance (ANOVA)

 Strategy: Assessing the statistical significance of differences among group means in healthcare data

 Applications: Comparing means across multiple categories to identify significant differences

Python Libraries: SciPy, statsmodels

# 5. Chi-Square Test

 Strategy: Assessing the association between categorical variables in healthcare datasets

 Applications: Examining relationships between demographic factors and health outcomes

Python Libraries: SciPy, pandas

# 6. Regression Analysis

 Strategy: Modeling the relationship between dependent and independent variables in healthcare data

Applications: Predicting health outcomes based on various factors, identifying disparities

Python Libraries: Statsmodels, scikit-learn

## 7. Survival Analysis

 Strategy: Analyzing time-to-event data, such as the time until a patient experiences a particular health event

Applications: Studying disparities in disease progression or survival rates

Python Libraries: Lifelines, statsmodels

# 8. Correlation Analysis

 Strategy: Examining the strength and direction of relationships between two continuous variables in healthcare datasets

 Applications: Assessing associations between risk factors and health outcomes

Python Libraries: NumPy, pandas

## 9. Logistic Regression:

Strategy: Modeling the probability of a binary outcome in healthcare data

Applications: Analyzing factors influencing the likelihood of specific health events

Python Libraries: Statsmodels, scikit-learn

## 10. Bayesian Statistics

 Strategy: Updating beliefs about parameters based on new evidence in a probabilistic framework

Applications: Incorporating prior knowledge into healthcare disparities research

Python Libraries: PyMC3, Stan

# 11. Time Series Analysis

Strategy: Analyzing temporal patterns and trends in healthcare data

 Applications: Studying disparities over time in health outcomes or interventions

Python Libraries: Statsmodels, Pandas

# SCHARE

**Artificial Intelligence and Machine Learning** 



# **Main AI Computational Strategies**

 Artificial Intelligence (AI) encompasses various computational strategies aimed at mimicking human intelligence

 These strategies are implemented using different algorithms and techniques

 Python, being a versatile language, offers numerous libraries for implementing AI strategies effectively

## **Machine Learning (ML)**

- Machine learning involves the development of algorithms that enable computers to learn from and make predictions or decisions based on data. ML allows computers to improve at a specific task without explicit programming, by learning from data
- Examples:
  - Linear Regression
  - Decision Trees
  - Random Forest
- Commonly Used Python Libraries:
  - scikit-learn
  - TensorFlow
  - Keras
  - PyTorch

## **Deep Learning**

Deep learning is a subset of machine learning that is inspired by the structure and function
of the brain. It uses artificial neural networks comprising multiple layers to learn complex
patterns from data

#### Examples:

- Convolutional Neural Networks (CNNs) for image recognition
- Recurrent Neural Networks (RNNs) for sequence data
- Generative Adversarial Networks (GANs) for generating synthetic data
- Commonly Used Python Libraries:
  - TensorFlow
  - Keras
  - PyTorch

# Natural Language Processing (NLP)

- NLP involves the interaction between computers and humans using natural language. It
   focuses on giving computers the ability to understand and manipulate human language
- Examples:
  - Sentiment Analysis
  - Named Entity Recognition (NER) (it categorizes specific elements within text)
  - Machine Translation
- Commonly Used Python Libraries:
  - NLTK (Natural Language Toolkit)
  - spaCy
  - Transformers

## Reinforcement Learning

- Reinforcement learning focuses on training agents to make sequential decisions by interacting with an environment
- Examples:
  - Game playing (e.g., AlphaGo)
  - Robotics control
  - Recommendation systems
- Commonly Used Python Libraries:
  - OpenAl Gym
  - TensorFlow Agents
  - Stable Baselines

## **Evolutionary Algorithms**

Evolutionary algorithms are inspired by biological evolution and involve optimization
 techniques based on natural selection and genetic variation. Specifically, they mimic natural selection to solve problems by iteratively refining populations of candidate solutions

#### Examples:

- Genetic Algorithms
- Genetic Programming
- Evolutionary Strategies
- Commonly Used Python Libraries:
  - DEAP (Distributed Evolutionary Algorithms in Python)
  - PyGMO (Python Parallel Global Multiobjective Optimizer)

## Quiz 1

**Scenario:** You are a public health researcher investigating the factors contributing to higher rates of heart disease among a specific minority population in your community. You have a dataset containing information about thousands of individuals, including demographics, socioeconomic factors, health history, and access to healthcare.

**Question:** Which approach would be most suitable for analyzing this data to understand the disparities in heart disease rates?

- a) Traditional Statistics: Calculate average income levels and compare them to heart disease prevalence across different zip codes within the community.
- **b) Machine Learning:** Develop a machine learning model to predict the likelihood of developing heart disease for individuals based on their data.
- c) Both Traditional Statistics and Machine Learning: Use traditional statistics to explore initial relationships and then build a machine learning model to identify complex patterns contributing to the disparities.

## Quiz 1

Answer: (C) Both Traditional Statistics and Machine Learning

#### **Explanation:**

- Traditional statistics can reveal basic trends, like correlations between income and heart disease prevalence across zip codes. This can provide initial clues about potential disparities.
- Machine learning can be powerful in health disparities research. It can analyze complex interactions between various factors (e.g., income, access to healthcare, environmental factors) and their combined influence on heart disease risk within the specific population.
- By combining traditional statistics for initial exploration with machine learning for in-depth analysis, you
  gain a comprehensive understanding of the factors contributing to the observed health disparities.

# SCHARe

**Python Libraries** 



#### What is Python?

Python is a **computer programming language** used in data science to:

- manipulate and analyze data
- create data visualizations
- build machine learning algorithms



Imagine you want to tell your computer what to do, by giving it clear, easy-to-understand commands. That's what Python is like!

- Easy to learn: Python uses words and phrases that are close to everyday English, making it a good choice for beginners
- Versatile: You can use Python for many things
- Free and open-source: Anyone can use and improve Python for free: there's a large and helpful community to answer your questions
- Popular: there are lots of online resources to help you learn

#### Why Python?

#### According to SlashData:

- there are 8.2 millionPython users
- 69% of machine learning developers and data scientists use Python (vs. 24% using R)

#### Source

stackify.com/learn-python-tutorials/

#### **How to learn Python**

#### How long does it take to learn Python?

It can take **2 to 5 months**, but you can write your first short program in **minutes** 

#### Can you learn Python with no experience?

Python is the **perfect** programming language **for people without any coding experience**, as it has a simple syntax and is very accessible to beginners

Links to additional **free learning resources** will be provided

## Introduction to Python Data Science Libraries

- Python offers a rich ecosystem of libraries for data science tasks
- In this section, we'll introduce some of the most commonly used Python libraries in data science
- Each library serves
   specific functions in the data science workflow

#### What is a Python library?

It's like a collection of tools or functions that someone else has already built and packaged up for you to use in your own programs

When you're writing a Python program and you need to do something specific, like create visualizations, you can often find a library that already has the tools you need for that job

You just need to "import" the library into your program, and you can start using its tools right away

### **Overview of Python Data Science Libraries**

Python data science libraries are essential for data manipulation, analysis, and visualization tasks.



### **NumPy: The Foundation for Numerical Computing**



#### Overview

A fundamental package for scientific computing, providing support for large, multi-dimensional arrays (ordered collections of items) and matrices

#### Characteristics

- Provides efficient multidimensional arrays for data storage and manipulation
- Enables mathematical operations on large datasets
- Lays the groundwork for data analysis with other libraries

#### **Example application**

Calculating statistical measures such as mean, median, and standard deviation of health indicators (e.g., life expectancy) across various demographic groups

#### **SciPy: Extending Computing Capabilities**



#### **Overview**

An open-source library that builds on NumPy and provides additional functionality for mathematical and scientific computing

#### Characteristics

- Offers advanced algorithms for scientific computing beyond NumPy
- Includes tools for optimization, integration, and signal processing
- Complements NumPy for diverse scientific computing tasks

#### **Example application**

Conducting hypothesis testing to evaluate the effectiveness of interventions aimed at reducing health disparities, such as comparing pre- and post-intervention health indicators

## **Pandas: Wrangling Data Like a Pro**



#### **Overview**

A powerful library for data manipulation and analysis, offering data structures and functions for manipulating structured data

#### Characteristics

- Offers powerful data structures like DataFrames for handling tabular data
- Enables data cleaning, manipulation, and exploration with ease
- Integrates seamlessly with other data science libraries

### **Example application**

Exploring correlations between socio-economic factors (e.g., income, education level) and health outcomes (e.g., mortality rates)

## **Matplotlib: Visualizing Insights**



#### **Overview**

A comprehensive library for creating static, animated, and interactive visualizations in Python, offering a wide range of plotting functions

#### Characteristics

- Creates a wide variety of static, animated, and interactive visualizations
- Enables customization for clear and compelling data storytelling
- Integrates with other libraries for comprehensive data exploration

## **Example application**

Creating visualizations such as bar charts or pie charts to illustrate disparities in healthcare access among different ethnic or socio-economic groups

## Seaborn: Building on Matplotlib for Stats



#### **Overview**

A statistical data visualization library based on Matplotlib, providing a high-level interface for creating informative and attractive visualizations

#### Characteristics

- Offers a high-level interface built upon Matplotlib for statistical graphics
- Creates aesthetically pleasing and informative visualizations
- Ideal for exploring relationships and distributions within your data

## **Example application**

Creating box plots or violin plots to compare distributions of health indicators (e.g., blood pressure levels) among different population segments

## Scikit-learn: Machine Learning Made Accessible



#### Overview

A machine learning library that offers simple and efficient tools for data mining and data analysis, including classification, regression, clustering, and dimensionality reduction

#### Characteristics

- Provides a comprehensive library for various machine learning algorithms
- Enables tasks like classification, regression, and clustering
- Facilitates model building, evaluation, and deployment

## **Example application**

Implementing machine learning algorithms to classify patients into different risk categories based on socio-economic factors and predict healthcare outcomes (e.g., hospital readmissions)

## **Statsmodels: Diving Deeper into Statistical Analysis**



#### **Overview**

A library for estimating statistical models and conducting statistical tests, providing a wide range of statistical techniques

#### Characteristics

- Provides a collection of tools for statistical modeling and econometrics
- Enables robust **hypothesis testing**, estimation, and model selection
- Ideal for in-depth statistical analysis of health disparities data

## **Example application**

Exploring correlations between socio-economic factors (e.g., income, education level) and health outcomes (e.g., mortality rates)

## **TensorFlow: Building Powerful Deep Learning Models**



#### Overview

An open-source machine learning framework developed by Google, widely used for building and training deep learning models

#### Characteristics

- Open-source framework for numerical computation and large-scale machine learning
- Particularly adept at deep learning, a powerful subset of machine learning
- Enables building and training complex models for tasks like natural language processing

## **Example application**

Training convolutional neural networks (CNNs) to analyze medical images (e.g., X-rays, MRIs) and detect signs of disease or abnormalities associated with health disparities

## PyTorch: A Powerful Deep Learning Framework



#### Overview

Provides support for distributed training across multiple GPUs and devices, enabling researchers to train large-scale machine learning models efficiently

#### Characteristics

- Well-suited for rapid prototyping and experimentation
- User-friendly approach that lowers the barrier to entry for deep learning
- PyTorch models can be efficiently deployed in production environments

### **Example application**

Adapting pre-trained language models for healthcare-specific NLP tasks, such as extracting information about social determinants of health from unstructured text data

## Quiz 2

Which Python library is commonly used for data manipulation and analysis, offering data structures and functions for working with structured data?

- a) NumPy
- b) Pandas
- c) SciPy
- d) Statsmodels

## Quiz 3

Which Python library is known for its statistical data visualization capabilities and is based on Matplotlib?

- a) NumPy
- b) Pandas
- c) Seaborn
- d) TensorFlow

## **Example Application with Code (NumPy)**

```
Copy code
python
import numpy as np
# Sample health outcome data for different demographic groups
health_outcomes = np.array([
    [120, 80, 100], # Group 1
   [90, 110, 95], # Group 2
    [100, 95, 105] # Group 3
1)
# Calculate mean, median, and standard deviation
mean_outcomes = np.mean(health_outcomes, axis=1)
median_outcomes = np.median(health_outcomes, axis=1)
std outcomes = np.std(health outcomes, axis=1)
print("Mean outcomes:", mean_outcomes)
print("Median outcomes:", median_outcomes)
print("Standard deviation of outcomes:", std_outcomes)
```

NumPy simplifies numerical computations and array operations in Python

Example:
Calculating
summary
statistics for health
outcome data and
detecting variations
across demographic
groups

## Libraries in notebooks

A **Jupyter Notebook** is an interactive analysis tool that includes:

- code cells for manipulating and visualizing data in real time (Terra notebooks support Python or R)
- documentation to make it easier to share and reproduce your analysis

In past Think-a-Thons, we:

- covered the basics of creating your first notebook
- explored the instructional notebooks available in the ScHARe workspace

If you are not familiar with **programming**, the code in our notebooks is very easy to understand and reuse, and our tutorials will help you understand how notebooks work.

#### Why use notebooks?

A notebook integrates code and its output into a single document where you can run code, display the output, and also add explanations, formulas, and charts

#### Using notebooks:

- is now a major part of the data science workflow at research institutions across the globe
- can make your work more transparent, understandable, repeatable, and shareable
- will speed up your workflow and make it easier to communicate and share your results

## ScHARe notebooks

Take a look at what a notebook can do by checking out the instructional notebooks that ScHARe offers to help novice users learn how to use the workspace and its resources

A list of the available notebooks is provided on the right.

#### List of ScHARe instructional notebooks

- 00\_List of Datasets Available on ScHARe: a list of the datasets available in the ScHARe Datasets collection.
- 01\_Introduction to Terra Cloud Environment: an introduction to the Terra platform and cloud environment.
- 02\_Introduction to Terra Jupyter Notebooks: an introduction to Jupyter Notebooks on the Terra platform.
- 03\_R Environment setup: instructions on how to setup your cloud environment for R-based notebooks.
- 04\_Python 3 Environment setup: instructions on how to setup your cloud environment for Python 3-based notebooks.
- 05\_How to access plot and save data from public BigQuery datasets using R: instructions on how to access, plot, and save data from datasets available on the cloud through the Google Cloud Public Datasets Program, using R.
- 06\_How to access plot and save data from public BigQuery datasets using Python 3: instructions on how to access, plot, and save data from datasets available on the cloud through the Google Cloud Public Datasets Program, using Python 3.
- 07\_How to access plot and save data from ScHARe hosted datasets using Python 3: instructions on how to access, plot, and save data from datasets hosted by ScHARe in this workspace.
- 08\_How to upload access plot and save data stored locally using Python 3: instructions on how to import to Terra, access, plot, and save data from datasets stored locally on your computer.

# SCHARe

Python External Resources



You can take advantage of the dozens of "Python for data science" online tutorials for beginners and advanced programmers listed here:

- Stackify 30+ Tutorials to Learn Python
- FreeCodeCamp Code Class for Beginners
- Harvard Free Python Course
- Coursera Free and Paid Python Courses
- <u>LearnPython Free Interactive Python Tutorials</u>
- BestColleges 10 Places to Learn Python for Free



## **Stackify**

30+ tutorials to learn Python

#### **Top 30 Python Tutorials**

In this article, we will introduce you to some of the best **Python tutorials.** These tutorials are suited for both beginners and advanced programmers. With the help of these tutorials, you can learn and polish your coding skills in Python.

- 1. Udemy
- 2. Learn Python the Hard Way
- 3. Codecademy
- 4. Python.org
- 5. Invent with Python
- 6. Pythonspot
- 7. AfterHoursProgramming.com
- 8. Coursera
- 9. Tutorials Point
- 10. Codementor
- 11. Google's Python Class eBook
- 12. Dive Into Python 3
- 13. NewCircle Python Fundamentals Training
- 14. Studytonight
- 15. Python Tutor
- 16. Crash into Python
- 17. Real Python
- 18. Full Stack Python
- 19. Python for Beginners
- 20. Python Course
- 21. The Hitchhiker's Guide to Python!
- 22. Python Guru
- 23. Python for You and Me
- 24. PythonLearn
- 25. Learning to Python
- 26. Interactive Python
- 27. PythonChallenge.com
- 28. IntelliPaat
- 29. Sololearn
- 30. W3Schools

#### **FreeCodeCamp**

Code class for beginners

#### freeCodeCamp(♠)

Learn to code - free 3,000-hour curriculum

## Python Tutorial for Beginners (Learn Python in 5 Hours)

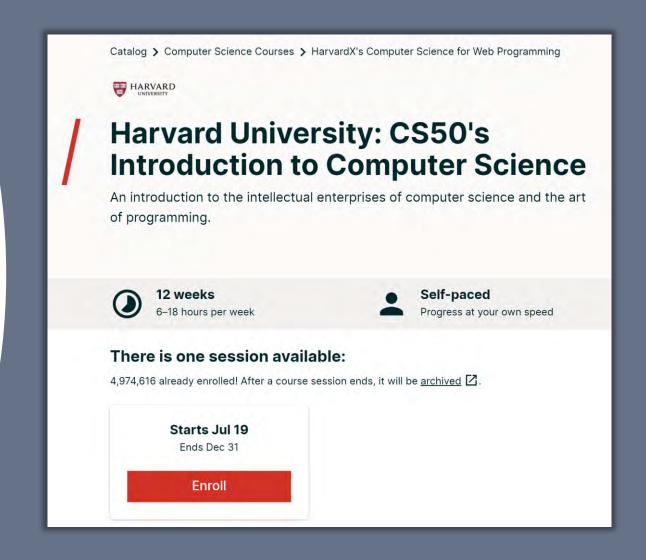
In <u>this TechWorld with Nana YouTube course</u>, you will learn about strings, variables, OOP, functional programming and more. You will also build a couple of projects including a countdown app and a project focused on API requests to Gitlab.

## **Scientific Computing with Python**

In <u>this freeCodeCamp certification course</u>, you will learn about loops, lists, dictionaries, networking, web services and more.

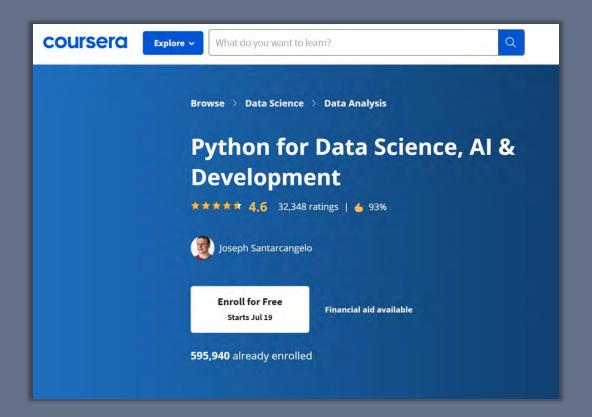
#### **Harvard**

Free Python course



#### Coursera

Free and paid Python courses



#### **LearnPython**

Free interactive Python tutorials

#### **Learn the Basics**

- Hello, World!
- Variables and Types
- Lists
- Basic Operators
- String Formatting
- Basic String Operations
- Conditions
- Loops
- Functions
- Classes and Objects
- Dictionaries
- Modules and Packages

#### **Data Science Tutorials**

- Numpy Arrays
- Pandas Basics

#### **Advanced Tutorials**

- Generators
- List Comprehensions
- Lambda functions
- Multiple Function Arguments
- Regular Expressions
- Exception Handling
- Sets
- Serialization
- Partial functions
- Code Introspection
- Closures
- Decorators
- Map, Filter, Reduce

#### **BestColleges**

10 places to learn Python for free



# SCHARe

Algorithm Testing and Monitoring



## What are Algorithms?

 An algorithm is a finite set of well-defined instructions designed to perform a specific task or solve a particular problem, often expressed in a logical sequence in a step-by-step process that can be executed by a computer

 Algorithms enable efficient and accurate decision-making and problem-solving across various domains, including healthcare policy decisions



## Here's how it works in healthcare

- Lots of data: Hospitals collect tons of data about patients (diagnoses, treatments, and meds)
- Data analysis: Algorithms sift through this massive amount of data and identify patterns
- Informing decisions: Healthcare policymakers might use these patterns to decide how to allocate resources, like which treatments are most effective or where to offer more services

Sounds helpful, right? But there's a catch:

**Algorithmic Bias** 



## **Algorithmic Bias**

 Algorithmic bias refers to systematic and unfair outcomes arising from algorithms used for decision-making

 Algorithms trained on biased data or with flawed design can perpetuate or amplify existing societal biases in healthcare

Where can bias creep in during the development and implementation of algorithms?



- 1. Data Acquisition and Selection:
- Sampling Bias: if the data used to train the algorithm doesn't represent the entire target population
- Historical Bias: if

   historical healthcare
   data reflects past
   discrimination

- 2. FeatureEngineering andModel Design:
- Choosing the wrong features can lead the algorithm to make unfair decisions based on irrelevant factors.
- Model design: inherent limitations

#### 3. Model Training and Evaluation:

- Training data quality: inaccurate or incomplete datas
- Evaluation metrics: focusing solely on overall accuracy might mask disparate impacts on different populations. We need fairness metrics that assess how the algorithm performs across different subgroups (e.g., race, ethnicity, socioeconomic status)

## 4. Implementation and Monitoring:

- Limited transparency: If the decision-making process of the algorithm is a "black box," it's hard to identify and mitigate biases
- Unintended consequences: Even well-intentioned algorithms can lead to unintended consequences if not continuously monitored for potential biases emerging in real-world use

## **Importance of Algorithm Testing**

- 1. Crucial during the design phase of a research project
- 2. Ensures the reliability and validity of algorithms before implementation
- 3. Enhances the accuracy and effectiveness of algorithms in real-world applications

## Importance of Algorithm Monitoring

- 1. Evolving Data and Real-World Use: The data an algorithm encounters in real-world use might differ from the training data
- 2. Unforeseen Consequences: Even well-designed algorithms can have unintended consequences
- 3. Shifts in Societal Biases: Societal biases are constantly evolving. Monitoring helps ensure the algorithm doesn't become biased due to changes in the social landscape
- 4. Building Trust and Transparency: Regular monitoring demonstrates a commitment to fairness and helps build trust in the algorithms used for healthcare decisions

## **Avoiding Perpetuating Bad Al**

Strategies to mitigate bias in datasets:

- 1. Identify potential sources of bias: Analyze data collection methods, sampling procedures, and variable selection for potential biases
- 2. Utilize bias mitigation techniques: Apply techniques like data balancing, weighting, or fairness-aware algorithms to mitigate bias in the data
- 3. Promote transparency and responsible Al practices: Document the limitations of the data and potential biases to ensure responsible use of Al models trained on the dataset.

## Legal and Regulatory Frameworks

Legal and regulatory frameworks govern the use of algorithms include:

- 1. Anti-Discrimination Laws: Prohibiting discrimination based on protected characteristics such as race, gender, or age
- 2. Privacy Regulations: Safeguarding individuals' privacy rights and regulating the collection and use of personal data
- 3. Ethical Guidelines: Providing guidelines for ethical algorithm development and deployment, issued by professional organizations or government agencies

**Compliance is essential** 

## Ethical Considerations and Responsible Al

Principles of responsible AI include:

- 1. Fairness: Ensuring algorithms produce unbiased outcomes across different demographic groups
- 2. Transparency: Making algorithms transparent and understandable to stakeholders
- 3. Accountability: Holding developers and users accountable for the impact of algorithms
- 4. Privacy: Protecting individuals' privacy rights and sensitive information

Adhering to ethical principles is essential for building trust and mitigating potential harms associated with Al

## Quiz 4

## To mitigate bias in algorithms used for real-world applications, it's important to:

- a) Only use the algorithm on datasets with perfectly balanced representation
- b) Continuously monitor the algorithm's performance across different demographics and adjust as needed
- c) Focus solely on optimizing the accuracy of the algorithm during development
- d) Limit the complexity of the algorithm to ensure easy interpretability

## Quiz 5

## Societal biases can potentially be reflected in algorithm output because:

- a) Algorithms are inherently malicious and designed to discriminate
- b) Algorithms are completely objective and not influenced by external factors
- c) Algorithms learn from data, which can contain societal biases
- d) Algorithms are programmed by biased human creators

# SCHARE

Open Science and Reproducibility





## Introduction to Open Science

Open Science is a paradigm shift in research practices aimed at fostering transparency, collaboration, and accessibility

It promotes the sharing of:

- research data
- methodologies
- findings

to accelerate scientific progress and innovation



## **Open Science Principles**

- 1. Open Access: Making research findings freely available online, often through open access journals or repositories
- 2. Open Data: Sharing the raw data used in research studies
- 3. Open Methodology: Making the research methods and protocols used in a study openly available
- 4. Open Source: Using and sharing open-source software for data analysis and other research tasks



- 5. Open Peer Review: Making the peer review process more transparent, allowing reviewers' identities or comments to be disclosed to some extent
- 6. Reproducibility: Conducting research in a way that allows others to reproduce the findings
- 7. Collaboration: Encouraging researchers to work together and share their findings openly
- 8. Public Engagement: Communicating scientific findings to the public in a clear, understandable way



## NIH and ScHARe Embrace Open Science

Promoting Open Science is crucial for:

- advancing knowledge discovery
- improving research reproducibility
- promoting public trust in science



The National Institutes of Health (NIH) implemented a new Data Management and Sharing (DMS) Policy in January 2023

Goal: promote transparency and responsible data management in scientific research



#### Who is affected:

- Researchers applying for NIH funding (grants, contracts)
- Intramural NIH researchers (conducting research within the NIH itself)

 Core principle: Maximize the appropriate sharing of scientific data



#### **Benefits of data sharing:**

- Enables verification and reproduction of findings
- Fosters collaboration among researchers
- Accelerates scientific progress
- Increases the impact of funded research



#### What data needs to be shared?

Scientific data generated from the funded/conducted research, with exceptions for data with privacy risks, commercialization potential, or security concerns

#### How is data shared?

Researchers must submit a

Data Management and Sharing

Plan outlining how they will

handle data, ensure its quality

and security, and deposit it in a

suitable public repository

The Schare repository is designed to meet the data sharing requirements of the NIH data sharing policy

## The ScHARe Repository for Data Management:

- serves as a centralized platform for storing, managing, and sharing research data related to health disparities
- adheres to FAIR principles (Findable, Accessible, Interoperable, Reusable) to ensure data discoverability and usability
- supports Open Science initiatives and promotes collaborative research

The ScHARe repository focuses on Common Data Elements (CDEs), standardizing data and metadata to facilitate interoperability and data reuse

### The ScHARe CDEs

- Common Data Elements (CDEs) are standardized, precisely defined data points used consistently across different research studies
- They act as building blocks for collecting and sharing data in a comparable and interoperable manner



## **Benefits of CDEs**

- Standardization: Ensures consistency in data collection, formatting, and reporting across studies
- Interoperability: Facilitates data integration and comparison between different datasets and projects
- Efficiency: Streamlines data management processes, reducing redundancy and errors in data handling
- Collaboration: Promotes collaboration and data sharing among researchers
- Quality: Enhances data quality and reliability by adopting standardized data collection and reporting practices

## Schare Core CDEs

**NIH CDE Repository:** https://cde.nlm.nih.gov/home

#### NIH **Endorsed**



- Age
- Birthplace
- Zip Code
- Race and Ethnicity
- Sex
- Gender
- Sexual Orientation
- Marital Status
- Education
- Annual Household Income
- Household Size

- English Proficiency
- Disabilities
- Health Insurance
- **Employment Status**
- Usual Place of Health Care
- Financial Security / Social Needs
- Self Reported Health
- Health Conditions (and Associated Medications/Treatments)
- NIMHD Framework\*
  Health Disparity Outcomes\*

  \* Project Level CDEs

For FUNDED PROJECT DATA – CDEs Centralized for Interoperability and Data Sharing

## Quiz 6

## The core principle of the NIH Data Management and Sharing (DMS) Policy emphasizes:

- a) Restricting access to all scientific data generated by NIH-funded research
- b) Maximizing the appropriate sharing of scientific data while considering ethical and legal limitations
- c) Encouraging the publication of research findings in open-access journals only
- d) Prioritizing data privacy over all other considerations

## Quiz 7

Which of the following is a primary benefit of using common data elements (e.g., standardized variable names, units of measure)?

- a) Improves data security and privacy
- b) Simplifies data analysis and comparison across studies
- c) Reduces the overall size of data storage requirements
- d) Enhances the visual appeal of data presentations

# SCHARe

Brainstorming for Research Projects



#### Let's brainstorm health disparities research ideas

#### Let's consider:

- innovative approaches and methodologies, such as Al
- datasets publicly available on Schare



## **Health disparities**

A health disparity is a health difference that adversely affects disadvantaged **populations** in comparison to a reference population, based on one or more **health outcomes** 

#### **Health Disparity Outcomes**

The health outcomes are categorized as:

- Higher incidence and/or prevalence of disease, including earlier onset or more aggressive progression of disease.
- Premature or excessive mortality from specific health conditions.
- Greater global burden of disease, such as Disability Adjusted Life Years (DALY), as measured by population health metrics.
- Poorer health behaviors and clinical outcomes related to the aforementioned.
- Worse outcomes on validated self-reported measures that reflect daily functioning or symptoms from specific conditions.

## Populations with Health Disparities

Populations that experience health disparities include:

- Racial and ethnic minority groups
- People with lower socioeconomic status (SES)
- Underserved rural communities
- Sexual and gender minority (SGM) groups
- People with disabilities

## Inequities can lead to health disparities

Social determinants of health (SDoH) are the nonmedical factors that influence health outcomes

They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life

www.cdc.gov/about/sdoh/index.html



If certain communities have less access to good education, jobs, fresh food or healthcare, they might face **more challenges in staying healthy** or may not have the same **opportunities to make healthy choices** 



How do these nonmedical factors interact with each other and biology to influence health?

Artificial Intelligence may have the answer



## Identifying research gaps

Areas with limited research in the current health disparity research landscape:

## 1. Social Determinants of Health (SDoH) Interactions

A gap exists in understanding the complex interactions between SDoH factors and how they contribute to health disparities across different populations

#### 2. Precision Disparities

The rise of personalized medicine using genomics raises concerns about potential disparities in access and benefits. How do genetic and social factors intertwine to create "precision health disparities"?

#### 3. Intersectionality and Health

Traditional research focuses on single demographic factors (e.g., race, gender). How do multiple social identities (e.g., Black woman, LGBTQ+, immigrant) intersect and influence health outcomes?

#### 4. Role of Implicit Bias in Healthcare Systems

How does implicit bias in healthcare delivery affect treatment recommendations and patient experiences? What interventions can mitigate its effects?

#### 5. Digital Divide and Disparities

Lack of access to technology can exacerbate health disparities. How to leverage technology to improve health outcomes for underserved populations while ensuring equitable access?

#### 6. Environmental Exposures and Disparities

Communities of color and low-income populations are often disproportionately exposed to environmental hazards. What are the long-term health effects of these exposures?

#### 7. Longitudinal Studies on Disparities

Many studies are cross-sectional. Longitudinal studies that track individuals over time are crucial for understanding the progression of disparities

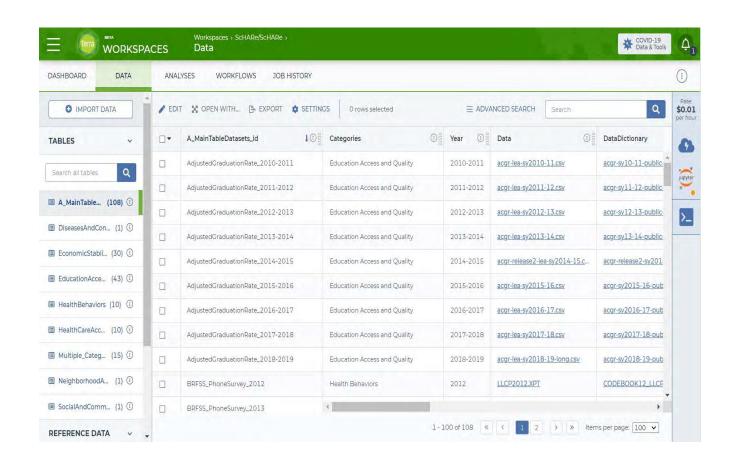




## SDoH-related Datasets Available on ScHARe: A Valuable Resource

ScHARe provides a valuable platform for researchers seeking **SDoH-related data** 

**Explore the available datasets** to identify potential resources that align with your research interests in social determinants of health and their impact on various health outcomes



## **Schare** Ecosystem

#### The ScHARe Data Ecosystem is comprised of:

- 1. Google Hosted Public Datasets: publicly accessible, federated, de-identified datasets hosted by Google through the Google Cloud Public Dataset Program Example: American Community Survey (ACS)
- 2. Schare Hosted Public Datasets: publicly accessible, de-identified datasets hosted by Schare

**Example**: Behavioral Risk Factor Surveillance System (BRFSS)

3. Schare Hosted Project Datasets: publicly accessible and controlled-access, funded program/project datasets using Core Common Data Elements shared by NIH grantees and intramural investigators to comply with the NIH Data Sharing Policy

Examples: Jackson Heart Study (JHS); Extramural Grant Data; Intramural Project Data

## ScHARe Ecosystem: Google hosted datasets

Examples of interesting datasets include:

- American Community Survey (U.S. Census Bureau)
- US Census Data (U.S. Census Bureau)
- Area Deprivation Index (BroadStreet)
- GDP and Income by County (Bureau of Economic Analysis)
- US Inflation and Unemployment (U.S. Bureau of Labor Statistics)
- Quarterly Census of Employment and Wages (U.S. Bureau of Labor Statistics)
- Point-in-Time Homelessness Count (U.S. Dept. of Housing and Urban Development)
- Low Income Housing Tax Credit Program (U.S. Dept. of Housing and Urban Development)
- US Residential Real Estate Data (House Canary)
- Center for Medicare and Medicaid Services Dual Enrollment (U.S. Dept. of Health & Human Services)
- Medicare (U.S. Dept. of Health & Human Services)
- Health Professional Shortage Areas (U.S. Dept. of Health & Human Services)
- CDC Births Data Summary (Centers for Disease Control)
- COVID-19 Data Repository by CSSE at JHU (Johns Hopkins University)
- COVID-19 Mobility Impact (Geotab)
- COVID-19 Open Data (Google BigQuery Public Datasets Program)
- COVID-19 Vaccination Access (Google BigQuery Public Datasets Program)

Organized based on the CDC SDoH categories, with the addition of *Health Behaviors* and *Diseases and Conditions*:

What are the Social Determinants of Health?

Social determinants of health (SDoH) are the nonmedical factors that influence health outcomes

They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life



www.cdc.gov/about/sdoh/index.html

Examples of datasets for each category include:

#### **Education access and quality**

Data on graduation rates, school proficiency, early childhood education programs, interventions to address developmental delays, etc.

- EDFacts Data Files (U.S. Dept. of Education) Graduation rates and participation/proficiency assessment
- NHES National Household Education Surveys Program (U.S. Dept. of Education) Educational activities

#### **Health care access and quality**

Data on health literacy, use of health IT, emergency room waiting times, preventive healthcare, health screenings, treatment of substance use disorders, family planning services, access to a primary care provider and high quality care, access to telehealth and electronic exchange of health information, access to health insurance, adequate oral care, adequate prenatal care, STD prevention measures, etc.

- MEPS Medical Expenditure Panel Survey (AHRQ) Cost and use of healthcare and health insurance coverage
- Dartmouth Atlas Data Selected Primary Care Access and Quality Measures Measures of primary care utilization, quality of care for diabetes, mammography, leg amputation and preventable hospitalizations

#### **Neighborhood and built environment**

Data on access to broadband internet, access to safe water supplies, toxic pollutants and environmental risks, air quality, blood lead levels, deaths from motor vehicle crashes, asthma and COPD cases and hospitalizations, noise exposure, smoking, mass transit use, etc.

- National Environmental Public Health Tracking Network (CDC) Environmental indicators and health,
   exposure, and hazard data
- LATCH Local Area Transportation Characteristics for Households (U.S. Dept. of Transportation) Local transportation characteristics for households

#### Social and community context

Data on crime rates, imprisonment, resilience to stress, experiences of racism and discrimination, etc.

- Hate crime statistics (FBI) Data on crimes motivated by bias against race, gender identity, religion, disability,
   sexual orientation, or ethnicity
- General Social Survey (GSS) Data on a wide range of characteristics, attitudes, and behaviors of Americans.

#### **Economic stability**

Data on unemployment, poverty, housing stability, food insecurity and hunger, work related injuries, etc.

- Current Population Survey (CPS) Annual Social and Economic Supplement (U.S. Bureau of Labor Statistics) Labor force statistics: annual work activity, income, health insurance, and health
- Food Access Research Atlas (U.S. Dept. of Agriculture) Food access indicators for low-income and other census tracts

#### Health behaviors

Data on health-related practices that can directly affect health outcomes.

- BRFSS Behavioral Risk Factor Surveillance System (CDC) State-level data on health-related risk behaviors,
   chronic health conditions, and use of preventive services
- YRBSS Youth Risk Behavior Surveillance System (CDC) Health behaviors that contribute to the leading causes of death, disability, and social problems among youth and adults

#### **Diseases and conditions**

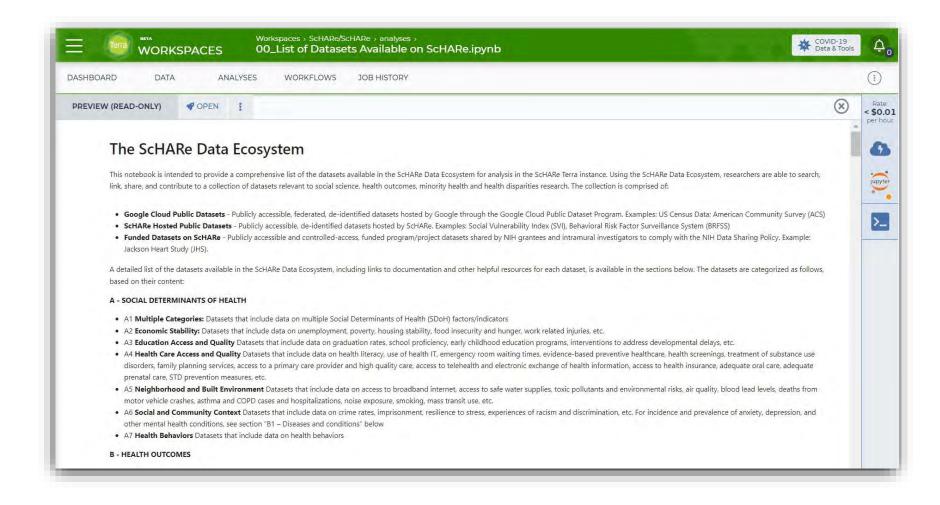
Data on incidence and prevalence of specific diseases and health conditions.

- U.S. CDI Chronic Disease Indicators (CDC) 124 chronic disease indicators important to public health practice
- UNOS United Network of Organ Sharing (Health Resources and Services Administration) Organ
   transplantation: cadaveric and living donor characteristics, survival rates, waiting lists and organ disposition

#### How to check what data is available on ScHARe

#### **Analyses tab**

In the Analyses
tab in the ScHARe
workspace, the
notebook 00\_List
of Datasets
Available on
ScHARe lists all of
the datasets
available in the
ScHARe Datasets
collection



# SCHARE

## The Schare Data Ecosystem Last updated: November 27, 2023

This document is intended to provide a comprehensive list of the datasets available in the ScHARe Data Ecosystem for analysis in the ScHARe Terra instance. Using the ScHARe Data Ecosystem, researchers are able to search, link, share, and contribute to a collection of datasets relevant to social science, health outcomes, minority health and health disparities research.

The collection is comprised of:

- Google-hosted Public Datasets Publicly accessible, federated, de-identified datasets hosted by Google through the Google Cloud Public Dataset Program. Examples: US Census Data; American
- ScHARe-hosted Public Datasets Publicly accessible, de-identified datasets hosted by ScHARe. Examples: Social Vulnerability Index (SVI), Behavioral Risk Factor Surveillance System (BRFSS)
- ScHARe-hosted Project Datasets Publicly accessible and controlled-access, funded program/project datasets shared by NIH grantees and intramural investigators to comply with the

## **ScHARe** datasets



bit.ly/ScHARe-datasets



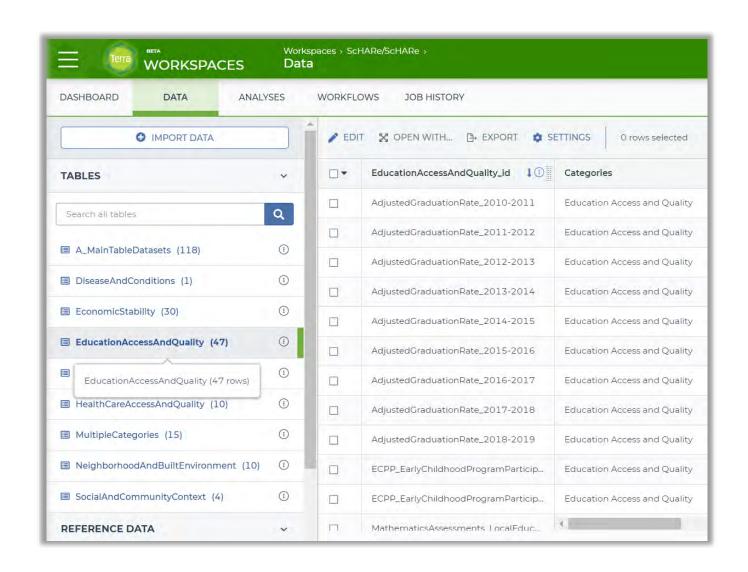
## ScHARe demo

#### How to access available data on ScHARe

#### Data tab

In the **Data** tab in the ScHARe workspace, **data tables help access ScHARe data and keep track of your project data**:

- In the ScHARe workspace, click on the Data tab
- Under Tables, you will see a list of dataset categories
- If you click on a category, you will see a list of relevant datasets
- Scroll to the right to learn more about each dataset



# SCHARe

**Potential Projects** 



## Potential projects leveraging Al and Big Data

These examples showcase the intersection of different **datasets** and the application of diverse **Al tools** to gain insights into the social determinants of health and their impact on health outcomes and disparities in minority populations

## **#1: Geospatial Analysis of Environmental Factors**

 Objective: Explore the impact of environmental conditions on health outcomes, especially in minority communities

#### Methodology:

- Combine environmental datasets (air quality, pollution levels) with health records using geospatial analytics
- Al models can reveal spatial patterns, helping identify areas with higher health risks in minority populations

This information can inform policies addressing environmental justice and public health

### **#1: Geospatial Analysis of Environmental Factors**

#### Datasets:

- Environmental Protection Agency (EPA) Air Quality Data: Provides information on air pollutants and air quality indices
- Health and Nutrition Examination Survey (NHANES): Includes health data, including respiratory health indicators

#### Al Tools:

- Geospatial Analytics Tools: Geographic Information System (GIS) platforms like ArcGIS or QGIS to map environmental data and health outcomes
- Machine Learning for Spatial Analysis: Algorithms for spatial regression or clustering to identify areas with higher health risks

### #2: Education and Health Disparities Analysis

 Objective: Examine the link between educational disparities and health outcomes in minority communities

#### Methodology:

- Merge educational attainment data with health records, applying AI techniques to discern patterns
- Explore how educational opportunities influence health behaviors, preventive care, and overall well-being

This interdisciplinary research can inform education and public health policies aimed at reducing health disparities

### #2: Education and Health Disparities Analysis

#### Datasets:

- National Center for Education Statistics (NCES) Educational Attainment Data: Contains data on educational attainment by demographics
- Behavioral Risk Factor Surveillance System (BRFSS): Includes self-reported health data and behaviors

#### Al Tools:

- Predictive Modeling: Utilize algorithms like logistic regression or neural networks to predict health outcomes based on educational disparities
- Causal Inference Techniques: Apply methods such as propensity score matching to isolate the impact of education on health

# #3: Causal links between chronic stress associated with social adversity and health disparities

Health is adversely affected by social disadvantage:

- 1. Neighborhoods influence health through their physical and geographic characteristics:
  - air and water quality
  - lead paint exposure
  - proximity to health promoting features (e.g.: hospitals, healthy food stores)
  - proximity to health suppressing features (e.g.: toxic factories, fast food)
  - access to green space, etc.

- 2. Chronic stress of social disadvantage, socioeconomic inequality, and racial discrimination can influence health through a variety of biological pathways:
  - 1. neuroendocrine
  - 2. developmental
  - 3. immunologic
  - 4. vascular

**Objective:** Examine the role of epigenetic modifications as a causal link between chronic stress associated with social adversity and health disparities, and impact of mitigating factors



# Research Projects Brainstorming

What research projects do you believe it would be worthwhile to pursue?

# SCHARe

Resources



#### ScHARe resources

Support made available to users:

#### **ScHARe-specific**

- ScHARe documentation
- . Email support

#### **Platform-specific**

- . Terra-specific support
- Terra-specific documentation

#### ScHARe resources

#### Training opportunities made available to users:

- Monthly Think-a-Thons
- . Instructional materials and slides made available online on NIMHD website
- YouTube videos
- Links to relevant online resources and training on NIMHD website
- Pilot credits for testing ScHARe for research needs
- **Instructional Notebooks** in ScHARe Workspace with instructions for:
  - Exploring the data ecosystem
  - Setting your workspace up for use
  - Accessing and interacting with the categories of data accessible through ScHARe

#### Schare resources: cheatsheets



Credits: datacamp.com

#### Terra resources

If you are new to Terra, we recommend exploring the following resources:

- Overview Articles: Review high-level docs that outline what you can do in Terra, how to set up an account and account billing, and how to access, manage, and analyze data in the cloud
- Video Guides: Watch live demos of the Terra platform's useful features
- Terra Courses: Learn about Terra with free modules on the Leanpub online learning platform
- Data Tables QuickStart Tutorial: Learn what data tables are and how to create, modify, and use them in analyses
- Notebooks QuickStart Tutorial: Learn how to access and visualize data using a notebook
- Machine Learning Advanced Tutorial: Learn how Terra can support machine learning-based analysis

# SCHARe

Thank you



# Think-a-Thon poll

- 1. Rate how useful this session was:
- ☐ Very useful
- ☐ Useful
- ☐ Somewhat useful
- ☐ Not at all useful

# Think-a-Thon poll

- 2. Rate the pace of the instruction for yourself:
- ☐ Too fast
- ☐ Adequate for me
- ☐ Too slow

# Think-a-Thon poll

- 3. How likely will you participate in the next Think-a-Thon?
- ☐ Very interested, will definitely attend
- Interested, likely will attend
- ☐ Interested, but not available
- □ Not interested in attending any others

# SCHARe

**Next Think-a-Thons:** 



bit.ly/think-a-thons

**Register for ScHARe:** 



bit.ly/join-schare



