Supporting Information

Impact of lowering fine particulate matter from major emission sources on mortality in Canada: a nationwide causal analysis

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Application of the g-formula

We outlined the algorithm for our application of the g-formula approach as follows:

Step 1, for each year between 2007 and 2016, model the conditional densities of time-varying PM2.5 and all confounding variables using the whole sample, given covariate histories, in the following temporal ordering: (1) airshed; (2) community size; (3) urban form; (4) annual family income (in decile); (5) census-tract level ethnic concentration; (6) census-tract level deprivation index; (7) census-tract level instability measure; (8) census-tract level dependency measure; and (9) annual $PM_{2.5}$ exposure. Each variable was regressed against everything that came before it. Time-fixed covariates were included in all models.

Step 2, model the conditional probability (discrete hazard) of nonaccidental death at each year, given $PM_{2.5}$ and covariate histories, time-fixed covariates, and surviving and remaining uncensored to the previous time, using the whole sample.

Step 3, simulate a cohort followed between 2007 and 2016 under the intervention of interest as follows: (1) select a random sample $(n=10,000)$ from the study population; (2) for each individual in the resample cohort and for 2007, set PM2.5 and all other covariates to the observed values; (3) for each individual and for each year *t* from 2008 to 2016, predict time *t* covariates by applying coefficients estimated by covariate models in step 1 to data from times *t*-3, *t*-2, *t*-1, and *t*; (4) change time *t* covariate data as specified by the intervention of interest; (5) predict the probability of nonaccidental death between time *t* and *t*+1 by applying the coefficients estimated by outcome model in step 2 to data from times *t*-3, *t*-2, *t*-1, and *t*. Repeat (2) to (5) for each individual and for each year in the resampled cohort.

Step 4, estimate marginal estimate of the risk of nonaccidental death under the intervention as the average of the subject-specific risks in the resampled cohort.

Step 5, repeat steps 3 and 4 for each intervention of interest.

Step 6, repeat steps 3-5 on 200 nonparametric bootstrap resamples to construct the 95% confidence intervals (CI) for the risk difference and risk ratio of nonaccidental death with measures of comparison between two interventions.

Identifiability assumptions

Like any modern causal inference methods, the application of the g-formula relies on three identifiability assumptions (exchangeable, positivity, and consistency). Exchangeability assumes the absence of unmeasured confounding. This identifiability assumption is external to the data, $1-3$ requiring us to make the assumption based on subject-matter knowledge about the PM2.5 mortality relationship. To do this, we created a directed acyclic diagram (DAG) to conceptualize our subject-matter knowledge about the qualitative causal structure linking $PM_{2.5}$ exposure, nonaccidental death, and other measured and unmeasured covariates, according to the existing

literature. Using the established graphic rules $(i.e., d$ -separation rules),⁴ we carefully evaluated potential confounding variables to be considered in the analysis and the possible impact of unmeasured confounding (if any). As shown in the DAG (Appendix Figure S1), it is highly unlikely that unmeasured confounding would appreciably explain our observed association of changes in PM2.5 exposure with changes in nonaccidental mortality. In addition, as described in our manuscript, we conducted a sensitivity analysis using Cox model to compare this study with the existing literature. We found that our estimated $PM_{2.5}$ -mortality association was consistent with those reported elsewhere.¹⁶⁻²² For example, in a recent large multiple-country cohort study, Strak *et al.* (2022) reported that each μ g/m³ increase in PM_{2.5} exposure was associated with a hazard ratio of 1.02 (95% CI: 1.02 to 1.03) with nonaccidental mortality.¹⁶ Similarly, in a large cohort study comprising 61 million adults in the continental U.S., Di *et al.* estimated that every μ g/m³ increase in PM_{2.5} exposure was associated with a hazard ratio of 1.01 (95% CI: 1.01 to 1.01) with nonaccidental mortality.¹⁷ To enhance communication about our causal theories with readers and to be explicit about our assumption about exchangeability, we presented this DAG in our manuscript.

The second assumption (positivity) posits that the probability of being exposed conditional on adjustment variables is greater than zero.³ This assumption was well supported by the fact that this study comprised a very large population-based cohort (2.7 million adults) and that all the intervention strategies examined would lead to only modest changes in individuals' PM2.5 exposures proportional to their observed exposure levels (ranging from ~1% to 14%, depending on year and source). The third assumption (consistency) further posits that the $PM_{2.5}$ exposure levels under comparison correspond to well-defined interventions.^{2,3} This is indeed an important strength of this study. Previous studies often predicted sizable near-term reductions in the mortality effect of PM_2 ₅ based on unspecified interventions and under the assumption of instantaneously eliminating human-caused $PM_{2.5}$. In comparison, for our study interventions, we evaluated sustained and dynamic treatment regimes that comprised a sequence of actions across multiple strategies (*e.g.*, 25% incremental), emission sources (*e.g.*, transportation), and time periods. Our refined specifications of interventions were more supported by the data because the declines in ambient PM2.5 in many developed countries including Canada have been progressive over last several decades and were largely driven by air quality regulations (and technology developments). Although we may further delineate the intervention specifications, for example, to require the potential reductions in transportation $PM_{2.5}$ by means of improving a given engine technology (*e.g.*, crankcase ventilation systems or diesel oxidation catalysts), it is reasonable to assume that these additional specifications would produce approximately equivalent results. Taken together, by focusing on more clearly defined interventions that correspond to complex but more realistic air quality actions, this study improved upon the previous studies by sharpening counterfactual contrasts in $PM_{2.5}$ exposures and mortality. This allowed for more meaningful interpretation of PM2.5 reductions and changes in mortality risk.

We acknowledge that regardless of how much data are available, we cannot completely rule out the uncertainty about the identifiability assumptions. However, conditional on these identifiability assumptions (which are deemed reasonable in this study), our results derived from the g-formula approach can have causal interpretations.

Selected differences between the traditional Cox model and the g-formula

Compared with the Cox model, a notable strength of the g-formula approach is that it is highly flexible and can be used to evaluate a range of potential interventions. These include complex dynamic interventions that can comprise a sequence of actions over time, which cannot be evaluated by the traditional Cox model. In addition, the g-formula generates marginal effect measures that are directly interpreted as the contrasts between the risk that would have been observed if everyone in the entire population had been subject to an intervention regime of interest and the risk that would have been observed if all individuals had been subject to a different intervention regime (*e.g.*, the natural course). Such effect estimates are more useful for informing population-level interventions. Furthermore, the g-formula allows to yield the effect measures on the additive scale (in addition to the multiplicative scale). All of these characteristics are particularly relevant to the inferential goal of this study. An additional strength of the g-formula is that when the assumption that the covariates are independent of pollution does not hold, the Cox modeling approach would yield biased estimates but the g-formula approach would yield unbiased estimates.²⁴ Although this advantage is likely inconsequential in the present study given the relatively low PM2.5 levels in Canada, in other regions with relatively high PM_{2.5} levels, this aspect of the g-formula may be more important. For more details, please refer to Appendix Table S4.

Syntax of R code for implementation of the g-formula approach

library(gfoRmula) library(data.table) library(survival) library(Hmisc) library(parallel) library(dplyr)

########## Model code for Chen et al. ########## ### Impact of lowering fine particulate matter from major emission sources on ### mortality in Canada: a nationwide causal analysis

########## Variables ########## ### Baseline time-fixed variables $\# \# \times 1$ -X4: cubic spline terms of age ### X5: sex ### X6: race/ethnicity ### X7: indigenous identity ### X8: landed immigrant status ### X9: years since in Canada ### X10: marital status ### X11: education ### X12: employment

X13: occupation ### person id: subject id

Time-varying variables ### L1: airshed ### L2: community size ### L3: urban form ### L4: family income ### L5: ethnic concentration ### L6: material deprivation ### L7: residential instability ### L8: dependency ### A: annual PM2.5 (in log scale) ### Y: nonaccidental death ### time: follow up (in years)

########## Specify model for outcome ##########

outcome_model <- reformulate(c(### exposure "I($log((exp(log1_A)+exp(log2_A)+exp(log3_A))/3)$)",

 ### baseline covariates "X1", "X2", "X3", "X4", "X5", "X10", 'X12', 'X13', 'X11', "X6", "X7", "X8", "I(X9 * X8)",

```
 ### time-varying covariates
```

```
 ### time-varying covariates are modeled using bounded normal likelihoods
 ### they are rounded to closest integer and specified as factors in the outcome regression model 
 "as.factor(lag1_L1)", "as.factor(lag2_L1)", "as.factor(lag3_L1)", 
 "as.factor(lag1_L2)", "as.factor(lag2_L2)", "as.factor(lag3_L2)", 
 "as.factor(lag1_L3)", "as.factor(lag2_L3)", "as.factor(lag3_L3)",
 "as.factor(lag1_L4)", "as.factor(lag2_L4)", "as.factor(lag3_L4)",
 "as.factor(lag1_L8)", "as.factor(lag2_L8)", "as.factor(lag3_L8)",
 "as.factor(lag1_L6)", "as.factor(lag2_L6)", "as.factor(lag3_L6)",
 "as.factor(lag1_L5)", "as.factor(lag2_L5)", "as.factor(lag3_L5)",
 "as.factor(lag1_L7)", "as.factor(lag2_L7)", "as.factor(lag3_L7)",
```
 ### time "time", "I(time*time)",

```
 ### time - exposure interaction 
 paste0("I( log((exp(lag1_A)+exp(lag2_A)+exp(lag3_A))/3) )", " : ", "factor(time)")),
```
 $response = "Y")$

```
########## Specify time-vayring covariates ##########
### variable names
covnames <- c("L1", "L2", "L3", 
         "L4", "L5", 
         "L6", "L7", "L8",
         "A")
### model likelihoods
covtypes <- c("bounded normal", "bounded normal", "bounded normal",
         "bounded normal", "bounded normal", 
         "bounded normal", "bounded normal", "bounded normal", 
         "normal") 
### name labels
covlabels <- covnames
names(covlabels) <- c("Airshed", "Community size", "Urban form", 
              "Family Income", "Ethnic concentration", 
              "Material deprivation", "Residential instability", "Dependency", 
              "PM2.5")
### regression models
tv_cov_models <- list(covmodels = c(
  ### model for airshed
 L1 \sim X1 + X2 + X3 + X4 +X10 + X12 + X11 + X13 +X5 +X6 + X7 + X8 + I(X9 * X8) +lag1_L1 + lag2_L1 + lag3_L1 +lag1_L2 + lag2_L2 + lag3_L2 +lag1_L3 + lag2_L3 + lag3_L3 +lag1_L4 + lag2_L4 + lag3_L4 +lag1\_L5 + lag2\_L5 + lag3\_L5 +lag1\_L6 + lag2\_L6 + lag3\_L6 +lag1_L7 + lag2_L7 + lag3_L7 +lag1_L8 + lag2_L8 + lag3_L8 +lag1_A + lag2_A + lag3_A +time + I(time * time),
  ### model for CMA/CA size
 L2 \sim X1 + X2 + X3 + X4 +X10 + X12 + X11 + X13 +
```

```
X5 +X6 + X7 + X8 + I(X9 * X8) +L1 + \log 1_L1 + \log 2_L1 + \log 3_L1 +lag1_L2 + lag2_L2 + lag3_L2 +lag1_L3 + lag2_L3 + lag3_L3 +lag1 L4 + lag2 L4 + lag3 L4 +lag1\_L5 + lag2\_L5 + lag3\_L5 +lag1\_L6 + lag2\_L6 + lag3\_L6 +lag1 L7 + lag2 L7 + lag3 L7 +lag1_L8 + lag2_L8 + lag3_L8 +lag1_A + lag2_A + lag3_A +time + I(time * time),
```
 ### model for L3 form characteristics $L3 \sim X1 + X2 + X3 + X4 +$ $X10 + X12 + X11 + X13 +$ $X5 +$ $X6 + X7 + X8 + I(X9 * X8) +$ $L1 + \log 1 L1 + \log 2 L1 + \log 3 L1 +$ $L2 + \log 1 _L2 + \log 2 _L2 + \log 3 _L2 +$ $lag1 L3 + lag2 L3 + lag3 L3 +$ $lag1_L4 + lag2_L4 + lag3_L4 +$ $lag1_L5 + lag2_L5 + lag3_L5 +$ $lag1_L6 + lag2_L6 + lag3_L6 +$ $lag1_L7 + lag2_L7 + lag3_L7 +$ $lag1_L8 + lag2_L8 + lag3_L8 +$ $lag1_A + lag2_A + lag3_A +$ $time + I$ (time $*$ time),

```
 ### model for income decile
L4 \sim X1 + X2 + X3 + X4 +X10 + X12 + X11 + X13 +X5 +X6 + X7 + X8 + I(X9 * X8) +L1 + \log 1_L1 + \log 2_L1 + \log 3_L1 +L2 + \log 1 \_L2 + \log 2 \_L2 + \log 3 \_L2 +L3 + \log 1_L3 + \log 2_L3 + \log 3_L3 +lag1_L4 + lag2_L4 + lag3_L4 +lag1\_L5 + lag2\_L5 + lag3\_L5 +lag1\_L6 + lag2\_L6 + lag3\_L6 +lag1 L7 + lag2 L7 + lag3 L7 +lag1_L8 + lag2_L8 + lag3_L8 +lag1_A + lag2_A + lag3_A +time + I(time * time),
```
 ### model for ethnic concentration $L5 \sim X1 + X2 + X3 + X4 +$ $X10 + X12 + X11 + X13 +$ $X5 +$ $X6 + X7 + X8 + I(X9 * X8) +$ $L1 + \log 1 L1 + \log 2 L1 + \log 3 L1 +$ $L2 + \log 1 L2 + \log 2 L2 + \log 3 L2 +$ $L3 + \log 1_L3 + \log 2_L3 + \log 3_L3 +$ $L4 + \log 1 L4 + \log 2 L4 + \log 3 L4 +$ $lag1_L5 + lag2_L5 + lag3_L5 +$ $lag1$ L6 + lag2 L6 + lag3 L6 + $lag1_L7 + lag2_L7 + lag3_L7 +$ $lag1_L8 + lag2_L8 + lag3_L8 +$ $lag1_A + lag2_A + lag3_A +$ time + I(time $*$ time),

 ### model for material deprivation $L6 \sim X1 + X2 + X3 + X4 +$ $X10 + X12 + X11 + X13 +$ $X5 +$ $X6 + X7 + X8 + I(X9 * X8) +$ $L1 + \log 1_L1 + \log 2_L1 + \log 3_L1 +$ $L2 + \log 1$ $L2 + \log 2$ $L2 + \log 3$ $L2 +$ $L3 + \log 1_L3 + \log 2_L3 + \log 3_L3 +$ $L4 + \log 1 _L4 + \log 2 _L4 + \log 3 _L4 +$ $L5 + \log 1 _L5 + \log 2 _L5 + \log 3 _L5 +$ $lag1$ L6 + lag2 L6 + lag3 L6 + $lag1_L7 + lag2_L7 + lag3_L7 +$ $lag1_L8 + lag2_L8 + lag3_L8 +$ $lag1_A + lag2_A + lag3_A +$ time + I(time $*$ time),

 ### model for residential instability $L7 \sim X1 + X2 + X3 + X4 +$ $X10 + X12 + X11 + X13 +$ $X5 +$ $X6 + X7 + X8 + I(X9 * X8) +$ $L1 + \log 1_L1 + \log 2_L1 + \log 3_L1 +$ $L2 + \log 1 _L2 + \log 2 _L2 + \log 3 _L2 +$ $L3 + \log 1 _L3 + \log 2 _L3 + \log 3 _L3 +$ $L4 + \log 1 L4 + \log 2 L4 + \log 3 L4 +$ $L5 + \log 1 _L5 + \log 2 _L5 + \log 3 _L5 +$ $L6 + \log_1 L6 + \log_2 L6 + \log_3 L6 +$ $lag1_L7 + lag2_L7 + lag3_L7 +$ $lag1_L8 + lag2_L8 + lag3_L8 +$

 $lag1 A + lag2 A + lag3 A +$ time + I(time $*$ time), ### model for dependency $LS \sim X1 + X2 + X3 + X4 +$ $X10 + X12 + X11 + X13 +$ $X5 +$ $X6 + X7 + X8 + I(X9 * X8) +$ $L1 + \log 1 L1 + \log 2 L1 + \log 3 L1 +$ $L2 + \log 1$ $L2 + \log 2$ $L2 + \log 3$ $L2 +$ $L3 + \log 1 L3 + \log 2 L3 + \log 3 L3 +$ $L4 + \log 1 _L4 + \log 2 _L4 + \log 3 _L4 +$ $L5 + \log_1 L5 + \log_2 L5 + \log_3 L5 +$ $L6 + \log 1 \cdot L6 + \log 2 \cdot L6 + \log 3 \cdot L6 +$ $L7 + \log 1_L - L7 + \log 2_L - L7 + \log 3_L - L7 +$ $lag1_L8 + lag2_L8 + lag3_L8 +$ $lag1_A + lag2_A + lag3_A +$ $time + I$ (time $*$ time), ### model for PM2.5 exposure $A \sim X1 + X2 + X3 + X4 +$ $X10 + X12 + X11 + X13 +$ $X5 +$ $X6 + X7 + X8 + I(X9 * X8) +$ $L1 + \log 1_L1 + \log 2_L1 + \log 3_L1 +$ $L2 + \log 1 _L2 + \log 2 _L2 + \log 3 _L2 +$ $L3 + \log 1 L3 + \log 2 L3 + \log 3 L3 +$ $L4 + \log 1 _L4 + \log 2 _L4 + \log 3 _L4 +$ $L5 + \log 1 L5 + \log 2 L5 + \log 3 L5 +$ $L6 + \log_1 L6 + \log_2 L6 + \log_3 L6 +$ $L7 + \log 1 L7 + \log 2 L7 + \log 3 L7 +$ $L8 + \log 1 \log 2 + \log 2 \log 1 = 18 + \log 3 \log 1$ $lag1_A + lag2_A + lag3_A +$ time + I(time $*$ time)

))

########## Specify intervention functions ##########

sr_t0_run is for x% incremental mitigation strategy sr_t0_run <- function(newdf, pool, intvar, intvals, time_name, t) { prop_reduce <- intvals[[2]] $n_{red} < (1 / prop_{reduce}) - 1$ src_name <- paste $0("p"$, intvals[[1]], "_", t)

```
if (t >= 0 & t <= n red) {
   newdf[, (intvar) := log(exp(get(intvar)) - (exp(get(intvar)) * (get(src_name) * prop_reduce)))]
  }
 if (t == (n red + 1)) {
  newdf[, (intvar) := log(exp(get(intvar)) - (exp(get(intvar)) *
                                (get(src_name) * (get(src_name) *(1 %% prop_reduce)))) }
}
### sr_phased_50 is for 50% phased mitigation strategy
sr_phased_50 <- function(newdf, pool, intvar, intvals, time_name, t) {
 src_name <- paste0("p", intvals[[1]], "_", t)
 prop_reduce \lt - 0.5
 ## set intervention at time = 0 and time = 5if (t == 0 | t == 5) newdf[, (intvar) := log(exp(get(intvar)) - (exp(get(intvar)) * (get(src_name) * prop_reduce)))]
  }
}
### sr_phased_25 is for 25% phased mitigation strategy
sr_phased_25 <- function(newdf, pool, intvar, intvals, time_name, t) {
 src_name < - paste0("p", intvals[[1]], "_", t)
 prop_reduce \lt - 0.25
 ## set intervention at time = 0, 3, 6, and 9
 if (t == 0 \mid t == 3 \mid t == 6 \mid t == 9) newdf[, (intvar) := log(exp(get(intvar)) - (exp(get(intvar)) * (get(src_name) * prop_reduce)))]
  }
}
### sr_t0 is idealistic zero-out mitigation strategy
sr_t0 <- function(newdf, pool, intvar, intvals, time_name, t) {
 prop_reduce \langle- intvals[[2]]
 ## set intervention at time = 0if (t == 0) {
  src_name <- paste0("p", intvals[[1]], "_", t)
   newdf[, (intvar) := log(exp(get(intvar)) - (exp(get(intvar)) * (get(src_name) * prop_reduce)))]
  }
}
```

```
### specify interventions (use agriculture "AG" as an example)
```

```
interventions <- list(
  ### 25% incremental interventions
 list(c(sr_t0_run, "AG", 0.25))\lambda### specify names for the interventions
pnames_int <- c('p\_AG')int_descript <- c(paste0("inc25_", pnames_int))
### specify variable that is intervened upon
intvars \langle- list("A")
########## Specify customized lag function and convert to factor ##########
lag1_round <- function(pool, histvars, time_name, t, id_name){
 current ids < - unique(pool[get(time_name)==t][[id_name]])
 lapply(histvars, FUN = function(histvar) {
  i < -1 pool[get(time_name)==t,
     (paste0("lag1\_round", history) := ifelse((round(tapply(pool[get(id_name) %in% current_ids &
                       get(time_name) == t-i[[histvar]],
                    pool[get(id_name) %in% current_ids &
                        get(time_name) == t-i][[id_name]],FUN = min(0, 0) >= 1,round(tapply(pool[get(id_name) %in% current_ids &get(time_name) == t-i[[histvar]],
                    pool[get(id_name) %in% current_ids &
                       get(time_name) == t-i][[id_name]], FUN=min), 0),
            1)]
  })
}
lag2_round <- function(pool, histvars, time_name, t, id_name){
  current_ids <- unique(pool[get(time_name)==t][[id_name]])
 lapply(histvars, FUN = function(histvar) {
  i < -2
```

```
 pool[get(time_name)==t,
     (paste0("lag2\_round", history) := ifelse((round(tapply(pool[get(id_name) %in% current_ids &
                       get(time_name) == t-i[[histvar]],
                   pool[get(id_name) %in% current_ids \&get(time name) == t-i[[id_name]],
                   FUN=min), 0) >= 1,
          round(tapply(pool[get(id_name) %in% current_ids &get(time_name) == t-i[[histvar]],
                  pool[get(id_name) %in% current_ids \&get(time_name) == t-i][\text{id_name}],
                   FUN=min), 0),
            1)]
  })
}
lag3_round <- function(pool, histvars, time_name, t, id_name){
  current_ids <- unique(pool[get(time_name)==t][[id_name]])
 lapply(histvars, FUN = function(histvar) {
  i < -3 pool[get(time_name)==t,
     (paste0("lag3\_round", history) := ifelse((round(tapply(pool[get(id_name) %in% current_ids &
                       get(time_name) == t-i[[thistvar]],pool[get(id_name) %in% current_ids &
```

```
get(time_name) == t-i][\text{id_name}],
         FUN = min(0), \Rightarrow 1,
 round(tapply(pool[get(id_name) %in% current_ids &
             get(time_name) == t-i[[histvar]],
         pool[get(id_name) %in% current_ids &
             get(time_name) == t-i][\text{id_name}],
         FUN=min), 0),
 1)]
```

```
 })
}
```

```
########## Set baseline covariates ##########
basecovs.all <- c("X1", "X2", "X3", "X4", "X10", 
           "X12", "X11", "X13", "X5", "X8", "X6",
          "X9", "X7", paste0("p_AG_", 0:9))
```

```
########## Run gformula model ##########
gf <- gformula_survival(
 obs\_data = dt,
 id = "person_id",time\_points = time\_points,time\_name = "time",covnames = covnames,outcome\_name = "Y", ymodel = outcome_model,
 covtypes = covtypes,covparams = tv_{cov\_models},
 intvars = intvars,
 ref int = 0,
  interventions = interventions,
  int_descript = int_descript,
  histories = c(lagged, lag1_round, lag2_round, lag3_round),
  histvars = list(covnames, 
           c("L1", "L2", "L3", 
             "L4", "L5", 
             "L6", "L7", "L8"), 
            c("L1", "L2", "L3", 
             "L4", "L5", 
             "L6", "L7", "L8"), 
            c("L1", "L2", "L3", 
             "L4", "L5", 
             "L6", "L7", "L8")),
 basecovs = basecovs.all,
 sim\_data_b = TRUE,nsimul = 10000,
 seed = 1234)
```


Table S1. Illustration of hypothetical intervention strategies that reduce source contributions to ambient PM_{2.5} in Canada over the period of 2007 to 2016, by years and intervention strategies

* Relative to the natural course of observed source contributions from a specified emission source

Table S2. Summary of covariates in the analysis of emission mitigation and mortality with the 2006 CanCHEC and *g*-formula

***** Restricted cubic spline function with 5 knots in all analyses, with the exception of analyses stratified by age in which it used 3 knots.

† Fitted as a categorical variable in the outcome model, whereas fitted as a continuous variable in the covariate models.

			Standard			
Location	mu	Coeffect	error	tau	AIC	Model form
$\overline{0}$	3.33E-07	0.013758586	0.001610607	0.1	2098016.314	z*logit
25	5.066667	0.009400996	0.001242146	0.1	2098031.985	z*logit
50	6.719052	0.007373060	0.001170288	0.1	2098049.578	z*logit
75	8.366667	0.005984167	0.001224286	0.1	2098065.372	z*logit
$\boldsymbol{0}$	3.33E-07	0.156753366	0.016322073	0.1	2097996.869	$log(z)$ *logit
25	5.066667	0.089558889	0.010705904	0.1	2098019.218	$log(z)$ *logit
50	6.719052	0.068149780	0.009877653	0.1	2098041.647	$log(z)$ *logit
75	8.366667	0.054302063	0.010275815	0.1	2098061.335	$log(z)$ *logit
$\boldsymbol{0}$	3.33E-07	0.012744721	0.001560701	0.2	2098022.619	z*logit
25	5.066667	0.010767467	0.001494651	0.2	2098037.422	z*logit
50	6.719052	0.010337010	0.001547356	0.2	2098044.696	z*logit
75	8.366667	0.010331821	0.001682928	0.2	2098051.639	z*logit
$\mathbf{0}$	3.33E-07	0.139854219	0.015296147	0.2	2098005.589	$log(z)$ *logit
25	5.066667	0.108444057	0.013546337	0.2	2098025.189	$log(z)$ *logit
50	6.719052	0.101785116	0.013777825	0.2	2098034.724	$log(z)$ *logit
75	8.366667	0.099889509	0.014803401	0.2	2098043.785	$log(z)$ *logit
5	3.143111	0.120384691	0.012754868	0.1	2098000.025	$log(z)$ *logit
-5	-3.14311	0.166020730	0.017572047	0.1	2097999.873	$log(z)$ *logit
_ *		0.014085478	0.001678212		2098018.857	log-linear
_ *		0.108517703	0.010948828		2097990.713	$log-log$

Table S3. Shape Constrained Health Impact Function outputs from 20 potential shapes of PM2.5 mortality association examined

* Two parameters, mu and tau, are not required for outcome regression under the assumption of log-log or log-linear shape for PM2.5-mortality relationship

Table S4. Selected advantages and disadvantages of the g-formula approach compared with the traditional Cox model approach

* A confounder affects exposure and the exposure affects the confounder

** A bias arising from conditioning on being free of the outcome during the follow-up. Because being free of outcome can be a common effect of the exposure of interest and frailty (a common but unobserved cause of future outcome), this opens an associational path between the exposure and future outcome, introducing a bias in the effect measure (*e.g.*, hazard ratio).

*** Transportability of causal effects with air pollution relies on a mix of causal effect modifiers such as age and SES among populations. The estimated effect measures using the g-formula from Canada may be more transportable to other high-income countries than low- and midincome countries.

Table S5. Baseline characteristics of study population (count, percent, or mean \pm SD, total N = 2,663,645)

Social-economic characteristics **||**

*** All counts were rounded up to the nearest five in compliance with privacy requirements by Statistics Canada.

† Household income adequacy is an index used by Statistics Canada that accounts for total household income and household size.

‡ CMA/CA: census metropolitan area/census agglomeration area.

§ Pop: population.

|| From Canadian Census, at the census dissemination area level, the smallest standard geographic area for which all census data are disseminated in Canada.

Sources	Interventions					
Agriculture	Zero out	50% incremental	25% incremental	10% incremental	50% phased	25% phased
2007	Ω	Ω	Ω	$\overline{0}$	Ω	
2008	-26.0 $(-31.3, -20.8)$	-12.9 $(-15.5, -10.3)$	-6.4 $(-7.7, -5.1)$	$-2.6(-3.1,-2)$	-12.9 $(-15.5, -10.3)$	-6.4 $(-7.7, -5.1)$
2009	-73.9 $(-87.3, -60.5)$	-51.0 $(-60.2, -41.9)$	-25.3 $(-29.9, -20.7)$	-10.2 $(-12, -8.3)$	-36.4 $(-43.0, -29.8)$	-18.0 $(-21.4, -14.6)$
2010	-134.2 $(-157.5, -110.9)$	$-102.6 (-120.2, -85.0)$	$-57.1(-67.1, -47.1)$	-22.9 $(-26.9, -18.9)$	-65.3 $(-76.9, -53.8)$	-31.8 $(-37.5, -26.0)$
2011	$-171.8 (-202.0, -141.5)$	-145.4 $(-172.0, -118.9)$	-94.2 $(-111.9, -76.4)$	-37.5 $(-44.6, -30.5)$	-83.8 $(-98.7, -69.0)$	-47.5 ($-56.1, -38.8$)
2012	$-204.3(-242.1, -166.4)$	-178.9 (-213.3 , -144.6)	-132.1 $(-158.4, -105.7)$	-55.5 $(-66.8, -44.2)$	$-99.6(-118.1, -81.1)$	-64.6 $(-77.4, -51.8)$
2013	-227.7 $(-272.0, -183.5)$	-203.4 $(-244.2, -162.6)$	-161.0 $(-195.0, -126.9)$	-70.8 $(-86.1, -55.5)$	$-120.7(-145.1, -96.3)$	-78.9 $(-95.3, -62.4)$
2014	$-243.6(-293.5, -193.8)$	$-221.6(-267.4, -175.8)$	-182.2 $(-221.7, -142.6)$	-89.0 (-109.2 , -68.8)	-143.2 $(-173.8, -112.7)$	-95.8 $(-116.6, -75.0)$
2015	-252.8 $(-306.0, -199.6)$	-232.0 $(-281.0, -182.9)$	-195.7 $(-241.7, -149.7)$	-103.9 $(-130.7, -77.2)$	-163.2 $(-203.4, -122.9)$	$-108.7(-135.9, -81.5)$
2016	-255.4 $(-312.7, -198.1)$	-235.3 $(-290.6, -180.0)$	$-202.8(-254.3, -151.4)$	$-114.8(-148.9, -80.7)$	-173.9 $(-220.5, -127.2)$	$-118.1(-151.8, -84.3)$
Industry	Zero out	50% incremental	25% incremental	10% incremental	50% phased	25% phased
2007	Ω	Ω	Ω	Ω	Ω	Ω
2008	-36.9 $(-44.4, -29.3)$	-18.3 $(-22, -14.5)$	-9.1 $(-10.9, -7.2)$	$-3.6(-4.4, -2.9)$	-18.3 $(-22, -14.5)$	-9.1 $(-10.9, -7.2)$
2009	-106.2 $(-125.1, -87.2)$	-73.3 $(-86.4, -60.1)$	-36.2 $(-42.6, -29.8)$	-14.5 $(-17.1, -11.9)$	-52.2 $(-61.6, -42.8)$	-25.7 $(-30.2, -21.1)$
2010	$-193.8 (-227.0, -160.5)$	$-147.8(-172.8, -122.8)$	-82.7 ($-96.8, -68.6$)	$-32.6(-38.4, -26.9)$	-94.4 (-110.5 , -78.3)	-46.0 $(-54.2, -37.7)$
2011	$-247.8(-292.1, -203.6)$	-208.7 $(-246.8, -170.6)$	$-135.8(-161.8, -109.9)$	-53.8 $(-64.0, -43.6)$	$-120.7(-141.9, -99.5)$	-68.5 $(-81.1, -55.9)$
2012	$-294.7(-349.1,-240.2)$	-257.0 $(-305.4, -208.6)$	-189.5 $(-227.4, -151.5)$	-79.4 (-95.6 , -63.2)	-143.1 $(-169.9, -116.3)$	$-92.8(-111.4, -74.2)$
2013	$-327.9(-390.3, -265.5)$	-292.2 $(-350.0, -234.3)$	-232.1 $(-281.2, -183.0)$	$-102.3(-124.4, -80.1)$	-174.3 (-208.8 , -139.9)	$-114.1(-137.9, -90.2)$
2014	-353.2 (-425.1 , -281.2)	$-319.1 (-384.0, -254.1)$	-264.3 $(-320.3, -208.2)$	-126.4 $(-154.7, -98.1)$	-208.1 $(-251.8, -164.5)$	-137.0 $(-166.7, -107.3)$
2015	-366.2 $(-442.3, -290.2)$	-333.8 $(-403.9, -263.7)$	$-282.8(-349.0, -216.7)$	-149.0 (-187.6 , -110.4)	-236.8 $(-294.1, -179.5)$	-156.1 $(-195.3, -117.0)$
2016	-369.3 $(-452.3, -286.4)$	-339.0 $(-418.3, -259.6)$	$-291.6(-365.2, -218.0)$	-164.7 $(-213.4, -116.0)$	-250.2 $(-316.2, -184.2)$	-170.0 $(-216.9, -123.1)$
Power	Zero out	50% incremental	25% incremental	10% incremental	50% phased	25% phased
generation						
2007	Ω	Ω	Ω	Ω	Ω	Ω
2008	-20.2 $(-24.4, -16.0)$	-10 $(-12.1, -8.0)$	-5.0 $(-6.0, -4.0)$	-2.0 $(-2.4, -1.6)$	-10.0 $(-12.1, -8.0)$	-5.0 $(-6.0, -4.0)$
2009	-58.5 $(-69.1, -47.9)$	-40.5 $(-47.7, -33.4)$	-20.1 $(-23.7, -16.4)$	-8.0 $(-9.5, -6.5)$	-28.8 $(-34.0, -23.6)$	-14.2 (-16.9 , -11.5)
2010	-106.1 $(-124.4, -87.7)$	-81.4 $(-95.4, -67.4)$	$-45.4(-53.4, -37.3)$	-18.2 $(-21.4, -14.9)$	$-51.7(-60.7, -42.7)$	-25.3 $(-29.9, -20.7)$
2011	-135.0 $(-159.4, -110.6)$	-115.3 (-136.8 , -93.8)	-74.7 $(-89.0, -60.4)$	$-29.6(-35.3, -23.9)$	-66.3 $(-78.3, -54.3)$	-37.7 $(-44.7, -30.7)$
2012	$-159.4 (-189.5, -129.4)$	$-140.9(-168.6, -113.2)$	$-104.9(-126.0, -83.7)$	$-43.9(-52.8, -34.9)$	-78.7 ($-93.8, -63.5$)	$-51.6(-61.9, -41.3)$

Table S6. Absolute change in mortality risk (per million population) and 95% confidence interval (95% CI) for the associations of PM2.5 reduction with premature mortality in Canada over the period 2007-2016, by years, emission sources, and intervention strategies relative to the natural course of observed PM2.5 exposures ('no intervention' scenario)

Sources	Interventions					
Agriculture	Zero out	50% Incremental	25% Incremental	10% Incremental	50% Phased	25% Phased
2007						
2008	-0.2% (-0.3% , -0.2%)	-0.1% (-0.1% , -0.1%)	-0.1% (-0.1% , 0%)	0% $(0\%, 0\%)$	-0.1% (-0.1% , -0.1%)	-0.1% (-0.1% , 0%)
2009	-0.4% (-0.5% , -0.3%)	-0.3% $(-0.3\%$, $-0.2\%)$	-0.1% (-0.2% , -0.1%)	-0.1% (-0.1% , 0%)	-0.2% $(-0.2\%$, -0.2%)	-0.1% (-0.1% , -0.1%)
2010	-0.5% $(-0.6\%$, -0.4%)	-0.4% $(-0.5\%,-0.3\%)$	-0.2% (-0.3% , -0.2%)	-0.1% (-0.1% , -0.1%)	-0.3% $(-0.3\%$, -0.2%)	-0.1% (-0.1% , -0.1%)
2011	-0.5% (-0.6% , -0.4%)	-0.4% $(-0.5\%$, -0.4%)	-0.3% $(-0.3\%$, $-0.2\%)$	-0.1% (-0.1% , -0.1%)	-0.3% $(-0.3\%$, $-0.2\%)$	-0.1% (-0.2% , -0.1%)
2012	-0.5% (-0.6% , -0.4%)	-0.5% $(-0.5\%$, $-0.4\%)$	-0.3% $(-0.4\%, -0.3\%)$	-0.1% (-0.2% , -0.1%)	-0.3% $(-0.3\%$, $-0.2\%)$	-0.2% (-0.2% , -0.1%)
2013	-0.5% (-0.6% , -0.4%)	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.4\%$, $-0.3\%)$	-0.2% (-0.2% , -0.1%)	-0.3% $(-0.3\%$, $-0.2\%)$	-0.2% $(-0.2\%$, $-0.1\%)$
2014	-0.4% (-0.5% , -0.4%)	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.4\%$, $-0.3\%)$	-0.2% (-0.2% , -0.1%)	-0.3% $(-0.3\%$, -0.2%)	-0.2% $(-0.2\%$, $-0.1\%)$
2015	-0.4% (-0.5% , -0.3%)	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.4\%$, $-0.2\%)$	-0.2% (-0.2% , -0.1%)	-0.3% $(-0.3\%$, -0.2%)	-0.2% (-0.2% , -0.1%)
2016	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.4\%, -0.3\%)$	-0.3% $(-0.4\%, -0.2\%)$	-0.2% $(-0.2\%$, $-0.1\%)$	-0.3% $(-0.3\%$, $-0.2\%)$	-0.2% (-0.2% , -0.1%)
Industry	Zero out	50% Incremental	25% Incremental	10% Incremental	50% Phased	25% Phased
2007		1		1		
2008	-0.3% (-0.4% , -0.2%)	-0.2% $(-0.2\%$, -0.1%)	-0.1% (-0.1% , -0.1%)	0% $(0\%, 0\%)$	-0.2% $(-0.2\%$, $-0.1\%)$	-0.1% (-0.1% , -0.1%)
2009	-0.6% $(-0.7\%$, $-0.5\%)$	-0.4% $(-0.5\%$, $-0.3\%)$	-0.2% $(-0.2\%$, -0.2%)	-0.1% (-0.1% , -0.1%)	-0.3% $(-0.3\%$, $-0.2\%)$	-0.1% (-0.2% , -0.1%)
2010	-0.8% $(-0.9\%, -0.6\%)$	-0.6% $(-0.7\%,-0.5\%)$	-0.3% $(-0.4\%, -0.3\%)$	-0.1% $(-0.2\%$, $-0.1\%)$	-0.4% $(-0.4\%, -0.3\%)$	-0.2% $(-0.2\%$, $-0.1\%)$
2011	-0.8% (-0.9% , -0.6%)	-0.6% $(-0.8\%$, $-0.5\%)$	-0.4% (-0.5% , -0.3%)	-0.2% (-0.2% , -0.1%)	-0.4% $(-0.4\%$, $-0.3\%)$	-0.2% $(-0.2\%$, -0.2%)
2012	-0.7% (-0.9% , -0.6%)	-0.6% (-0.8% , -0.5%)	-0.5% (-0.6% , -0.4%)	-0.2% $(-0.2\%$, -0.2%)	-0.4% (-0.4% , -0.3%)	-0.2% (-0.3% , -0.2%)
2013	-0.7% (-0.8% , -0.6%)	-0.6% $(-0.7\%$, $-0.5\%)$	-0.5% (-0.6% , -0.4%)	-0.2% (-0.3% , -0.2%)	-0.4% $(-0.4\%$, $-0.3\%)$	-0.2% (-0.3% , -0.2%)
2014	-0.7% (-0.8% , -0.5%)	-0.6% $(-0.7\%,-0.5\%)$	-0.5% $(-0.6\%, -0.4\%)$	-0.2% $(-0.3\%$, $-0.2\%)$	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.3\%$, $-0.2\%)$
2015	-0.6% $(-0.7\%$, $-0.5\%)$	-0.5% $(-0.7\%$, -0.4%)	-0.5% $(-0.6\%, -0.4\%)$	-0.2% $(-0.3\%$, $-0.2\%)$	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.3\%$, $-0.2\%)$
2016	-0.5% (-0.7% , -0.4%)	-0.5% (-0.6% , -0.4%)	-0.4% (-0.5% , -0.3%)	-0.2% (-0.3% , -0.2%)	-0.4% (-0.5% , -0.3%)	-0.2% (-0.3% , -0.2%)
Power	Zero out	50% Incremental	25% Incremental	10% Incremental	50% Phased	25% Phased
generation						
2007		$\mathbf{1}$	1	$\mathbf{1}$		
2008	-0.2% (-0.2% , -0.1%)	-0.1% (-0.1% , -0.1%)	0% (-0.1%, 0%)	0% $(0\%, 0\%)$	-0.1% (-0.1% , -0.1%)	0% $(-0.1\%, 0\%)$
2009	-0.3% $(-0.4\%$, $-0.3\%)$	-0.2% (-0.3% , -0.2%)	-0.1% (-0.1% , -0.1%)	0% (-0.1%, 0%)	-0.2% $(-0.2\%$, $-0.1\%)$	-0.1% (-0.1% , -0.1%)
2010	-0.4% $(-0.5\%$, $-0.3\%)$	-0.3% $(-0.4\%$, $-0.3\%)$	-0.2% $(-0.2\%$, $-0.1\%)$	-0.1% (-0.1% , -0.1%)	-0.2% $(-0.2\%$, -0.2%)	-0.1% (-0.1% , -0.1%)
2011	-0.4% $(-0.5\%$, $-0.3\%)$	-0.4% $(-0.4\%, -0.3\%)$	-0.2% (-0.3% , -0.2%)	-0.1% (-0.1% , -0.1%)	-0.2% $(-0.2\%$, -0.2%)	-0.1% (-0.1% , -0.1%)
2012	-0.4% $(-0.5\%$, $-0.3\%)$	-0.4% $(-0.4\%, -0.3\%)$	-0.3% $(-0.3\%$, $-0.2\%)$	-0.1% (-0.1% , -0.1%)	-0.2% $(-0.2\%$, -0.2%)	-0.1% (-0.2% , -0.1%)

Table S7. Mean percentage change in mortality risk and 95% confidence interval (95% CI) for the associations of PM2.5 reduction with premature mortality in Canada over the period 2007-2016, by years, emission sources, and intervention strategies relative to the natural course of observed PM2.5 exposures ('no intervention' scenario)

Figure Legends

Figure S1. Causal diagram for the association between ambient PM_{2.5} and mortality

Figure S2. Flow chart of cohort creation

Figure S3. Annual mean exposure to ambient PM_{2.5} in the 2006 CanCHEC cohort (2.7M adults, aged 30-79 years), by year

Figure S4. Changes in mean annual exposure of ambient PM_{2.5} in the 2006 CanCHEC cohort $(2.7M)$ adults, aged 30-79 years) if source contributions to $PM_{2.5}$ exposure had been reduced in Canada over the period 2007-2016, by selected major emission sources and intervention strategies relative to the natural course of observed PM2.5 exposures ('no intervention' scenario)

Figure S5. Sensitivity analyses of PM2.5 reduction with mortality in the CanCHEC cohort, 2007- 2016 (expressed as absolute difference in mortality risks, per million), by emission sources and strategies

Figure S6. Sensitivity analyses of PM2.5 reduction with mortality in the CanCHEC cohort, 2007- 2016 (expressed as percentage change in mortality risk, in %), by emission sources and strategies

Figure S7. Comparison of observed and predicted survival probability, PM_{2.5} exposure, and time-varying covariates for each year during the period 2007-2016

Figure S8. Absolute change in mortality risk and 95% confidence interval (95% CI) per million persons for the associations of reductions in source contributions to $PM_{2.5}$ with premature mortality in the 2006 CanCHEC cohort over the period 2007-2016, by two selected emission sources, intervention strategies, and personal-level characteristics at baseline

Figure S1. Causal diagram for the association between ambient PM_{2.5} and mortality (note that grey nodes indicate unmeasured factors whereas red nodes denote measured factors)

Figure S2. Flow chart of cohort creation

Figure S3. Annual mean exposure to ambient PM_{2.5} in the 2006 CanCHEC cohort (2.7M adults, aged 30-79 years), by year

Figure S4. Changes in mean annual exposure of ambient PM_{2.5} in the 2006 CanCHEC cohort (2.7M adults, aged 30-79 years) if source contributions to PM2.5 exposure had been reduced in Canada over the period 2007-2016, by selected major emission sources and intervention strategies relative to the natural course of observed PM2.5 exposures ('no intervention' scenario)

Figure S6. Sensitivity analyses of PM_{2.5} reduction with mortality in the CanCHEC cohort, 2007-2016 (expressed as percentage change in mortality risk, in %), by emission sources and strategies ([1] Reorder B assumed a causal ordering of time-varying covariates: airshed \rightarrow community size \rightarrow urban form \rightarrow area-level deprivation \rightarrow income \rightarrow PM_{2.5}; [2] Reorder C: income \rightarrow airshed \rightarrow community size \rightarrow urban form \rightarrow area-level deprivation \rightarrow PM_{2.5}; [3] Reorder D: airshed \rightarrow community size \rightarrow urban form \rightarrow PM_{2.5} \rightarrow income \rightarrow area-level deprivation; [4] Reorder E: $PM_{2.5} \rightarrow$ airshed \rightarrow community size \rightarrow urban form \rightarrow income \rightarrow area-level deprivation; [5] 6year mean exposure denotes 6-year moving average of PM2.5 with 1-year lag; [6] linear C-R function assumes a log-linear shape of PM_{2.5}-mortality association)

Figure S7. Comparison of observed and predicted survival probability, PM_{2.5} exposure, and time-varying covariates for each year during the period 2007-2016

Figure S8. Absolute change in mortality risk and 95% confidence interval (95% CI) per million persons for the associations of reductions in source contributions to PM2.5 with premature mortality in the 2006 CanCHEC cohort over the period 2007-2016, by two selected emission sources, intervention strategies, and personal-level characteristics at baseline

Reference

1. Greenland S, Robins JM. Identifiability, exchangeability, and epidemiological confounding. *Int J Epidemiol* 1986; **15**(3): 413-9.

2. Hernán MA. The C-Word: Scientific Euphemisms Do Not Improve Causal Inference From Observational Data. *Am J Public Health* 2018; **108**(5): 616-9.

3. Hernán MA. A definition of causal effect for epidemiological research. *J Epidemiol Community Health* 2004; **58**(4): 265-71.

4. Pearl J. Causal diagrams for empirical research. *Biometrika* 1995; **82**(4): 669-88.