Generalized Contagion

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Generalized contagion model

Basic questions about contagion

- How many types of contagion are there?
- How can we categorize real-world contagions?
- Can we connect models of disease-like and social contagion?
- Focus: mean field models.

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Mathematical Epidemiology (recap)

The standard SIR model [10]

- 🚓 = basic model of disease contagion
- Three states:
 - 1. S = Susceptible
 - 2. I = Infective/Infectious
 - 3. R = Recovered or Removed or Refractory

$$S(t) + I(t) + R(t) = 1$$

- Presumes random interactions (mass-action principle)
- Interactions are independent (no memory)
- Discrete and continuous time versions

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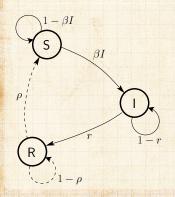
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Discrete time automata example:



Transition Probabilities:

 β for being infected given contact with infected r for recovery ρ for loss of immunity

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Original models attributed to



4 1920's: Reed and Frost



1920's/1930's: Kermack and McKendrick [7, 9, 8]



Coupled differential equations with a mass-action principle

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Differential equations for continuous model

$$\frac{\mathrm{d}}{\mathrm{d}t}S = -\beta \underline{IS} + \rho R$$
$$\frac{\mathrm{d}}{\mathrm{d}t}I = \beta \underline{IS} - rI$$
$$\frac{\mathrm{d}}{\mathrm{d}t}R = rI - \rho R$$

 β , r, and ρ are now rates.

Reproduction Number R_0 :

- R_0 = expected number of infected individuals resulting from a single initial infective
- \clubsuit Epidemic threshold: If $R_0 > 1$, 'epidemic' occurs.

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Discrete version:

- Set up: One Infective in a randomly mixing population of Susceptibles
- At time t = 0, single infective random bumps into a Susceptible
- \aleph Probability of transmission = β
- At time t=1, single Infective remains infected with probability 1-r
- At time t = k, single Infective remains infected with probability $(1 r)^k$

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Reproduction Number R_0

Discrete version:



Expected number infected by original Infective:

$$R_0 = \beta + (1-r)\beta + (1-r)^2\beta + (1-r)^3\beta + \dots$$

$$=\beta\left(1+(1-r)+(1-r)^2+(1-r)^3+...\right)$$

$$=\beta \frac{1}{1-(1-r)} = \beta/r$$



Similar story for continuous model.

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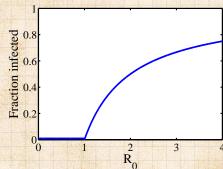






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Example of epidemic threshold:



Continuous phase transition.

Fine idea from a simple model.

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Simple disease spreading models

Valiant attempts to use SIR and co. elsewhere:

- Adoption of ideas/beliefs (Goffman & Newell, 1964) [6]
- Spread of rumors (Daley & Kendall, 1964, 1965) [2, 3]
- Diffusion of innovations (Bass, 1969) [1]
- Spread of fanatical behavior (Castillo-Chávez & Song, 2003)

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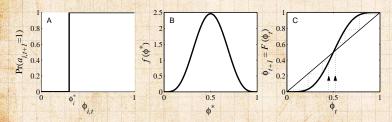
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Granovetter's model (recap of recap)

Action based on perceived behavior of others.



- Two states: S and I.
- Recovery now possible (SIS).
- $\Leftrightarrow \phi$ = fraction of contacts 'on' (e.g., rioting).
- Discrete time, synchronous update.
- This is a Critical mass model.
- Interdependent interaction model.

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- Disease models assume independence of infectious events.
- Threshold models only involve proportions: $3/10 \equiv 30/100$.
- Threshold models ignore exact sequence of influences
- Threshold models assume immediate polling.
- Mean-field models neglect network structure
- Network effects only part of story: media, advertising, direct marketing.

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Basic ingredients:

- Incorporate memory of a contagious element [4, 5]
- $\ensuremath{\mathfrak{S}}$ Population of N individuals, each in state S, I, or R.
- Each individual randomly contacts another at each time step.
- ϕ_t = fraction infected at time t = probability of <u>contact</u> with infected individual
- & With probability p, contact with infective leads to an exposure.
- A lf exposed, individual receives a dose of size d drawn from distribution f. Otherwise d = 0.

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Generalized model—ingredients

 $S \Rightarrow I$

8 Individuals 'remember' last T contacts:

$$D_{t,i} = \sum_{t'=t-T+1}^{t} d_i(t')$$

Infection occurs if individual i's 'threshold' is exceeded:

$$D_{t,i} \ge d_i^*$$

 \Leftrightarrow Threshold d_i^* drawn from arbitrary distribution g at t=0.

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Generalized model—ingredients



When $D_{t,i} < d_i^*$, individual i recovers to state R with probability r.



Once in state R, individuals become susceptible again with probability ρ .

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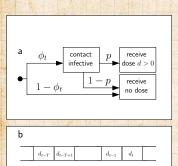
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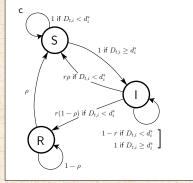




A visual explanation



 $\Sigma = D_{t,i}$



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Study SIS-type contagion first:

Recovered individuals are immediately susceptible again:

$$\rho = 1$$
.

- Look for steady-state behavior as a function of exposure probability p.
- & Denote fixed points by ϕ^* .

Homogeneous version:

- All individuals have threshold d*
- All dose sizes are equal: d = 1

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Fixed points for r < 1, $d^* = 1$, and T = 1:



r < 1 means recovery is probabilistic.



T = 1 means individuals forget past interactions.



 $d^* = 1$ means one positive interaction will infect an individual.



Evolution of infection level:

$$\phi_{t+1} = \underbrace{p\phi_t}_{\mathsf{a}} + \underbrace{\phi_t(1-p\phi_t)}_{\mathsf{b}} \underbrace{(1-r)}_{\mathsf{C}}.$$

- a: Fraction infected between t and t+1, independent of past state or recovery.
- b: Probability of being infected and not being reinfected.
- c: Probability of not recovering.

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Fixed points for r < 1, $d^* = 1$, and T = 1:

$$\clubsuit$$
 Set $\phi_t = \phi^*$:

$$\phi^* = p\phi^* + (1 - p\phi^*)\phi^*(1 - r)$$

$$\Rightarrow 1 = p + (1 - p\phi^*)(1 - r), \quad \phi^* \neq 0,$$

$$\Rightarrow \phi^* = rac{1 - r/p}{1 - r}$$
 and $\phi^* = 0$.

- $\red {}_{\sim}$ Critical point at $p=p_c=r$.
- \clubsuit Spreading takes off if p/r > 1
- Find continuous phase transition as for SIR model.
- \Leftrightarrow Goodness: Matches $R_o = \beta/\gamma > 1$ condition.

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Fixed points for r = 1, $d^* = 1$, and T > 1

- r = 1 means recovery is immediate.
- T > 1 means individuals remember at least 2 interactions.
- $d^* = 1$ means only one positive interaction in past T interactions will infect individual.
- Effect of individual interactions is independent from effect of others.
- \Leftrightarrow Call ϕ^* the steady state level of infection.
- Pr(infected) = 1 Pr(uninfected):

$$\phi^* = 1 - (1 - p\phi^*)^T.$$

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Fixed points for r = 1, $d^* = 1$, and T > 1

& Closed form expression for ϕ^* :

$$\phi^* = 1 - (1 - p\phi^*)^T.$$

& Look for critical infection probability p_c .

 \Leftrightarrow As $\phi^* \to 0$, we see

$$\phi^* \simeq pT\phi^* \Rightarrow p_c = 1/T.$$

Again find continuous phase transition...

 \clubsuit Note: we can solve for p but not ϕ^* :

$$p = (\phi^*)^{-1} [1 - (1 - \phi^*)^{1/T}].$$

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Fixed points for $r \le 1$, $d^* = 1$, and $T \ge 1$

Start with r = 1, $d^* = 1$, and $T \ge 1$ case we have just examined:

$$\phi^* = 1 - (1 - p\phi^*)^T.$$

- \Leftrightarrow For r < 1, add to right hand side fraction who:
 - 1. Did not receive any infections in last T time steps,
 - 2. And did not recover from a previous infection.
- Define corresponding dose histories. Example:

$$H_1 = \{\dots, d_{t-T-2}, d_{t-T-1}, 1, \underbrace{0, 0, \dots, 0, 0}_{T \text{ 0's}}\},\$$

With history H_1 , probability of being infected (not recovering in one time step) is 1-r.

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Fixed points for $r \le 1$, $d^* = 1$, and $T \ge 1$

In general, relevant dose histories are:

$$H_{m+1} = \{\dots, d_{t-T-m-1}, 1, \underbrace{0, 0, \dots, 0, 0}_{m \text{ 0's}}, \underbrace{0, 0, \dots, 0, 0}_{T \text{ 0's}}\}.$$

Overall probabilities for dose histories occurring:

$$P(H_1) = p\phi^*(1 - p\phi^*)^T(1 - r),$$

$$P(H_{m+1}) = \underbrace{p\phi^*}_{a} \underbrace{(1-p\phi^*)^{T+m}}_{b} \underbrace{(1-r)^{m+1}}_{c}.$$

- a: Pr(infection T + m + 1 time steps ago)
- b: Pr(no doses received in T + m time steps since)
- c: $Pr(no\ recovery\ in\ m\ chances)$

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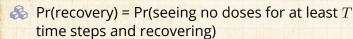
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Fixed points for r < 1, $d^* = 1$, and T > 1



$$\begin{split} &= \underset{m=0}{r} \sum_{m=0}^{\infty} P(H_{T+m}) = \underset{m=0}{r} \sum_{m=0}^{\infty} p \phi^* (1 - p \phi^*)^{T+m} (1 - r)^m \\ &= \underset{1}{r} \frac{p \phi^* (1 - p \phi^*)^T}{1 - (1 - n \phi^*)(1 - r)}. \end{split}$$

Fixed point equation:

$$\phi^* = 1 - \frac{r(1-p\phi^*)^T}{1-(1-p\phi^*)(1-r)}.$$

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Fixed points for $r \le 1$, $d^* = 1$, and $T \ge 1$

Fixed point equation (again):

$$\phi^* = 1 - \frac{r(1 - p\phi^*)^T}{1 - (1 - p\phi^*)(1 - r)}.$$

Sind critical exposure probability by examining above as $\phi^* \to 0$.



$$\Rightarrow p_c = \frac{1}{T + 1/r - 1} = \frac{1}{T + \tau}.$$

where τ = mean recovery time for simple relaxation process.

 \Leftrightarrow Decreasing r keeps individuals infected for longer and decreases p_c .

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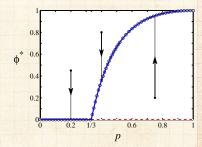
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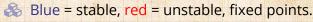


$$p_c = 1/(T+\tau)$$





 \clubsuit Example details: $T=2 \& r=1/2 \Rightarrow p_c=1/3$.



$$\approx \tau = 1/r - 1$$
 = characteristic recovery time = 1.

 $T + \tau \simeq \text{average memory in system} = 3.$

Phase transition can be seen as a transcritical bifurcation. [11]

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Homogeneous, multi-hit models:

All right: $d^* = 1$ models correspond to simple disease spreading models.

 \Longrightarrow What if we allow $d^* \geq 2$?

Again first consider SIS with immediate recovery (r = 1)

Also continue to assume unit dose sizes $(f(d) = \delta(d-1))$.

To be infected, must have at least d^* exposures in last T time steps.

Fixed point equation:

$$\phi^* = \sum_{i=d^*}^T {T \choose i} (p\phi^*)^i (1 - p\phi^*)^{T-i}.$$

 \clubsuit As always, $\phi^* = 0$ works too.

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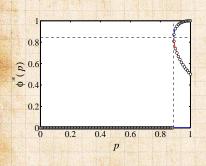




Fixed points for r=1, $d^*>1$, and T>1

& Exactly solvable for small T.

& e.g., for $d^* = 2$, T = 3:



Fixed point equation: $\phi^* =$

$$3p^2\phi^{*2}(1-p\phi^*)+p^3\phi^{*3}$$

bifurcation [11] appears as p increases.

Behavior akin to output of Granovetter's threshold model.

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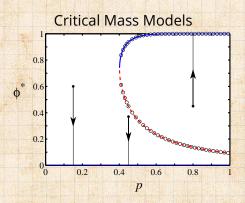


Homogeneous, multi-hit models:

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Another example:



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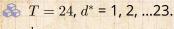


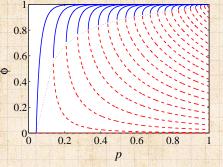


$$r = 1, d^* = 3, T = 12$$

Saddle-node bifurcation.







 $d^* = 1 \rightarrow d^* > 1$:

jump between

continuous

phase transition

and pure critical

mass model.

Unstable curve for $d^* = 2$ does not hit $\phi^* = 0$.

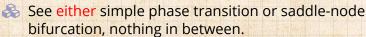
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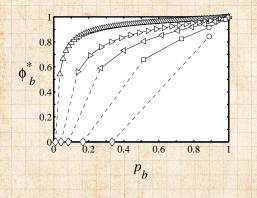








Bifurcation points for example fixed T, varying d^* :



$$35 T = 96 ()$$
.

$$T = 24 (\triangleright)$$

$$3 T = 12 (<),$$

$$3$$
 $T=6 (\square),$

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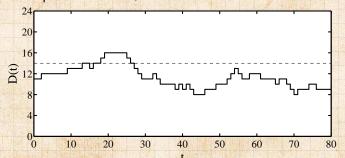
Fixed points for r < 1, $d^* > 1$, and $T \ge 1$

For r < 1, need to determine probability of recovering as a function of time since dose load last dropped below threshold.

Partially summed random walks:

$$D_i(t) = \sum_{t'=t-T+1}^t d_i(t')$$

Second Example for T = 24, $d^* = 14$:



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 \bigcirc Define γ_m as fraction of individuals for whom D(t)last equaled, and has since been below, their threshold m time steps ago,

Fraction of individuals below threshold but not recovered:

$$\Gamma(p,\phi^*;r) = \sum_{m=1}^{\infty} (1-r)^m \gamma_m(p,\phi^*).$$

Fixed point equation:

$$\phi^* = \Gamma(p, \phi^*; r) + \sum_{i=d^*}^T {T \choose i} (p\phi^*)^i (1 - p\phi^*)^{T-i}.$$

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Example: T = 3, $d^* = 2$

Want to examine how dose load can drop below threshold of $d^* = 2$:

$$D_n = 2 \Rightarrow D_{n+1} = 1$$

Two subsequences do this: $\{d_{n-2}, d_{n-1}, d_n, d_{n+1}\} = \{1, 1, 0, \mathbf{0}\}$ and $\{d_{n-2}, d_{n-1}, d_n, d_{n+1}, d_{n+2}\} = \{1, 0, 1, \mathbf{0}, \mathbf{0}\}.$

Note: second sequence includes an extra 0 since this is necessary to stay below $d^* = 2$.

To stay below threshold, observe acceptable following sequences may be composed of any combination of two subsequences:

$$a = \{0\}$$
 and $b = \{1, 0, 0\}$.

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Determine number of sequences of length m that keep dose load below $d^* = 2$.

 N_a = number of $a = \{0\}$ subsequences.

 N_b = number of $b = \{1, 0, 0\}$ subsequences.

$$m = N_a \cdot 1 + N_b \cdot 3$$

Possible values for N_b :

$$0,1,2,\ldots,\left\lfloor \frac{m}{3} \right\rfloor.$$

where | | means floor.

& Corresponding possible values for N_a :

$$m, m-3, m-6, \ldots, m-3 \left\lfloor \frac{m}{3} \right\rfloor$$
.

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 \aleph How many ways to arrange N_a a's and N_b b's?

Think of overall sequence in terms of subsequences:

$$\{Z_1,Z_2,\dots,Z_{N_a+N_b}\}$$



 $N_a + N_b$ slots for subsequences.

& Choose positions of either a's or b's:

$${N_a+N_b\choose N_a}={N_a+N_b\choose N_b}.$$

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 \mathbb{R} Total number of allowable sequences of length m:

$$\sum_{N_b=0}^{\lfloor m/3\rfloor} {N_b+N_a\choose N_b} = \sum_{k=0}^{\lfloor m/3\rfloor} {m-2k\choose k}$$

where $k = N_b$ and we have used $m = N_a + 3N_b$.



$$P(a) = (1 - p\phi^*) \text{ and } P(b) = p\phi^*(1 - p\phi^*)^2$$

Total probability of allowable sequences of length m:

$$\chi_m(p,\phi^*) = \sum_{k=0}^{\lfloor m/3 \rfloor} {m-2k \choose k} (1-p\phi^*)^{m-k} (p\phi^*)^k.$$



Notation: Write a randomly chosen sequence of a's and b's of length m as $D_m^{a,b}$.

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- Nearly there... must account for details of sequence endings.
- ♣ Three endings ⇒ Six possible sequences:

$$D_1 = \{1, 1, 0, 0, D_{m-1}^{a,b}\}$$

$$D_2 = \{1, 1, 0, 0, D_{m-2}^{a,b}, 1\}$$

$$P_1 = (p\phi)^2 (1 - p\phi)^2 \chi_{m-1}(p, \phi)$$

$$D_3 = \{1, 1, 0, 0, D_{m-3}^{a,b}, 1, 0\}$$

$$P_2 = (p\phi)^3 (1 - p\phi)^2 \chi_{m-2}(p, \phi)$$

 $P_3 = (p\phi)^3 (1 - p\phi)^3 \chi_{m-3}(p,\phi)$

$$D_4 = \{1, 0, 1, 0, 0, D_{m-2}^{a,b}\}$$

$$P_4 = (p\phi)^2 (1 - p\phi)^3 \chi_{m-2}(p, \phi)$$

$$D_5 = \{1, 0, 1, 0, 0, D_{m-3}^{a,b}, 1\}$$

$$P_5 = (p\phi)^3 (1-p\phi)^3 \chi_{m-3}(p,\phi)$$

$$D_6 = \{1, 0, 1, 0, 0, D_{m-4}^{a,b}, 1, 0\}$$

$$P_6=(p\phi)^3(1-p\phi)^4\chi_{m-4}(p,\phi)$$
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F.P. Eq:
$$\phi^* = \Gamma(p,\phi^*;r) + \sum_{i=d^*}^T {T \choose i} (p\phi^*)^i (1-p\phi^*)^{T-i}.$$

where $\Gamma(p, \phi^*; r) =$

$$(1-r)(p\phi)^2(1-p\phi)^2 + \sum_{m=1}^{\infty} (1-r)^m(p\phi)^2(1-p\phi)^2 \times$$

 $\left[\chi_{m-1} + \chi_{m-2} + 2p\phi(1-p\phi)\chi_{m-3} + p\phi(1-p\phi)^2\chi_{m-4}\right]$

and

$$\chi_m(p,\phi^*) = \sum_{k=0}^{\lfloor m/3\rfloor} {m-2k \choose k} (1-p\phi^*)^{m-k} (p\phi^*)^k.$$

Note: $(1-r)(p\phi)^2(1-p\phi)^2$ accounts for $\{1,0,1,0\}$ sequence.

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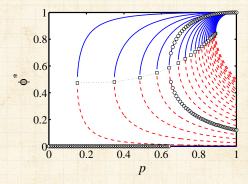
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$$T=3, d^*=2$$



 $r = 0.01, 0.05, 0.10, 0.15, 0.20, \dots, 1.00.$

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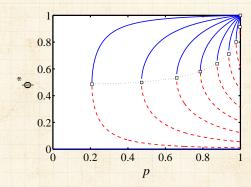
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$$T=2, d^*=2$$



 $r = 0.01, 0.05, 0.10, \dots, 0.3820 \pm 0.0001.$

 $Arr No spreading for <math>r \gtrsim 0.382$.

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What we have now:

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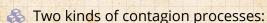
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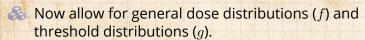
Generalized





- 1. Continuous phase transition: SIR-like.
- 2. Saddle-node bifurcation: threshold model-like.
- $d^* = 1$: spreading from small seeds possible.
- $d^* > 1$: critical mass model.
- Are other behaviors possible?

Generalized model



Key quantities:

$$P_k = \int_0^\infty \mathrm{d} d^* g(d^*) P\left(\sum_{j=1}^k d_j \geq d^*\right) \text{ where } 1 \leq k \leq T.$$

 P_k = Probability that the threshold of a randomly selected individual will be exceeded by k doses.

备 e.g.,

 P_1 = Probability that one dose will exceed the threshold of a random individual = Fraction of most vulnerable individuals.



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Generalized model—heterogeneity, r = 1

Fixed point equation:

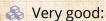
$$\phi^* = \sum_{k=1}^T {T \choose k} (p\phi^*)^k (1 - p\phi^*)^{T-k} \underline{P_k}$$

 \clubsuit Expand around $\phi^* = 0$ to find when spread from single seed is possible:

$$pP_1T \ge 1$$

or

$$\Rightarrow p_c = 1/(TP_1)$$



- 1. P_1T is the expected number of vulnerables the initial infected individual meets before recovering.
- 2. pP_1T is : the expected number of successful infections (equivalent to R_0).
- from a small seed.

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- Next: Determine slope of fixed point curve at critical point p_c .
- Expand fixed point equation around $(p, \phi^*) = (p_c, 0)$.
- Find slope depends on $(P_1 P_2/2)^{[5]}$ (see Appendix).
- Behavior near fixed point depends on whether this slope is
 - 1. positive: $P_1 > P_2/2$ (continuous phase transition)
 - 2. negative: $P_1 < P_2/2$ (discontinuous phase transition)
- Now find three basic universal classes of contagion models...

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Example configuration:

- Dose sizes are lognormally distributed with mean 1 and variance 0.433.
- \clubsuit Memory span: T=10.
- Thresholds are uniformly set at
 - 1. $d_* = 0.5$
 - 2. $d_* = 1.6$
 - 3. $d_* = 3$
- Spread of dose sizes matters, details are not important.

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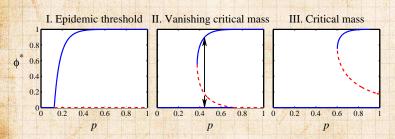
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Epidemic threshold:

$$P_1 > P_2/2$$
, $p_c = 1/(TP_1) < 1$

Vanishing critical mass:

$$P_1 < P_2/2$$
,

 $p_c = 1/(TP_1) < 1$

Pure critical mass:

 $P_1 < P_2/2$, $p_c = 1/(TP_1) > 1$

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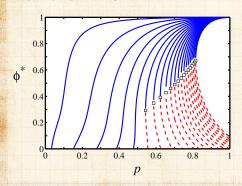






Heterogeneous case

Now allow r < 1:



 II-III transition generalizes: $p_c=1/[P_1(T+\tau)]$ where $\tau=1/r-1=$ expected recovery time

🚴 I-II transition less pleasant analytically.

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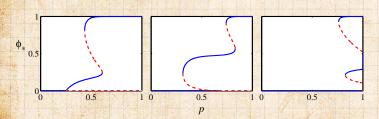
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More complicated models



Due to heterogeneity in individual thresholds.

Three classes based on behavior for small seeds.

Same model classification holds: I, II, and III.

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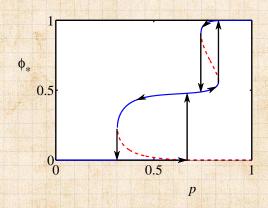
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Hysteresis in vanishing critical mass models



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- Memory is a natural ingredient.
- - Three universal classes of contagion processes:
 - 1. I. Epidemic Threshold
 - 2. II. Vanishing Critical Mass
 - 3. III. Critical Mass
- - Dramatic changes in behavior possible.
 - To change kind of model: 'adjust' memory, recovery, fraction of vulnerable individuals (T, r, ρ, ρ) P_1 , and/or P_2).
- To change behavior given model: 'adjust' probability of exposure (p) and/or initial number infected (ϕ_0) .

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- Single seed infects others if $pP_1(T+\tau) \geq 1$.
- \Re Key quantity: $p_c = 1/[P_1(T+\tau)]$
- A If $p_c < 1 \Rightarrow$ contagion can spread from single seed.
- Depends only on:
 - 1. System Memory $(T + \tau)$.
 - 2. Fraction of highly vulnerable individuals (P_1) .
- Details unimportant: Many threshold and dose distributions give same P_k .
- Another example of a model where vulnerable/gullible population may be more important than a small group of super-spreaders or influentials.

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Appendix: Details for Class I-II transition:

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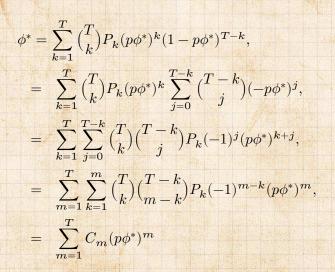
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Appendix: Details for Class I-II transition:

$$C_m = (-1)^m {T \choose m} \sum_{k=1}^m (-1)^k {m \choose k} P_k,$$

since

$${T \choose k} {T-k \choose m-k} = \frac{T!}{k! (T-k)!} \frac{(T-k)!}{(m-k)! (T-m)!}$$

$$= \frac{T!}{m! (T-m)!} \frac{m!}{k! (m-k)!}$$

$$= {T \choose m} {m \choose k}.$$

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Appendix: Details for Class I-II transition:

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Linearization gives

$$\phi^* \simeq C_1 p \phi^* + C_2 p_c^2 {\phi^*}^2.$$

where $C_1 = TP_1 (= 1/p_c)$ and $C_2 = {\binom{T}{2}}(-2P_1 + P_2)$. \Leftrightarrow Using $p_c = 1/(TP_1)$:



 $\phi^* \simeq \frac{C_1}{C_2 p_c^2} (p - p_c) = \frac{T^2 P_1^3}{(T - 1)(P_1 - P_2/2)} (p - p_c).$



Sign of derivative governed by $P_1 - P_2/2$.

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