### **Generalized** Contagion

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Complex Networks | @networksvox CSYS/MATH 303, Spring, 2019

### Prof. Peter Dodds | @peterdodds

Dept. of Mathematics & Statistics | Vermont Complex Systems Center Vermont Advanced Computing Core | University of Vermont



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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References





200 1 of 65

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model Homogeneous version

Heterogeneous version

Nutshell

Appendix

References

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



8

## Outline

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model Homogeneous version Heterogeneous version

Nutshell

Appendix

References

COcoNuTS @networksvox

Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



200 4 of 65

COcoNuTS @networksvox

Generalized Contagion

#### Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



🧼 <mark>ଥି</mark> ୬ ୬ ୯ 5 of 65

"Universal Behavior in a Generalized Model of Contagion" Dodds and Watts, Phys. Rev. Lett., **92**, 218701, 2004.<sup>[5]</sup>

"A generalized model of social and biological contagion" Dodds and Watts, J. Theor. Biol., **232**, 587–604, 2005.<sup>[6]</sup>

## 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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Generalized Contagion

#### Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



200 6 of 65

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## Mathematical Epidemiology (recap)

### The standard SIR model [11]

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

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

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Generalized Contagion

#### Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

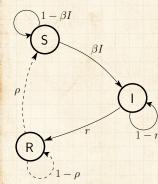
Appendix

References



## Independent Interaction Models

### Discrete time automata example:



Transition Probabilities:

 $\beta$  for being infected given contact with infected r for recovery  $\rho$  for loss of immunity COcoNuTS @networksvox

Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



200 8 of 65

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## Independent Interaction Models

### Original models attributed to

- 🚳 1920's: Reed and Frost
- 🗞 1920's/1930's: Kermack and McKendrick <sup>[8, 10, 9]</sup>
- Coupled differential equations with a mass-action principle

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



200 9 of 65

## Independent Interaction models

### Differential equations for continuous model

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

$$\frac{\mathsf{d}}{\mathsf{d}t}R = rI - \rho R$$

 $\beta$ , r, and  $\rho$  are now rates.

### Reproduction Number R<sub>0</sub>:

R<sub>0</sub> = expected number of infected individuals resulting from a single initial infective
 Epidemic threshold: If R<sub>0</sub> > 1, 'epidemic' occurs.

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



## Reproduction Number $R_0$

### Discrete version:

- Set up: One Infective in a randomly mixing population of Susceptibles
- At time t = 0, single infective randomly bumps into a Susceptible
- $\mathfrak{S}$  Probability of transmission =  $\beta$
- 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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Generalized Contagion

#### Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



## Reproduction Number $R_0$

### Discrete version:

Expected number infected by original Infective:

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

$$= \beta \left( 1 + (1-r) + (1-r)^2 + (1-r)^3 + \dots \right)$$
$$= \beta \frac{1}{1-(1-r)} = \beta/r$$

🚳 Similar story for continuous model.

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Generalized Contagion

#### Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

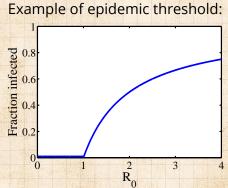
References



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nac 12 of 65

### Independent Interaction models



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Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



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Continuous phase transition.
 Fine idea from a simple model.

200 13 of 65

## Simple disease spreading models

### Valiant attempts to use SIR and co. elsewhere:

- Adoption of ideas/beliefs (Goffman & Newell, 1964)<sup>[7]</sup>
- Spread of rumors (Daley & Kendall, 1964, 1965) <sup>[3, 4]</sup>
- 💫 Diffusion of innovations (Bass, 1969) [1]
- Spread of fanatical behavior (Castillo-Chávez & Song, 2003)<sup>[2]</sup>

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Generalized Contagion

#### Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

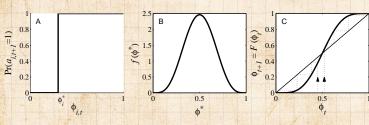
References



na 14 of 65

### Granovetter's model (recap of recap)

### 🚳 Action based on perceived behavior of others.



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

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



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20 15 of 65

## Some (of many) issues

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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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



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## Generalized model

### **Basic ingredients:**

- Incorporate memory of a contagious element<sup>[5, 6]</sup>
- $\Im$  Population of N individuals, each in state S, I, or R.
- Each individual randomly contacts another at each time step.
- $\phi_t =$ fraction infected at time t= probability of <u>contact</u> with infected individual
- With probability *p*, contact with infective leads to an exposure.
- If exposed, individual receives a dose of size d drawn from distribution f. Otherwise d = 0.

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



## Generalized model—ingredients

 $S \Rightarrow I$ 

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:

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

Threshold  $d_i^*$  drawn from arbitrary distribution gat t = 0. COcoNuTS @networksvox

Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



### Generalized model—ingredients

## $I \Rightarrow R$

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

# $R \Rightarrow S$

Once in state R, individuals become susceptible again with probability  $\rho$ .

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References

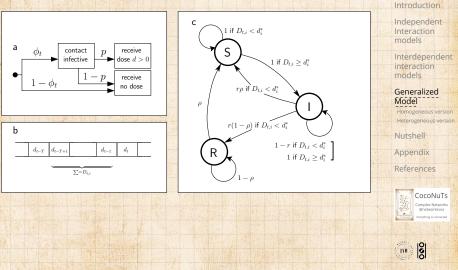


200 19 of 65

### A visual explanation

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20 of 65

## Generalized mean-field model

### 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 *o*\*.

### Homogeneous version:

All individuals have threshold  $d^*$ All dose sizes are equal: d = 1 COcoNuTS @networksvox

Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



WN OS

nac 21 of 65

### Homogeneous, one hit models:

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

- $rac{1}{2}$  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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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



na @ 23 of 65

UVN S

### Homogeneous, one hit models:

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

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

4

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

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

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



Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References

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na @ 24 of 65

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# Simple homogeneous examples

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

- $rac{1}{3}$  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.
- $\mathfrak{B}$  Call  $\phi^*$  the steady state level of infection.
- Pr(infected) = 1 Pr(uninfected):

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

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



Homogeneous, one hit models: Fixed points for r = 1,  $d^* = 1$ , and T > 1S Closed form expression for  $\phi^*$ :

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

♣ Look for critical infection probability  $p_c$ . ♣ As  $\phi^* \rightarrow 0$ , we see

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

Again find continuous phase transition ... Note: we can solve for p but not  $\phi^*$ :

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

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



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### Homogeneous, one hit models:

Fixed points for  $r \leq 1$ ,  $d^* = 1$ , and  $T \geq 1$ 



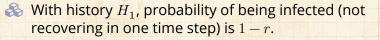
Start with r = 1,  $d^* = 1$ , and  $T \ge 1$  case we have just examined:

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

Sor 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}}\},\$$



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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction

Generalized Model

Homogeneous version

Nutshell

Appendix

References



DQ @ 27 of 65

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Homogeneous, one hit models: Fixed points for  $r \le 1$ ,  $d^* = 1$ , and  $T \ge 1$ S In general, relevant dose histories are:

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

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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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



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## Homogeneous, one hit models:

Fixed points for  $r \leq 1$ ,  $d^* = 1$ , and  $T \geq 1$ 

Pr(recovery) = Pr(seeing no doses for at least T time steps and recovering)

$$= r \sum_{m=0}^{\infty} P(H_{T+m}) = r \sum_{m=0}^{\infty} p \phi^* (1 - p \phi^*)^{T+m} (1 - r)^m$$

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

Using the probability of not recovering, we end up with a fixed point equation:

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

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



na @ 29 of 65

UVN S

### Homogeneous, one hit models:

Fixed points for  $r \leq 1$ ,  $d^* = 1$ , and  $T \geq 1$ 

Fixed point equation (again):

2

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

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

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

where  $\tau$  = mean recovery time for simple relaxation process.

Decreasing r keeps individuals infected for longer and decreases p<sub>c</sub>. COcoNuTS @networksvox

Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



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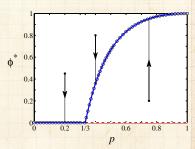
## Epidemic threshold:

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

 $\beta \phi^* = 0$ 

 $p_{c} = 1/(T+\tau)$ 

Fixed points for  $d^* = 1$ ,  $r \leq 1$ , and  $T \geq 1$ 



Example details: T = 2 & r = 1/2 ⇒ p<sub>c</sub> = 1/3.
Blue = stable, red = unstable, fixed points.
τ = 1/r - 1 = characteristic recovery time = 1.
T + τ ≃ average memory in system = 3.
Phase transition can be seen as a transcritical bifurcation. <sup>[12]</sup>

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



na @ 31 of 65

### Homogeneous, multi-hit models:

- All right:  $d^* = 1$  models correspond to simple disease spreading models.
- $\textcircled{What if we allow } d^* \geq 2?$
- 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:

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

 $\mathbf{s}$  As always,  $\phi^* = 0$  works too.

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References

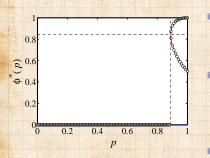




### Homogeneous, multi-hit models:

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

Solution Exactly solvable for small T. Solution  $d^* = 2, T = 3$ :



Sized point equation:  $\phi^* =$   $3p^2 {\phi^*}^2 (1 - p {\phi^*}) + p^3 {\phi^*}^3$ See new structure: a saddle node bifurcation<sup>[12]</sup> appears as *p* increases.

 $\textcircled{b} (p_b,\phi^*) = (8/9,27/32).$ 

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



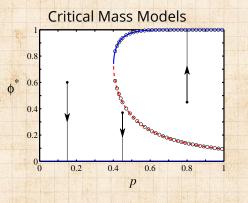
Behavior akin to output of Granovetter's threshold model.

na @ 33 of 65

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Homogeneous, multi-hit models:

### Another example:



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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References

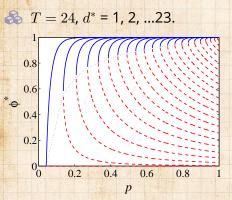


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 $r = 1, d^* = 3, T = 12$  Saddle-node bifurcation.

うへ ? 34 of 65

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



 $\begin{array}{l} \textcircled{3} \quad d^* = 1 \rightarrow d^* > 1; \\ \text{jump between} \\ \text{continuous} \\ \text{phase transition} \\ \text{and pure critical} \\ \text{mass model.} \\ \hline \\ \textcircled{3} \quad Unstable curve \\ \text{for } d^* = 2 \text{ does} \\ \text{not hit } \phi^* = 0. \end{array}$ 

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



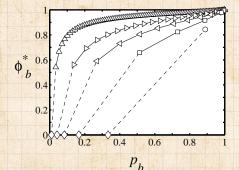
See either simple phase transition or saddle-node bifurcation, nothing in between.

20 C 35 of 65

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

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



3 T = 96 ( ).  $rac{1}{2}$  T = 24 (>),3 T = 12 ( <), $rac{1}{2} T = 6 (\Box),$ T = 3 (O),

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



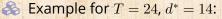
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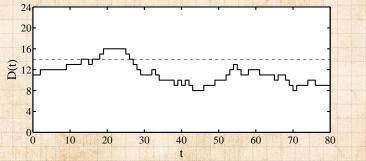
na (~ 36 of 65

### 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.</li>
 Partially summed random walks:

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





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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References

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DQ @ 37 of 65

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Befine  $\gamma_m$  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:

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

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



Fixed points for r < 1,  $d^* > 1$ , and  $T \ge 1$ 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:  $\{d_{n-2}, d_{n-1}, d_n, d_{n+1}\} = \{1, 1, 0, 0\}$ and  $\{d_{n-2}, d_{n-1}, d_n, d_{n+1}, d_{n+2}\} = \{1, 0, 1, 0, 0\}.$ 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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Generalized Contagion

Introduction

Independent Interaction

Interdependent interaction

Generalized Model

Homogeneous version

Nutshell

Appendix

References



2 a a 39 of 65

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  $\lfloor \cdot \rfloor$  means floor. Sourcesponding possible values for  $N_a$ :

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

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



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How many ways to arrange N<sub>a</sub> a's and N<sub>b</sub> b's?
 Think of overall sequence in terms of subsequences:

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

 $N_a + N_b$  slots for subsequences.
 Choose positions of either *a*'s or *b*'s:

$$\binom{N_a+N_b}{N_a} = \binom{N_a+N_b}{N_b}$$

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



UVN S

20 Al of 65

### Total number of allowable sequences of length m:

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

where  $k = N_b$  and we have used  $m = N_a + 3N_b$ .  $P(a) = (1 - p\phi^*)$  and  $P(b) = p\phi^*(1 - p\phi^*)^2$ Total probability of allowable sequences of length m:

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

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

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



Nearly there ...must account for details of sequence endings.  $\Im$  Three endings  $\Rightarrow$  Six possible sequences:

 $D_1 = \{1, 1, 0, 0, D_{m-1}^{a, b}\}$ interaction  $P_1 = (p\phi)^2 (1 - p\phi)^2 \chi_{m-1}(p,\phi)$ Generalized  $D_2 = \{1, 1, 0, 0, D_{m-2}^{a, b}, 1\}$ Model  $P_2 = (p\phi)^3 (1 - p\phi)^2 \chi_{m-2}(p, \phi)$  $D_3 = \{1, 1, 0, 0, D_{m-3}^{a,b}, 1, 0\}$ Nutshell  $P_3=(p\phi)^3(1-p\phi)^3\chi_{m-3}(p,\phi)$  Appendix  $D_4 = \{1, 0, 1, 0, 0, D_{m-2}^{a, b}\}$  $P_4 = (p\phi)^2 (1-p\phi)^3 \chi_{m-2}(p,\phi)$  $D_5 = \{1, 0, 1, 0, 0, D_{m-3}^{a,b}, 1\}$  $P_{5} = (p\phi)^{3}(1-p\phi)^{3}\chi_{m-3}(p,\phi)$  $D_6 = \{1, 0, 1, 0, 0, D_{m-4}^{a, b}, 1, 0\}$  $P_{6} = (p\phi)^{3}(1-p\phi)^{4}\chi_{m-4}(p,\phi) \quad \text{ for } \label{eq:P6}$ 

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Generalized Contagion

Independent Interaction models

Interdependent

Homogeneous version Heterogeneous versio

2 a a 43 of 65

F.P. Eq: 
$$\phi^* = \Gamma(p, \phi^*; r) + \sum_{i=d^*}^T \binom{T}{i} (p\phi^*)^i (1 - p\phi^*)^{T+q}$$

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

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

$$\begin{split} & [\chi_{m-1} + \chi_{m-2} + 2p\phi(1-p\phi)\chi_{m-3} + p\phi(1-p\phi)^2\chi_{m-4}] \\ & \text{and} \end{split}$$

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

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

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

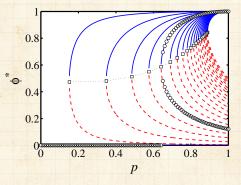
Nutshell

Appendix

References



 $T = 3, d^* = 2$ 



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

COcoNuTS @networksvox

Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



UVN SO

20 A 45 of 65

 $T = 2, d^* = 2$ 

#### COCONUTS @networksvox

Generalized Contagion



Independent Interaction models

Interdependent interaction

Generalized Model

Homogeneous version

Nutshell

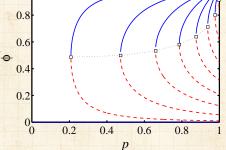
Appendix

References



UVN SO

 $r = 0.01, 0.05, 0.10, \dots, 0.3820 \pm 0.0001.$ 3 No spreading for  $r \gtrsim 0.382$ .



### What we have now:

Two kinds of contagion processes:

 Continuous phase transition: SIR-like.
 Saddle-node bifurcation: threshold model-like.

 d\* = 1: spreading from small seeds possible.
 d\* > 1: critical mass model.
 Are other behaviors possible?

COcoNuTS @networksvox

Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Nutshell

Appendix

References



UVN SO

20 A 47 of 65

## Generalized model

Now allow for general dose distributions (*f*) and threshold distributions (*g*).
 Key quantities:

$$P_k = \int_0^\infty \mathsf{d} d^* \, g(d^*) P\left(\sum_{j=1}^k d_j \ge d^*
ight) \, ext{where} \, 1 \le k \le T$$

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

🚷 e.g.,

 P<sub>1</sub> = Probability that <u>one dose</u> will exceed the threshold of a random individual
 = Fraction of most vulnerable individuals. COcoNuTS @networksvox

Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model Homogeneous version Heterogeneous version

Nutshell

Appendix

References



# Generalized model—heterogeneity, r = 1Fixed point equation:

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

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

$$\label{eq:pp1} \boxed{pP_1T \geq 1} \qquad \text{or} \qquad \Rightarrow p_c = 1/(T$$

- 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  $R_0$ ).



2

Solution Observe: p, may exceed 1 meaning no spreading from a small seed.

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Generalized Contagion

Introduction

Independent Interaction

Interdependent interaction

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



### Heterogeneous case

- Solution 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  $(P_1 P_2/2)^{[6]}$  (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 <u>three</u> basic universal classes of contagion models ...

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Heterogeneous version

Nutshell

Appendix

References



200 51 of 65

WN OS

### Heterogeneous case

### Example configuration:

Dose sizes are lognormally distributed with mean 1 and variance 0.433.

3 Memory span: T = 10.

Thresholds are uniformly set at

1. 
$$d_* = 0.5$$
  
2.  $d_* = 1.6$   
3.  $d_* = 3$ 



lacktriangleright Spread of dose sizes matters, details are not important.

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Generalized Contagion

Independent Interaction models

Interdependent interaction

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



WN OS

2 a a 52 of 65

### Three universal classes

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Generalized Contagion

Independent Interaction

Interdependent

Heterogeneous version

interaction

Generalized

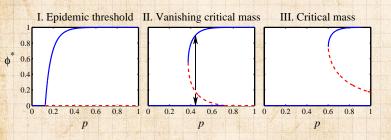
Model

Nutshell

Appendix

References

models

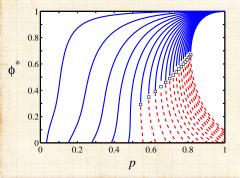




2 0 53 of 65

### Heterogeneous case

### Now allow r < 1:



II-III transition generalizes: p<sub>c</sub> = 1/[P<sub>1</sub>(T + τ)] where τ = 1/r - 1 = expected recovery time
 I-II transition less pleasant analytically.

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

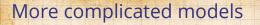
Generalized Model Homogeneous version Heterogeneous version

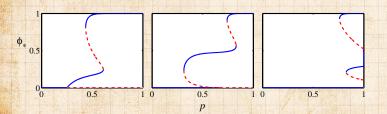
Nutshell

Appendix

References







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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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model Homogeneous version Heterogeneous version

Nutshell

Appendix

References



na (~ 55 of 65

# Hysteresis in vanishing critical mass models

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version

Heterogeneous version

Nutshell

Appendix

References



200 56 of 65

WN OO

# Nutshell (one half)

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, 4 recovery, fraction of vulnerable individuals (T, r,  $\rho$ ,  $P_1$ , and/or  $P_2$ ). To change behavior given model: 'adjust' probability of exposure (p) and/or initial number infected ( $\phi_0$ ).

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Generalized Contagion

Independent Interaction models

Interdependent interaction

Generalized Model

Nutshell

Appendix

References



2 a a 57 of 65

# Nutshell (other half)

Single seed infects others if  $pP_1(T + \tau) \ge 1$ . Key quantity:  $p_c = 1/[P_1(T+\tau)]$  $rac{1}{2}$  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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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model Homogeneous versio

Heterogeneous version

Nutshell

Appendix

References

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20 58 of 65

## Appendix: Details for Class I-II transition:

 $\phi^* = \sum_{i=1}^T \binom{T}{k} P_k (p\phi^*)^k (1-p\phi^*)^{T-k},$  $= \sum_{k=1}^{T} \binom{T}{k} P_k (p\phi^*)^k \sum_{j=0}^{T-k} \binom{T-k}{j} (-p\phi^*)^j,$  $= \sum_{k=1}^{T} \sum_{j=0}^{T-k} \binom{T}{k} \binom{T-k}{j} P_k(-1)^j (p\phi^*)^{k+j},$  $= \sum_{m=1}^{T} \sum_{k=1}^{m} {T \choose k} {T-k \choose m-k} P_k(-1)^{m-k} (p\phi^*)^m,$  $= \sum_{m=1}^{T} C_m (p\phi^*)^m$ 

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



na @ 59 of 65

### Appendix: Details for Class I-II transition:

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

since

$$\binom{T}{k}\binom{T-k}{m-k}$$

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

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

$$\binom{T}{m} \binom{m}{k}.$$

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Generalized Contagion

Introduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

)!

Appendix

References



WN OS

20 0 60 of 65

### Appendix: Details for Class I-II transition:

### Linearization gives

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

where  $C_1 = TP_1(=1/p_c)$  and  $C_2 = {T \choose 2}(-2P_1 + P_2)$ . 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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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



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COcoNuTS @networksvox

Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Homogeneous version Heterogeneous version

Nutshell

Appendix

References



WN OS

20 62 of 65

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model Homogeneous versio

Heterogeneous version

Nutshell

Appendix

References



20 03 of 65

WN OS

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



20 64 of 65

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Generalized Contagion

ntroduction

Independent Interaction models

Interdependent interaction models

Generalized Model

Heterogeneous version

Nutshell

Appendix

References



WN OS

na (~ 65 of 65