Generalized Contagion

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Principles of Complex Systems, Vols. 1 & 2 CSYS/MATH 300 and 303, 2021-2022 | @pocsvox

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"Universal Behavior in a Generalized Model of Contagion"

Dodds and Watts, Phys. Rev. Lett., **92**, 218701, 2004. [5]



"A generalized model of social and biological contagion"

Dodds and Watts.

J. Theor. Biol., **232**, 587–604, 2005. ^[6]

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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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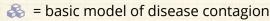






Mathematical Epidemiology (recap)

The standard SIR model [11]



- Three states:
 - 1. S = Susceptible
 - 2. I = Infective/Infectious
 - 3. R = Recovered or Removed or Refractory

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

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

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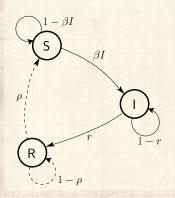






Independent Interaction Models

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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Independent Interaction Models

Original models attributed to



4 1920's: Reed and Frost



1920's/1930's: Kermack and McKendrick [8, 10, 9]



Coupled differential equations with a mass-action principle

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Independent Interaction models

Differential equations for continuous model

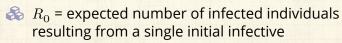
$$\frac{\mathrm{d}}{\mathrm{d}t}S = -\beta \underline{IS} + \rho R$$

$$\frac{\mathrm{d}}{\mathrm{d}t}I = \beta \underline{IS} - rI$$

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

 β , r, and ρ are now rates.

Reproduction Number R_0 :



 \clubsuit Epidemic threshold: If $R_0 > 1$, 'epidemic' occurs.

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Reproduction Number R_0

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Discrete version:

- Set up: One Infective in a randomly mixing population of Susceptibles
- \clubsuit At time t=0, single infective randomly bumps into a Susceptible
- A Probability of transmission = β
- At time t = 1, single Infective remains infected with probability 1-r
- \clubsuit 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:

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

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

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



Similar story for continuous model.

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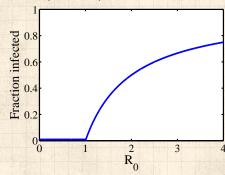






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Example of epidemic threshold:



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) [7]
- Spread of rumors (Daley & Kendall, 1964, 1965) [3, 4]
- Diffusion of innovations (Bass, 1969)
- Spread of fanatical behavior (Castillo-Chávez & Song, 2003) [2]

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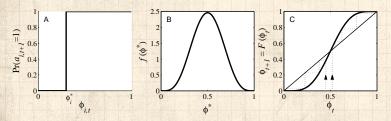
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Granovetter's model (recap of recap)

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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Some (of many) issues

- Disease models assume independence of infectious events.
- \ref{heat} 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 model

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Generalized Contagion

Basic ingredients:

- & Incorporate memory of a contagious element [5, 6]
- $\ensuremath{\mathfrak{S}}$ 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
- \Leftrightarrow 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

 $S \Rightarrow I$

Individuals 'remember' last T contacts:

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

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

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

 \mathbb{A} Threshold d_i^* drawn from arbitrary distribution qat 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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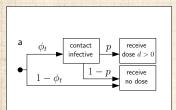
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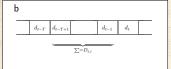


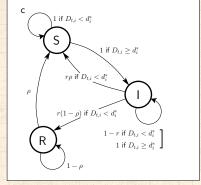




A visual explanation







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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.
- \triangle 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 $\phi^* = 0$.

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

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Simple homogeneous examples

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.
- \triangle 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 ...

 $\ensuremath{\mathfrak{S}}$ 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 $T\geq 1$ case we have just examined:

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

- $\ensuremath{\&}$ 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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Fixed points for $r \le 1$, $d^* = 1$, and $T \ge 1$

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

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

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

Fixed point equation (again):

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

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



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

where τ = mean recovery time for simple relaxation process.

 $\ref{position}$ Decreasing r keeps individuals infected for longer and decreases p_c .

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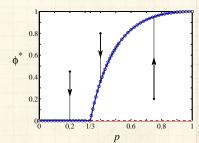






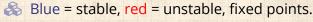
Epidemic threshold:

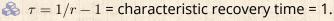
Fixed points for $d^* = 1$, $r \le 1$, and $T \ge 1$





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





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

Phase transition can be seen as a transcritical bifurcation. [12]

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Homogeneous, multi-hit models:

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

 \clubsuit What if we allow $d^* > 2$?

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

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

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

Fixed point equation:

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

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

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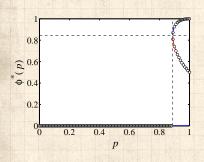


Homogeneous, multi-hit models:

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

 \Leftrightarrow Exactly solvable for small T.

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



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Fixed point equation: $\phi^* = \\ 3p^2 {\phi^*}^2 (1-p\phi^*) + p^3 {\phi^*}^3$

See new structure: a saddle node bifurcation [12] appears as p increases.

Behavior akin to output of Granovetter's threshold model.

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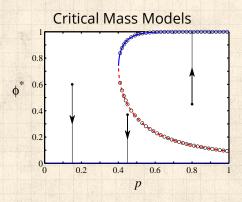






Homogeneous, multi-hit models:

Another example:



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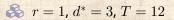
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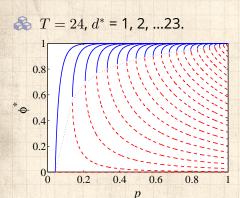


Saddle-node bifurcation.





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



 $d^* = 1 \rightarrow d^* > 1$: jump between continuous phase transition and pure critical mass model.

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

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

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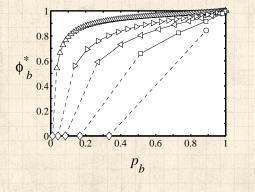






Fixed points for r=1, $d^*>1$, and $T\geq 1$

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



$$3 T = 96$$
 ().

$$3 T = 24 (>),$$

$$\Rightarrow T = 12 (\triangleleft),$$

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

$$\Rightarrow T = 3 (0),$$

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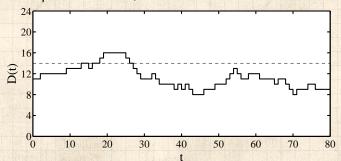
Fixed points for r < 1, $d^* > 1$, and $T \ge 1$

 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:

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

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



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 \bigotimes 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:

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

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

 \clubsuit 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:

$$\begin{aligned} &\{d_{n-2},d_{n-1},d_n,d_{n+1}\} = \{1,1,0,\textcolor{red}{0}\}\\ &\text{and } \{d_{n-2},d_{n-1},d_n,d_{n+1},d_{n+2}\} = \{1,0,1,\textcolor{red}{0},\textcolor{red}{0}\}. \end{aligned}$$

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

 $\begin{cases} \&\ N_a = \mbox{number of } a = \{0\} \mbox{ subsequences.} \end{cases}$

 $\ensuremath{ \begin{subarray}{l} \ensuremath{ \&} \ensuremath{ N_b} = \ensuremath{ \mbox{number of } b = \{1,0,0\} \ensuremath{ \mbox{subsequences.}} \ensuremath{ \ensuremath{ \begin{subarray}{l} \ensuremath{ \&} \ensuremath{ \mbox{o}} \ensuremath{ \mbox$

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

Possible values for N_b :

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

where $\lfloor \cdot \rfloor$ means floor.

& Corresponding possible values for N_a :

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

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 $\red{\$}$ 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:

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

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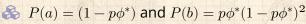




 \mathfrak{S} Total number of allowable sequences of length m:

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

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



 \Re 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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Nearly there ...must account for details of sequence endings.

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

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

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

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

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

$$P_{5} = (p\phi)^{3}(1 - p\phi)^{3}\chi_{m-3}(p, \phi)$$

$$D_{6} = \{1, 0, 1, 0, 0, D_{m-4}^{a,b}, 1, 0\}$$

$$\begin{array}{l} P_6 = (p\phi)^3 (1-p\phi)^4 \chi_{m-4}(p,\phi) \end{array} \hspace{-0.2cm} \mbox{\begin{tabular}{l} \end{tabular}} \mbox{\begin{tabular}{l} \end{tabular}} \mbox{\begin{tabular}{l} \end{tabular}} \end{array}$$

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

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

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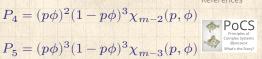
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 $P_3=(p\phi)^3(1-p\phi)^3\chi_{m-3}(p,\phi)$ Appendix



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

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

and

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 $(1-r)(p\phi)^2(1-p\phi)^2 + \sum_{m=0}^{\infty} (1-r)^m(p\phi)^2(1-p\phi)^2 \times (1-r)^m(p\phi)^2(1-p\phi)^2$

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

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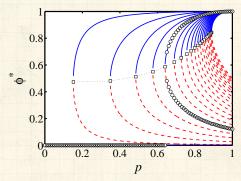
 $\chi_m(p,\phi^*) = \sum_{k=0}^{\lfloor m/3\rfloor} \binom{m-2k}{k} (1-p\phi^*)^{m-k} (p\phi^*)^k.$

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



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



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

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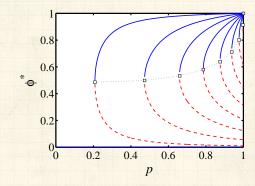
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$$T=2, d^*=2$$





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



Arr No spreading for $r \gtrsim 0.382$.

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What we have now:

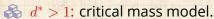


Two kinds of contagion processes:

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



 $d^* = 1$: spreading from small seeds possible.



Are other behaviors possible?

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Generalized model

Now allow for general dose distributions (f) and threshold distributions (g).

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.

ቆ e.g.,

 P_1 = Probability that <u>one dose</u> will exceed the threshold of a random individual = Fraction of most vulnerable individuals. PoCS @pocsvox

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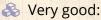
Generalized model—heterogeneity, r = 1

Fixed 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:

$$pP_1T \geq 1 \hspace{1cm} \text{or} \hspace{1cm} \Rightarrow p_c = 1/(TP_1)$$



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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Heterogeneous case

Next: Determine slope of fixed point curve at critical point p_a .

Expand fixed point equation around $(p, \phi^*) = (p_c, 0).$

 \red{slope} 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 three basic universal classes of contagion models ...

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Heterogeneous case

Example configuration:

- Dose sizes are lognormally distributed with mean 1 and variance 0.433.
- 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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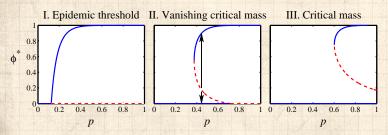
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Three universal classes



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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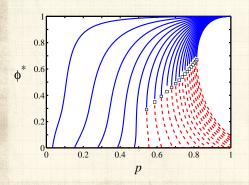






Heterogeneous case

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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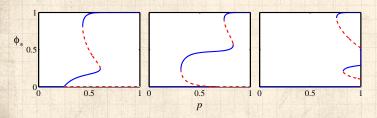
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More complicated models



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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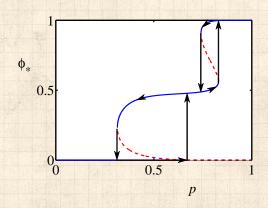
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Hysteresis in vanishing critical mass models



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Nutshell (one half)

Memory is a natural ingredient.

Three universal classes of contagion processes:

I. Epidemic Threshold II. Vanishing Critical Mass 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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Nutshell (other half)

Single seed infects others if $pP_1(T+\tau) > 1$.

Key quantity: $p_c = 1/[P_1(T+\tau)]$

 \clubsuit 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).

Arr 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:

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

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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

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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 $C_2={T\choose 2}(-2P_1+P_2).$



 \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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