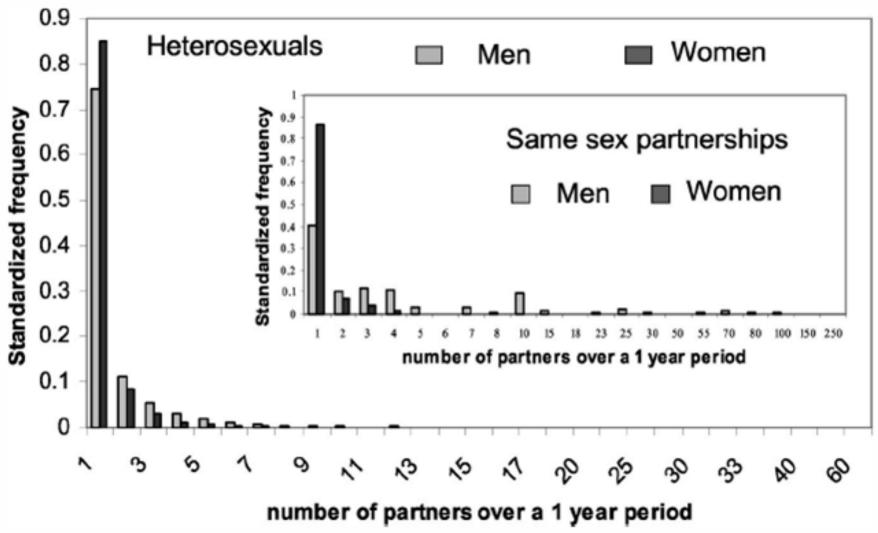
#### Scale-Free Networks

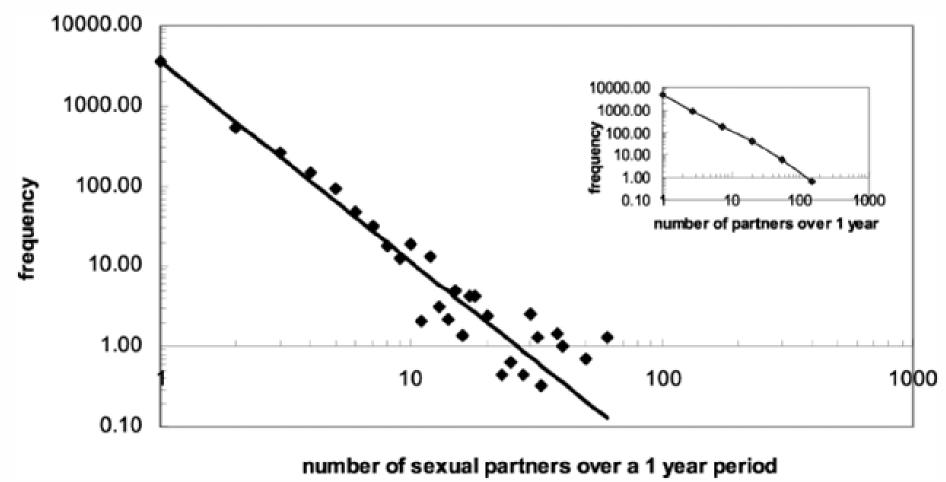
Nathaniel Osgood
CMPT 858
March 3, 2011

#### Recall: Heterogeneity in Contact Rates



Source: Schneeberger et al., Scale-Free Networks and Sexually Transmitted Diseases: A Description of Observed Patterns of Sexual Contacts in Britain and Zimbabwe, Sexually Transmitted Diseases, June 2004, Volume 31, Issue 6, pp 380-387

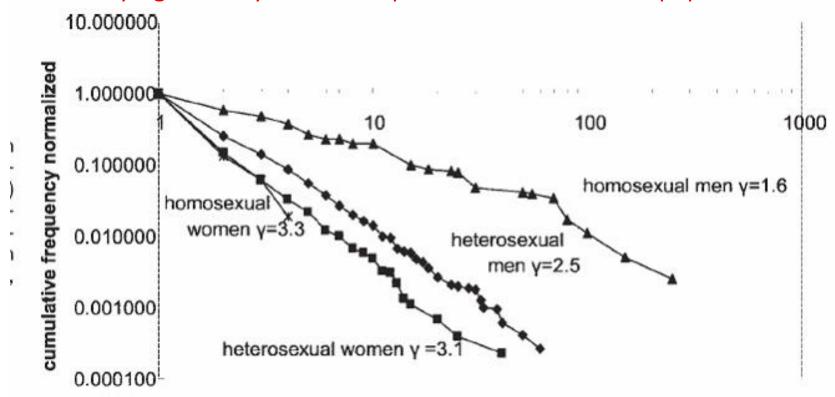
# Associated Log-Log Graph



Source: Schneeberger et al., Scale-Free Networks and Sexually Transmitted Diseases: A Description of Observed Patterns of Sexual Contacts in Britain and Zimbabwe, Sexually Transmitted Diseases, June 2004, Volume 31, Issue 6, pp 380-387

## Heterogeneity in Contact Rates

This may significantly affect the spread of infection in the population!



number of partners over a 1 year period

# Intuitive Plausibility of Importance of Heterogeneity

- Someone with high # of partners is both
  - More likely to be infected by a partners
  - More likely to pass on the infection to another person
- Via targeted interventions on high contact people, may be able to achieve great "bang for the buck"
- We may see very different infection rates in high contact-rate individuals

 How to modify classic equations to account for heterogeneity? How affects infection spread?

#### Recall: Classic Infection Term

$$\dot{Y} = c \left(\frac{Y}{N}\right) \beta X - \frac{Y}{D}$$

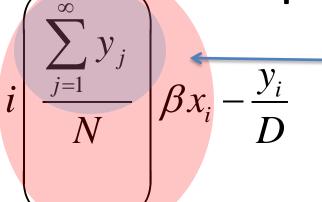
- Xs are susceptibles, Ys are infectives
- c is contacts per unit time
- β is chance a given contact between an infective and a susceptible will transmit infection

# Key Step: Disaggregate by Contact Rate

- We break the population up in to groups according to their rate of contacts
- x<sub>i</sub> and y<sub>i</sub> are susceptibles, infectives who contact i other people per unit time
  - X is divided into  $x_0$ ,  $x_1$ , ...
  - Y is divided into  $y_0, y_1, ...$

This rate of contact used to be a single constant (c), but now we've captured the Heterogeneity in rates!

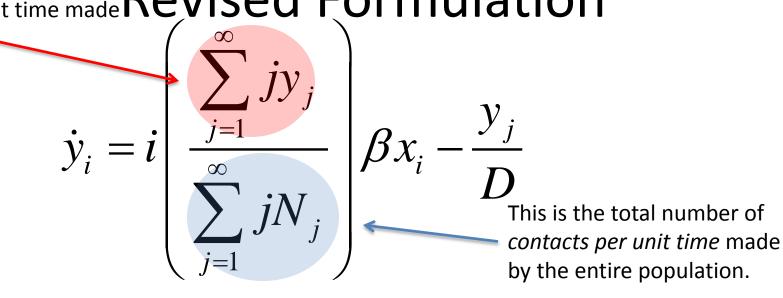




This is the total number of Infected people

- Here we are capturing the higher levels of risk for someone of activity class i as i increases (due to higher contact rates)
- Problem:
  - We are assuming that our *i* contacts are equally spread among other people – in fact, they are skewed towards *others* with a high # of contacts!
  - People with high #s of contacts are more likely to be infected

This is the total number of contacts per unit time made Revised Formulation by infectives!



- x<sub>i</sub> and y<sub>i</sub> are susceptibles, infectives who contact i other people per unit time
- The fraction indicates fraction of contacts in the population that are with an infective person
  - i times this is the rate of contacts with infectives per unit time experienced by a susceptible in class i

#### Force of Infection

$$\lambda = eta egin{bmatrix} \sum_{j=1}^{\infty} j y_j \ \frac{j}{\sum_{j=1}^{\infty} j N_j} \end{pmatrix}$$

 $\lambda$  will only grow if y grows!

# Reformulated Equation

$$\dot{\lambda} = \lambda \left( \beta \frac{E[j^2]}{E[j]} - \frac{1}{D} \right)$$

This is exactly like the normal SIR system, with

$$X = 1,c = E[j^2]$$

$$E[j]$$

•  $R_0$  is  $\beta \frac{E[j^2]}{E[j]}D$ 

### Reformulating in More Familiar Terms

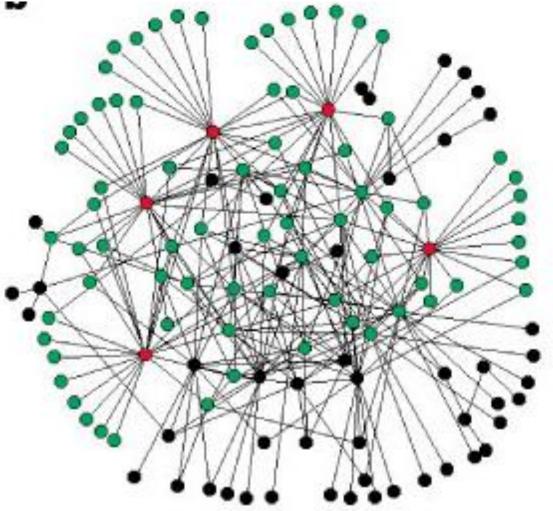
$$\sigma^{2} = Var(j) = E\left[\left(j - E\left[j\right]\right)^{2}\right] = E\left[j^{2}\right] - \left(E\left[j\right]\right)^{2}$$

$$c = \frac{E[j^2]}{E[j]} = \frac{\left(E[j^2] - E[j]^2\right) + E[j]^2}{E[j]} = \frac{\sigma^2 + m^2}{m} = m + \frac{\sigma^2}{m}$$

$$R_{0} = \beta cD = \beta \frac{E[j^{2}]}{E[j]}D = \beta \left(m + \frac{\sigma^{2}}{m}\right)D$$

 $R_0$  rises proportional to the coefficient of variation (ratio of the variance to mean)!

#### Scale-Free Networks



Albert, Jeong and Barabási, Nature 406, 378-382(27 July 2000)

#### Scale-Free Networks

- A node's number of connections (a person's # of contacts) is denoted k
- The chance of having k partners is proportional to  $k^{-}$ .
- For human sexual networks,  $\gamma$  is between 2 and 3.5
  - E.g. if  $\gamma$ =2, likelihood having 2 partner is proportional to  $\frac{1}{9}$ , of having 3 is proportional to  $\frac{1}{9}$ , etc.
- NB: It appears that AnyLogic's algorithm (from Barabasi & Albert *Science* 1999) imposes a  $\gamma$  of  $\sim$ 3

### Power Law Scaling

- This frequency distribution is a "power law" that exhibits invariance to scale
- Suppose we "zoom in" in terms of x by a factor of  $\alpha$ Cf:  $p(x)=cx^{-\gamma}$

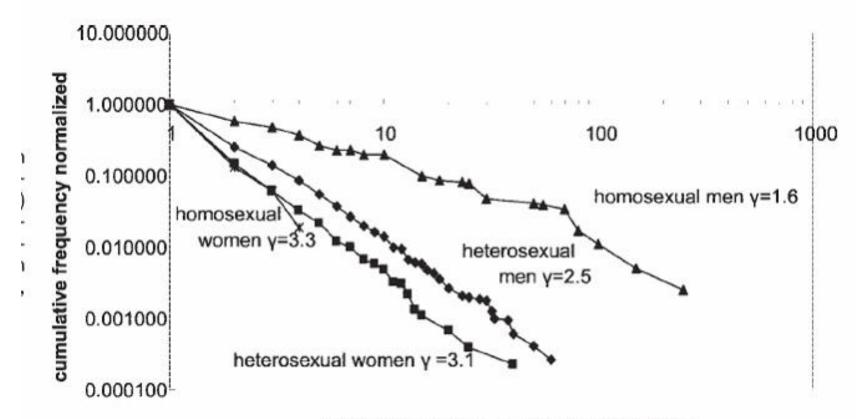
$$p(\alpha x)=c(\alpha x)^{-\gamma}=c\alpha^{-\gamma}x^{-\gamma}=\alpha^{-\gamma}cx^{-\gamma}=dp(x)$$

- In other words, the function p(x) "looks the same" at any scale it is just multiplied by a different constant
- We can get power law scaling from many sources; a key source is dimensional structure
- Power law probability distributions have "long tails" compared to e.g. an exponential or normal

### The Signature of a Power Law

- Plotting a power law function on a log-log plot will yield a straight line
- Cf:  $p(x)=cx^{-\gamma}=>\log p(x)=c-\gamma\log x$
- This relates to the fact that the impact of scaling (scaling) is always the identical (divides the function by the same quantity)
  - e.g. if  $\gamma$ =2, doubling x always divides p(x) by 4 (no matter what x is!)
  - e.g. if  $\gamma=3$ , doubling x always divides p(x) by 8

# Observation: Great Heterogeneity in Contact Rates



#### number of partners over a 1 year period

Source: Schneeberger et al., Scale-Free Networks and Sexually Transmitted Diseases: A Description of Observed Patterns of Sexual Contacts in Britain and Zimbabwe, Sexually Transmitted Diseases, June 2004, Volume 31, Issue 6, pp 380-387

This may significantly affect the spread of infection in the population!

# Deriving the Probability Distribution Function For Scale-Free Networks

$$\sum_{k=1}^{\infty} k^{-\gamma} \approx \int_{x=1}^{\infty} x^{-\gamma} dx = \frac{1}{-\gamma + 1} x^{-\gamma + 1} \Big|_{1}^{\infty} = \frac{1}{-\gamma + 1} (0 - 1) = \frac{1}{\gamma - 1}$$

• PDF is  $(\gamma - 1)x^{-\gamma}$ 

#### Mean

Mean

$$\int_{x=1}^{\infty} xp(x)dx = \int_{x=1}^{\infty} x(\gamma - 1)x^{-\gamma}dx = \int_{x=1}^{\infty} (\gamma - 1)x^{-\gamma + 1}dx = \frac{\gamma - 1}{\gamma - 2}$$

Variance

$$\int_{x=1}^{\infty} x^2 p(x) dx = \int_{x=1}^{\infty} x^2 (\gamma - 1) x^{-\gamma} dx = (\gamma - 1) \int_{x=1}^{\infty} x^{-\gamma + 2} dx = \frac{\gamma - 1}{-\gamma + 3} x^{-\gamma + 3} \Big|_{1}^{\infty} = \frac{\gamma - 1}{\gamma - 3}$$

$$\sigma^2 = E[x^2] - E[x]^2 = \frac{\gamma - 1}{\gamma - 3} - \left(\frac{\gamma - 1}{\gamma - 2}\right)^2$$

Only valid if  $\gamma$ >3!

# Variance of Human Scale-Free Networks

- For  $\gamma$ <3, the variance of the degree distribution for an infinitely large population is infinite! (dies off too slow)
- Recall:

$$R_0 = \beta cD = \beta \frac{E[j^2]}{E[j]}D = \beta \left(m + \frac{\sigma^2}{m}\right)D$$

- Implications
  - For a Poisson network,  $\sigma^2$ =m and c barely increases
  - For a scale free network with a sufficiently large population,  $R_0$  will always be >1!
    - The disease will not die out, even if most people have low # partners!