

# Mask Effect: Exploring methods to reduce COVID-19 spread

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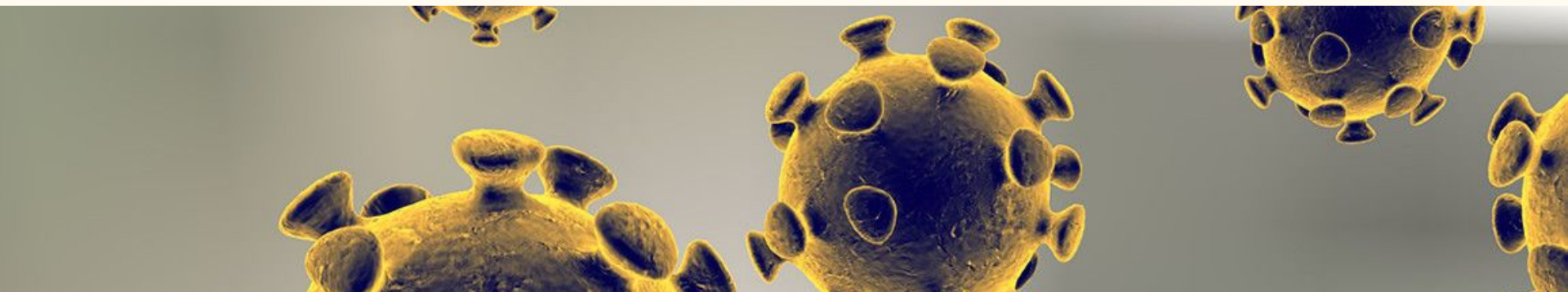
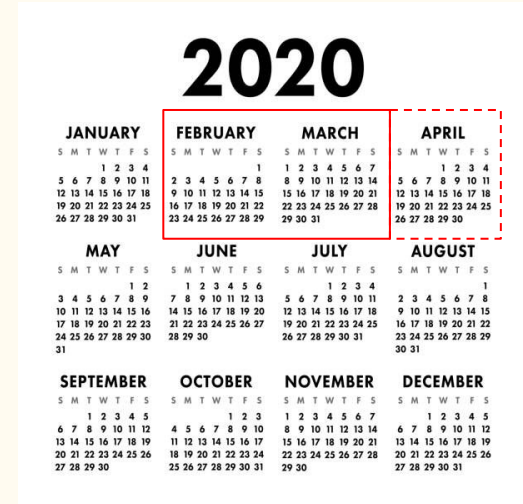
# Background

## Significant Dates:

March 11: WHO declares pandemic

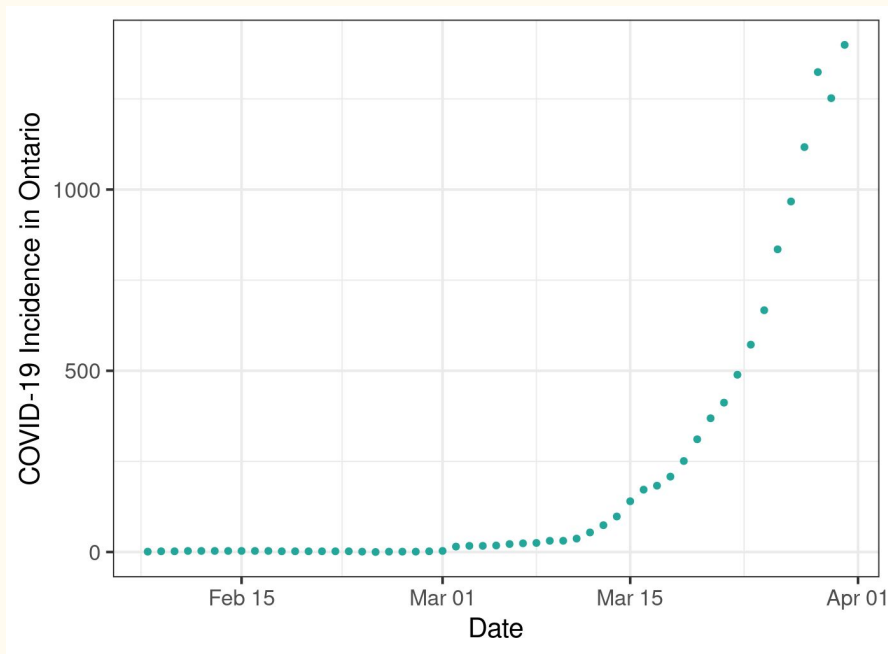
March 17: Ontario lockdown begins

\*Role of masks = inexpensive protective method

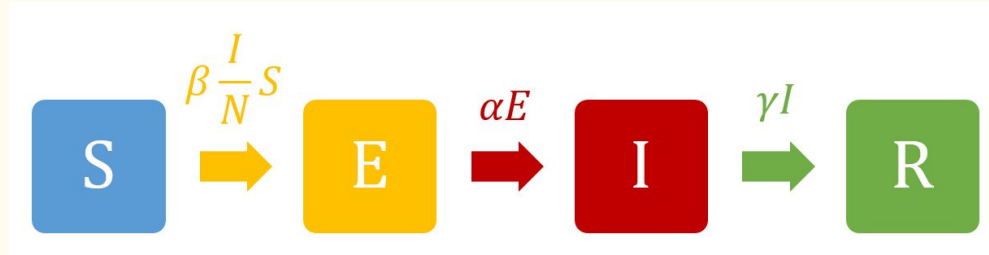


# Objectives

1. Fit a model to represent COVID-19 transmission in Ontario up to March 31, 2020
2. Forecast COVID-19 incidence from April 1-30, 2020
3. Quantify the impact of a potential mask mandate on COVID-19 incidence



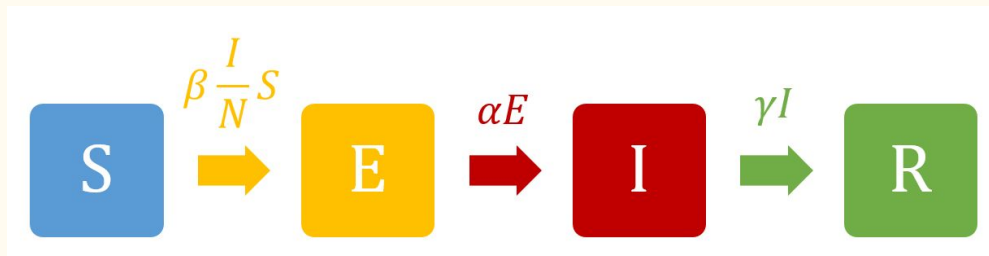
# Model Overview and Parameter Definitions



## Key Parameters

- Average rate that infectious individuals infect susceptible individuals (effective contact rate;  $\beta$ )
- Average length of time in exposed compartment (latency period;  $1/\alpha$ )
- Average length of time in infectious compartment ( $1/\gamma$ )

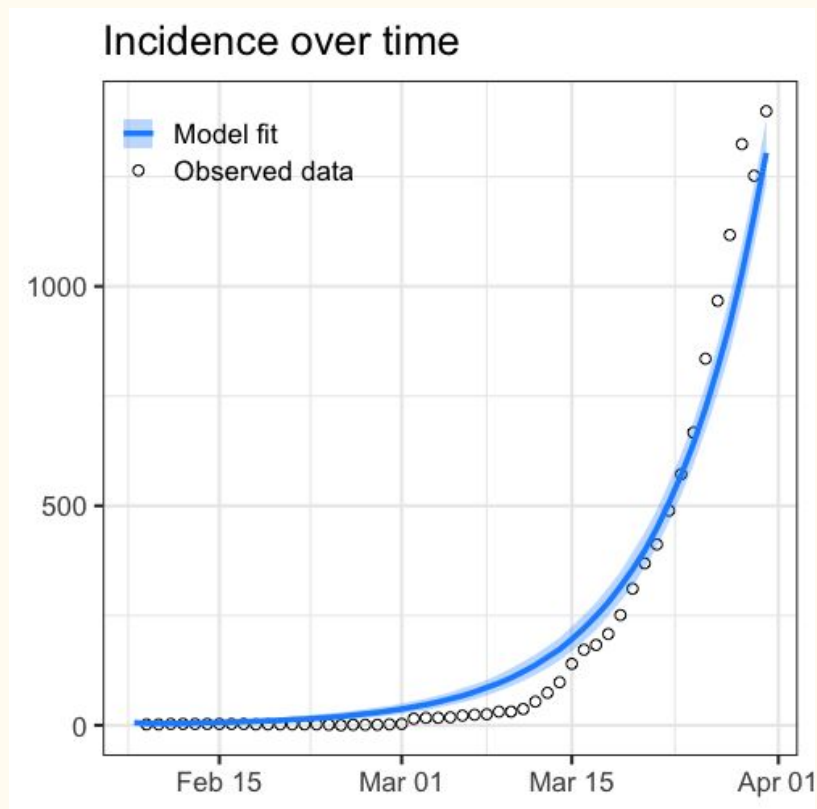
# Model Parameterization



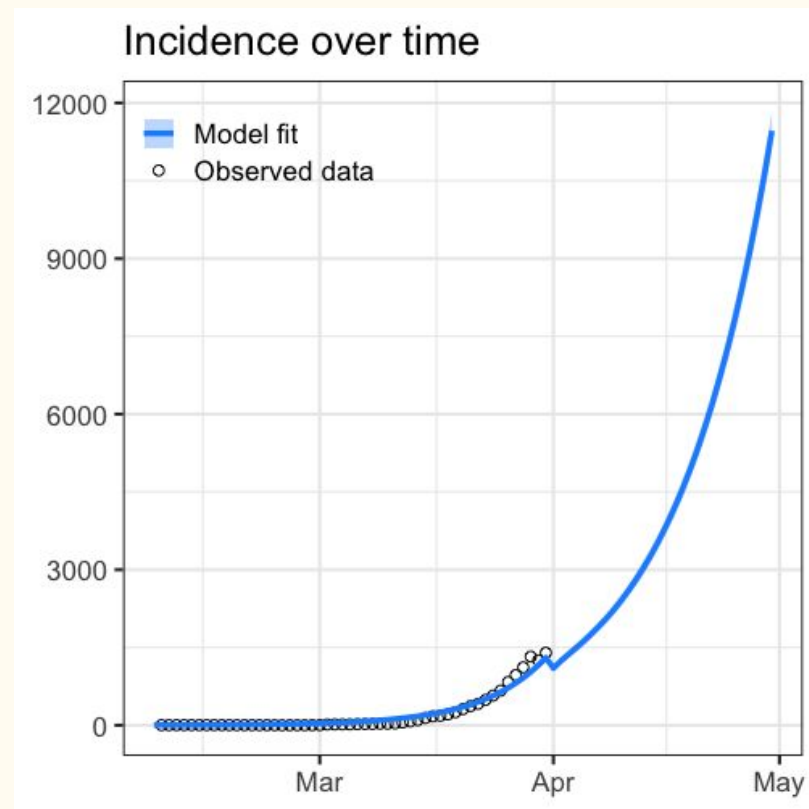
## Key Parameters

- Population: 14.8 million
- Effective contact rate ( $\beta$ ): 0.575  $\rightarrow$  Calculated from  $R_0 = \beta/\gamma$ , with  $R_0 = 2.3$
- Latency period ( $1/\alpha$ ): 5 days  $\rightarrow$  Incubation period = 5 days (no asymptomatic transmission)
- Time to recovery ( $1/\gamma$ ): 4 days  $\rightarrow$  Assumption, time from infectiousness to PCR test results & isolation

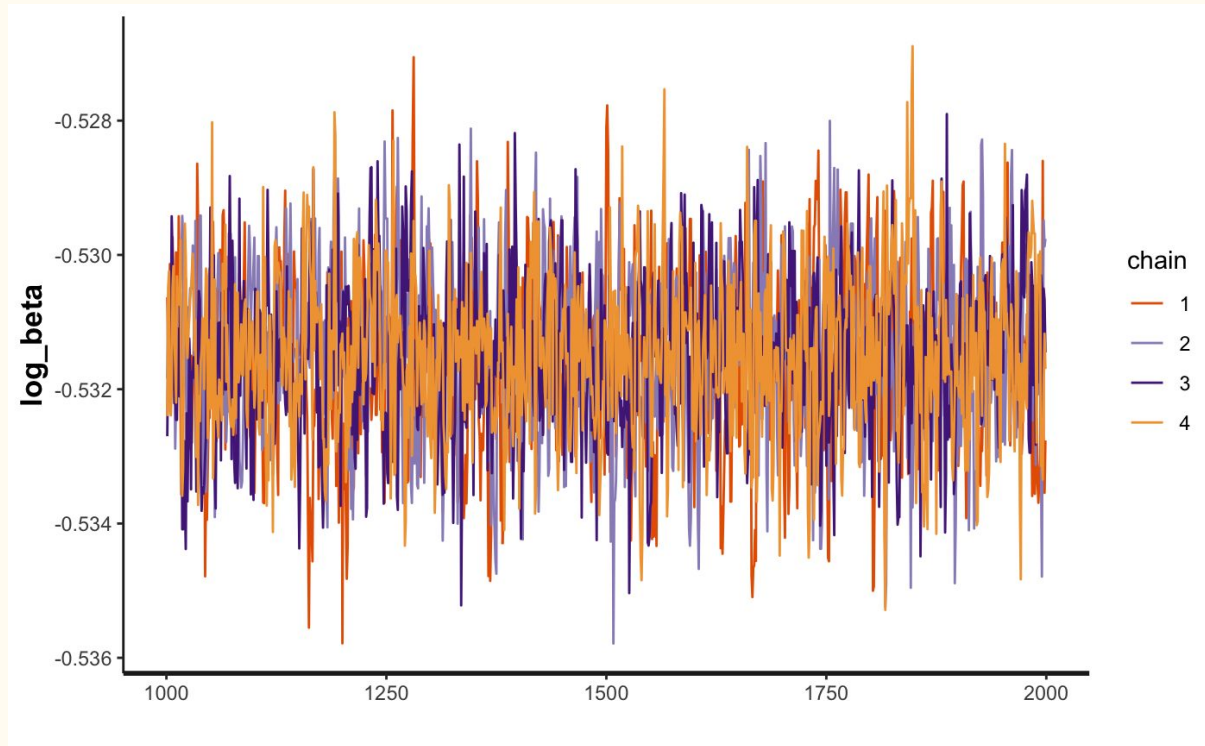
- Fit:



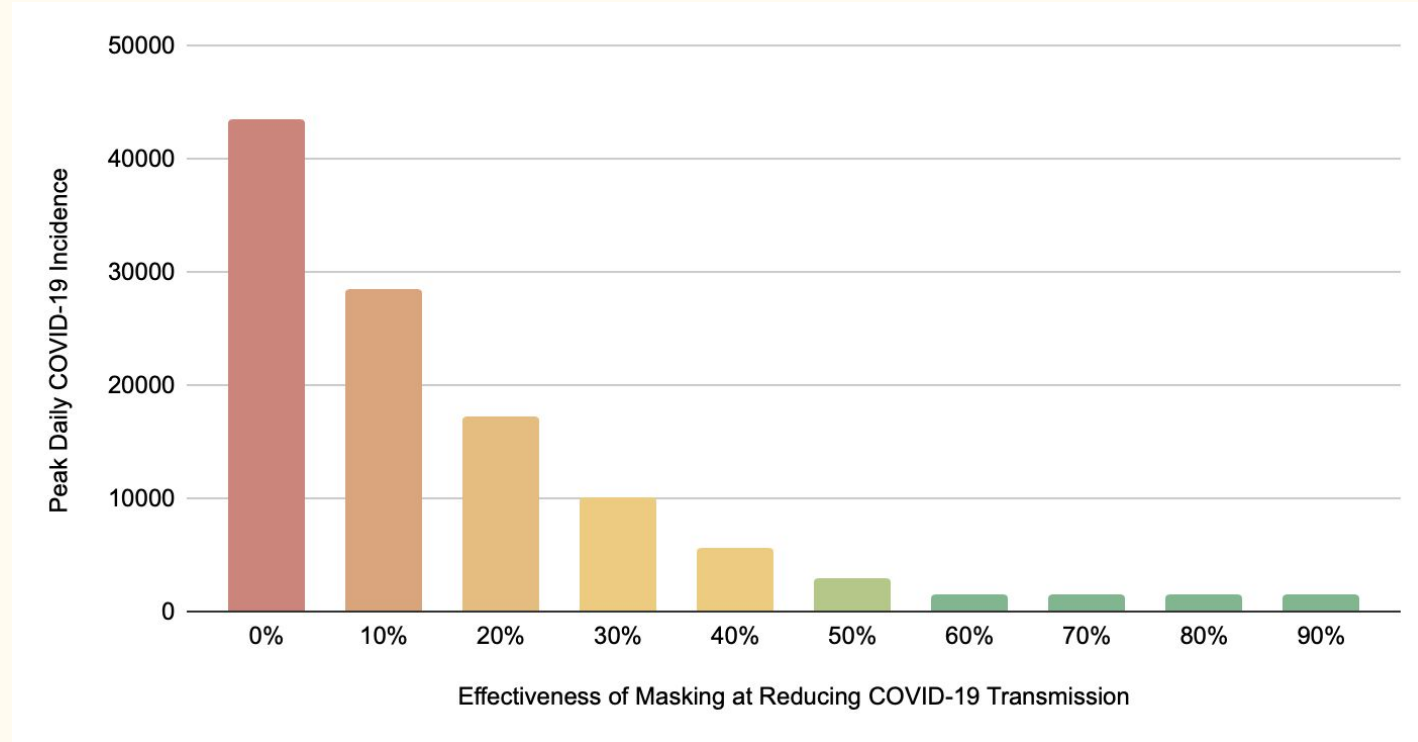
- Forecast:



# Model Diagnostics - Traceplot

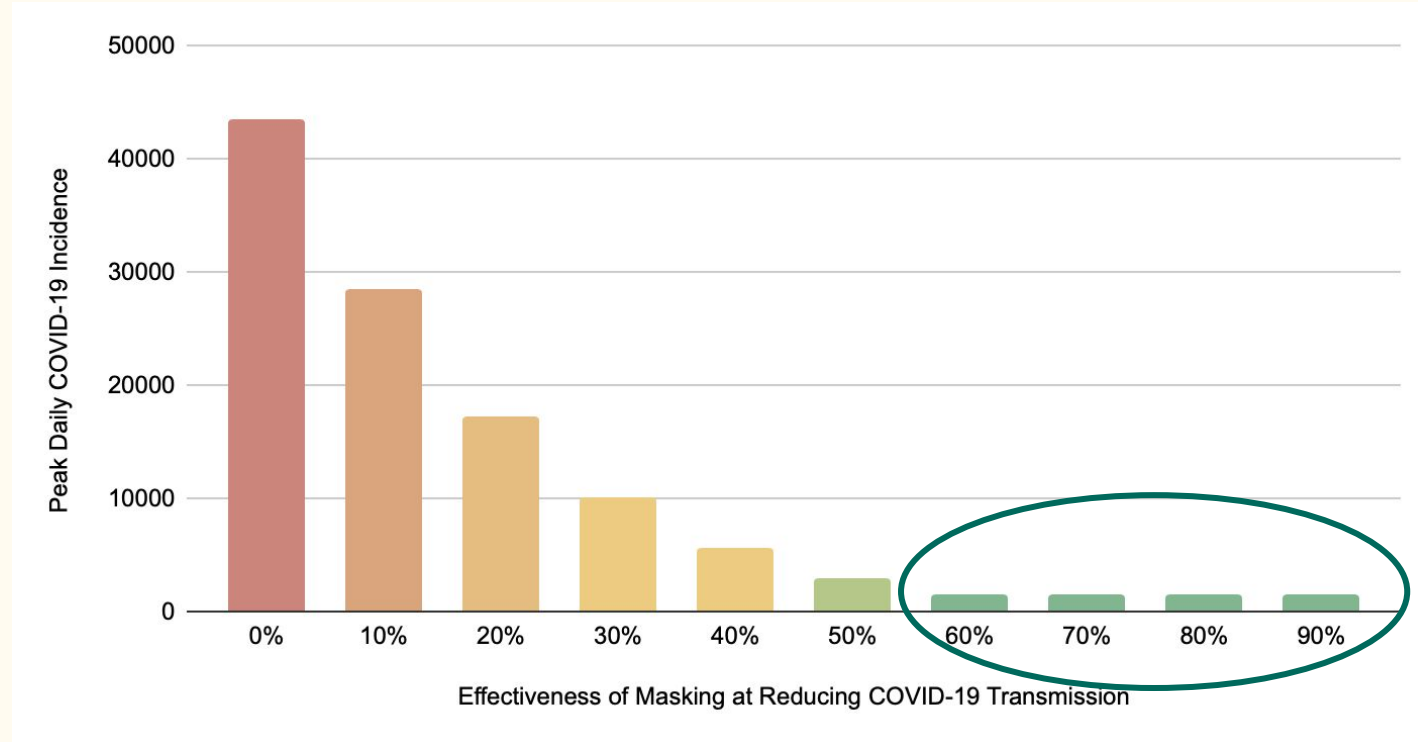


# Masking Decreases COVID-19 Incidence





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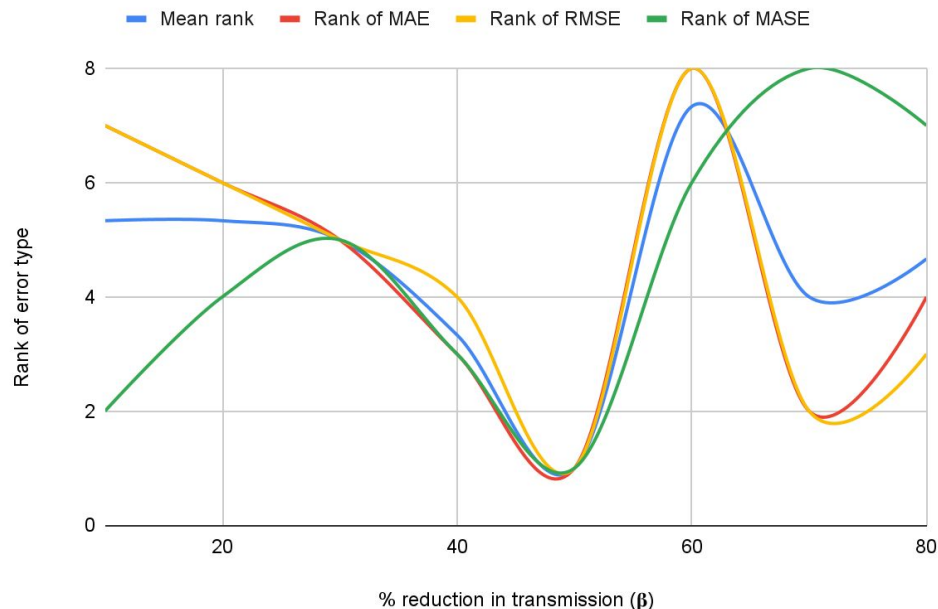
# What actually happened during early April 2020?

Using data from April 1-15, 2020, we tested our model, incorporating a reduction in our **transmission parameter,  $\beta$** .

We found that masking (and other public health measures) reduced  $\beta$  by 50%.

How do we know this? The model with a 50% reduction in  $\beta$  had the least error when tested against out-of-sample data from early April 2020.

A 50% reduction in transmission ( $\beta$ ) is the most accurate match to early April conditions



# Recommendations

- Apply what we learned to make better informed decisions
- Goal: lower hospitalizations, reduce spread
- Invest more time/energy on (inexpensive) effective protective methods
- Consider different stakeholders in future models
- Improved confidence in model with other data



Thank you!

Questions?

# Appendix: Validation - April 2020

How do we measure **error**?

Mean absolute **error** (**MAE**)

Root mean squared **error** (**RMSE**)

Mean absolute scaled **error** (**MASE**):

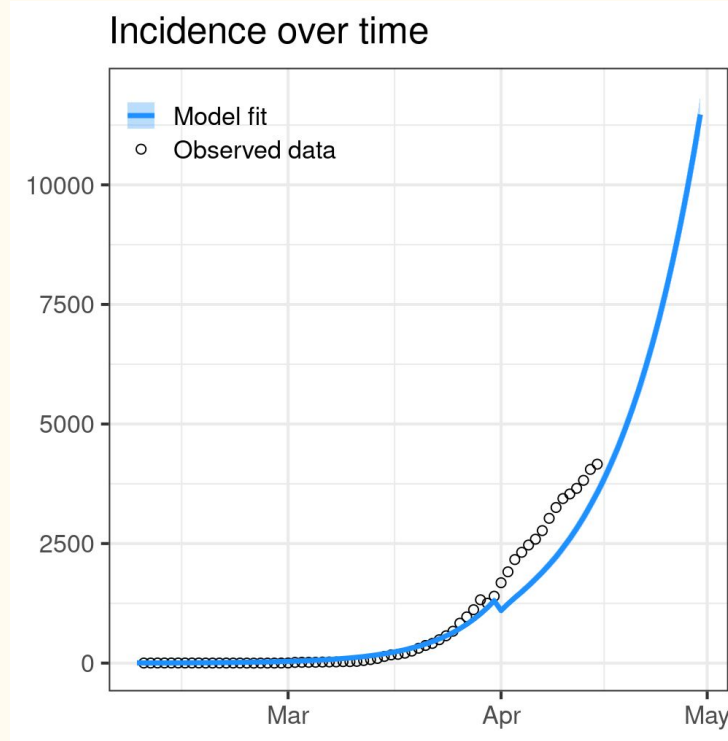
allows comparisons between time series of different absolute values.

Mean absolute error scaled by the variation in the observed data.

$$Q = \frac{1}{N-1} \sum_{j=2}^N |y_j - y_{j-1}|.$$

$$\text{MASE} = \text{mean}(|q_j|) = \text{MAE}/Q.$$

# Initial Forecast Does Not (Perfectly) Predict the Validation Data



# Refined forecasts do alright!

