# TEAM LOS ANGELES - EPIDEMIC REPORT

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#### Abstract

So, we're making a big leap here by using LATEX to prepare the report on our study. We're keeping it as scientific and realistic as our inexperienced selves can; plus we're making a point to mention 'every' assumption made and source referred for our data. To say that this was a difficult project would be to put it lightly. I can speak on behalf of our team when I say we've abused Sanju for this xD. Notwithstanding, it was an immense learning experience and we can proudly call ourselves COVID-19 experts by now. I hope you enjoy our work:)

#### 1 Breaking it Into Parts

As far as we could see it, the assignment had a few major problems that we needed to handle. Hence we decided to, you guessed it; "break it into parts"

- 1. We have to scale down the population somehow because no-one can work with a 1.34 billion sized array.
- 2. We have to correspondingly scale down the size of the nation and express it as a grid layout to enable proper 10m range condition testing without having to make assumptions
- 3. We have to distribute the grid into state-wise territories and take care to distribute the population in ratio of the state shares

4. Finally, we must run the two conditions (a) and (b) and find a fool-proof way to extract data of the top 5 most affected states and check whether the proposed travel rate limits the spread within the hospital limit.

Following this will be the detailed description of how each issue was solved, as detailed as we could possible make it; along with specific mentions of cites used and assumptions made.

## 2 SIR model and Scaling Population down

As we scratched our heads over the dilemma of our nation's insane population, hour of research provided a clear solution. The SIR epidemic model. (1) We made the assumption that at such a vast population scale of 1.34 billion, we could convert the discrete distribution to roughly a continuous distribution hence making the issue of plotting extremely simple through python. (2) As a result of this source and with a little tweaking we created a code to model a new india with the number of infected scaled down by a factor of 10; thus implying 1 infected per state and UT instead of 10; Correspondingly we found the new required population to be 100,000 instead of 1.34 billion.

```
from scipy.integrate import odeint
import matplotlib.pyplot as plt
import numpy as np

# Total population, N.
N = 100000
# Initial number of infected and recovered individuals, IO and RO.
IO, RO = 38, O
# Everyone else, SO, is susceptible to infection initially.
SO = N - IO - RO
# Contact rate, beta, and mean recovery rate, gamma, (in 1/days).
beta, gamma = 0.220558, 1./7
# A grid of time points (in days)
t = np.linspace(0, 1000, 1000)

# The SIR model differential equations.
def deriv(y, t, N, beta, gamma):
```

```
S, I, R = y
    dSdt = -beta * S * I / N
    dIdt = beta * S * I / N - gamma * I
    dRdt = gamma * I
    return dSdt, dIdt, dRdt
# Initial conditions vector
y0 = S0, I0, R0
# Integrate the SIR equations over the time grid, t.
ret = odeint(deriv, y0, t, args=(N, beta, gamma))
S, I, R = ret.T
# Plot the data on three separate curves for S(t), I(t) and R(t)
fig = plt.figure(facecolor='w')
ax = fig.add_subplot(111)
ax.plot(t, S, 'b', alpha=0.5, lw=2, label='Susceptible')
ax.plot(t, I, 'r', alpha=0.5, lw=2, label='Infected')
ax.plot(t, R, 'g', alpha=0.5, lw=2, label='Recovered with immunity')
ax.set_xlabel('Time /days')
ax.set_ylabel('Number')
ax.yaxis.set_tick_params(length=0)
ax.xaxis.set_tick_params(length=0)
ax.grid(b=True, which='major', c='w', lw=2, ls='-')
legend = ax.legend()
legend.get_frame().set_alpha(0.5)
for spine in ('top', 'right', 'bottom', 'left'):
    ax.spines[spine].set_visible(False)
plt.show()
for i in range(600):
  if(I[i]<1):
    print(i)
    break;
#to find the days needed for infection to die out
print(R[i]/N, S[i]/N)
```

```
#On rerunning code with various values of N initial,
#in order to observe population scaling down characteristics
#we observe that ratio remains unaffected (astonishing!)
#to maintain the timelines integrity,
#we can reduce population to 100,000
#provided we scale the time axis by 2
```

# 3 Scaling the Areas and Compiling Data

Thanks to our handy SIR model gimmick; we had scaled India's population down; now to scale down the area. We have decided on a grid model hence properly involving the 10m radius of infection criterion without making nasty assumptions. In order to maintain the required population densities it was reasonable to assume that area would be scaled by the same proportion as population. Okay here goes nothing. Don't judge me for the references I'm gonna cite. At the least, try not to. (3), (4)

Next came travel rates between the states; (As I'm writing this i highly doubt whether it was successfully implemented nevertheless here goes nothing) We've made an assumption here; as it turns out the influx and out-flux of populace through states is not documented anywhere! I tried "i'm feeling lucky" although i wasn't feeling lucky and still found zilch. Hence we made the assumption that state to state travel should be in ratios of flight travels. Simple solution to a complicated problem. Will the results vary from actuality? of-course? Do we care? Well we don't seem to have any choice, do we? (5) That was pretty much it on the data compiling side; we've assumed the probabilities of leaving state A and going to state B to be independent; hence implying A to B is Po(A) x Pi(B). Hope it works, fingers crossed. You should be checking our data compiled on the XL sheet about now.

### 4 Testing Out for a Single State

Grappling with the confusion of how to tackle multiple states with our limited coding assets, we decided to code for our Beloved Goa and were astonished with the results; Turns out the scarce population density and 10m infection

range was enough to curtail the spread of virus abc tremendously. We placed humans randomly on the grid the size of goa and allowed them to do their magic but the infection did not spread? (scratches heads)

Here's the code of our success(/failure?)

```
from random import *
'''legend for health status:
    0: healthy
    1: recovered
    2: dead
    3: hospitalised
    4: infected but not showing symptoms
def close_enough(s, t):
    sq = (s[0]-t[0])**2 + (s[1]-t[1])**2
    distance = sq**0.5
    if distance <= 10.0:
        return True
    else:
        return False
population = [] # a !D array of humans
x = 1250
           #x * y = total area of the state
          # it is a random distribution
y = 2000
pop = 5000 # total population
health_status = 0 # index of health status
for i in range(pop):
    a = [0, [randint(1, x), randint(1, y)], 0, 0] # each element has <math>3 \setminus \#attrib
    for m in range (1,13): #predefine day of death
        c = random()
        if c \le 0.05:
                          # probability of dying
            break
    if m<12:
        a[3]=m
```

```
elif c \le 0.05:
       a[3]=12
   population.append(a[:])
IO = sample(list(range(pop)), 10) # randomly infecting 10 people
for i in range(10):
   random_guy = population[I0[i]]
   infected = 4
   random_guy[health_status] = infected
days = 5  # choose days for simulation
while True:
   all_done = True
   for i in range(pop):
       a = population[i]
                             # this where I am checking
                               # and updating health status
       if a[health_status] > 2: # if human is sick
           all_done = False
           a[2] += 1
                                  # first, we increase the days
           if a[2] == a[3]:
               a[health_status] = 2
           elif a[2] == 5:
                                  # if sick guy is on day5, hospitalise
               a[health_status] = 3
           elif a[2] == 12: # if human survives till day7, recover
               a[health_status] = 1
   if all_done:
       break
   indices = sample(list(range(pop)), 20) # choosing 20 random moves
   for i in range(20):
       a = population[indices[i]]
                                               # movement is denoted as change
       a[1] = [randint(1, x), randint(1, y)] # in x and y coordinates
```

```
for i in range(pop-1):
                                                 # now, everybody in 10m radius of
        if population[i][0] != 4:
                                                 # sick people will get infected
            continue
        else:
            for j in range(1, pop):
                v = population[i]
                t = population[j]
                if t[health_status] == 0 and close_enough(v[1], t[1]):
                    t[health_status] = 4
    fine = 0
    deadcount = 0
    immune = 0
    sick = 0
    hospitalised = 0
    for i in range(pop):
        person = population[i]
        if person[health_status] == 2:
            deadcount += 1
        elif person[health_status] ==1:
            immune += 1
        elif person[health_status] == 0:
            fine += 1
        elif person[health_status] == 3:
            hospitalised +=1
        else:
            sick += 1
print(f"dead: {deadcount}")
print(f"immune: {immune}")
print(f"sick: {sick}")
print(f"fine: {fine}")
print(f"admitted: {hospitalised}")
print('')
```

#### References

- [1] First SIR model site, it's complicated be warned https://towardsdatascience.com/modelling-the-coronavirus-epidemic-spreading-in-a-city-with-python-babd14d82fa2
- [2] SIR code source https://scipython.com/book/chapter-8-scipy/additional-examples/ the-sir-epidemic-model/
- [3] Indian Population https://en.wikipedia.org/wiki/ List $_of_states_and_union_territories_of_India_by_population$
- [4] Indian statewise area https://en.wikipedia.org/wiki/ List $_of_s$ tates $_and_u$ nion $_t$ erritories $_of_I$ ndia $_b$ y $_a$ rea
- [5] Flight details and frequencies http://www.airindia.in/time-table.htm