# Game Theoretical Modelling and PrEP Adoption Agent Based Simulation

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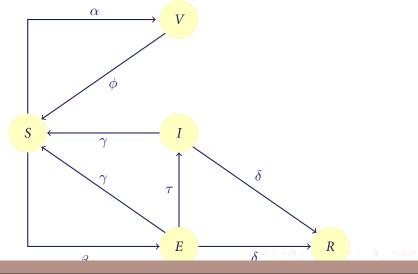
• COIVD-19 is a global epidemic outbreak.

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- Declined HIV infections (Grulich et al. 2018).

## Section 1

# Compartment Modelling

#### SIRV Model



## **Epidemic Parameters**

- $\alpha$  Adoption rate (vaccine/ treatment)
- $\beta$  Transmission rate
- $\gamma$  Recovery rate
- $\delta$  Removal rate
- $\phi$  Vaccine/ treatment wear off
- $\tau$  COVID-19 testing rate
- $R_0 = \frac{\beta}{\gamma}$  Basic reproduction rate (COVID-19:  $\sim 2.6$ )

#### Factors to COVID-19

#### Socio-economical factors:

- Social contact
- Certain jobs (e.g. health worker, essential worker)
- Age
- Gender

# Purpose of Study

#### To study:

- Prediction of pandemic upon the factors.
- Different socio-economical effects upon vaccine adoption.



## Section 2

# Methods

#### Simulation

#### Simulation:

- $N \ge 10000$
- Initial values

• 
$$\beta = 0.14$$

• 
$$\gamma = 0.02$$

• 
$$\phi = 0.000005$$

Available on Github.

## Time steps

#### Agents may

- 1 infect disease
- 2 take vaccine
- 3 recover
- 4 wear-off vaccine
- 5 take COVID-19 test

in each time step.

#### Immune Time

- Not able to reinfect after recovered some time.
- 0 days, 60 days, 180 days and 210 days tested.

- Preferential attachment (Babarasi-Albert network).
- Update: Xulvi-Brunet–Sokolov algorithm
  - Preserve degree distribution
  - Assortativity/ disassortativity rewiring
  - Rewiring probability controls assortativity/ disassortativity changes



Probability to vaccinate:

$$P_i(X) = \frac{e^{\alpha \lambda r_s}}{\sum_s e^{\alpha \lambda_i r_s}} = \frac{e^{\alpha \lambda r_s}}{e^{\alpha \lambda_i r_V} + e^{\alpha \lambda_i r_{-V}}}$$
(1)

- $\lambda$  rationality parameter
  - $oldsymbol{\lambda} 
    ightarrow 0$  random decision
  - $\lambda \to \infty$  Nash equilibrium

## **Opinion Dynamics**

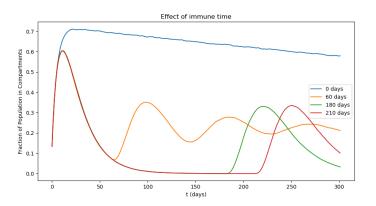
#### Local Majority Rule

- Population form local info network.
- Generate consensus based on local majority
- Personality:
  - Inflexible Position fixated
  - Balancer Contrary to group consensus

## Section 3

## Results

# **Immunity Period**





## **Immunity Period**

- Immunity period make realistic.
- 60 days produce decay oscillation.
- More than 60 days produces subsequent waves.



#### Low number of links

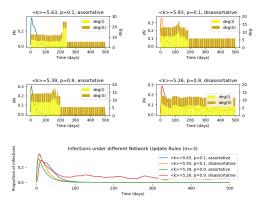


Figure: Low links and average degree



#### High number of links

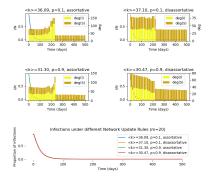


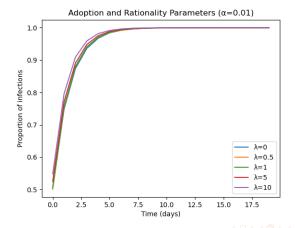
Figure: High links and average degree



#### Analysis

- · High links has higher epidemic peak.
- One peak (not always with second waves).

 $\alpha = 0.01$ 



 $\alpha = 0.8$ 

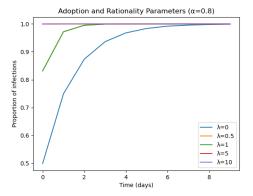


Figure: Time series

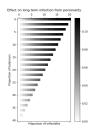


#### Analysis

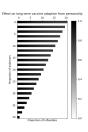
- Very quick adoption.
- Lower bound P(X) = 0.5.

## **Opinion Dynamics**

Different inflexible and balancer proportion.



(a) Effect on infection



(b) Effect on vaccination

Figure: Results of infection and vaccinated proportion at time t = 500.

#### Discussion and Conclusion

- Immune period is realistic.
- Cost of infection boosts vaccine adoption.
- Adoption rate is very fast (bounded rationality).
- Low balancer and inflexible boosts pro-vaccine proportion.



#### Critical Evaluation and Outlook

- Combination of factors.
  - Contact network and overseas travel (external infection).
  - Game theory and opinion dynamics.
- Bounded rationality has lower bound P(X) = 0.5.
- Realistic value of vaccination and infection remains unknown.