

**DRP AM-7**

# Modelling the COVID-19 Pandemic

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# Outline

## 1 Introduction

Background  
Model  
framework/equations

## 2 Results

Healthcare Burden  
Stochastic  
Compliance to mandate

## 3 Conclusions

Strengths  
Limitations  
Future works



# Background and Objective

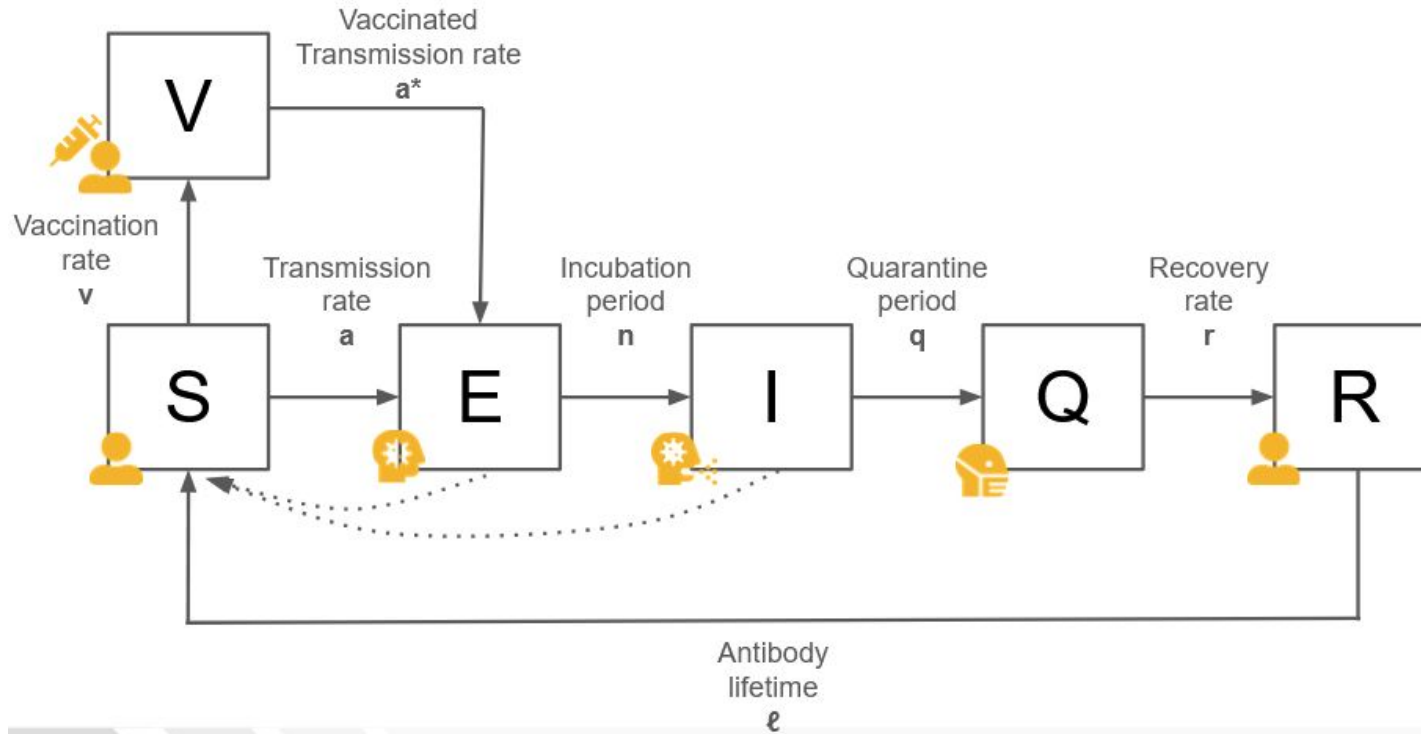
## Background:

**Global Epidemiological Pressure:** Increasing frequency of worldwide **infectious disease outbreaks** amidst global **population growth**

**Need for Advanced Frameworks:** Traditional models require robust coping mechanisms to capture complex, **real-world** transmission dynamics and healthcare burdens

**Objective:** Develop advanced **stochastic** and **agent-based** modeling frameworks to simulate real-world COVID-19 transmission, **vaccination rollouts**, and future epidemic trends for public health policy

# Deterministic Model





# Hospitalization Compartments

## Clinical Progression

Arrows Legend:

**Black** - Disease  
Progression

**Green** - Recovery

**Red** - Mortality

## Disease Progression

## Compartment Legend:

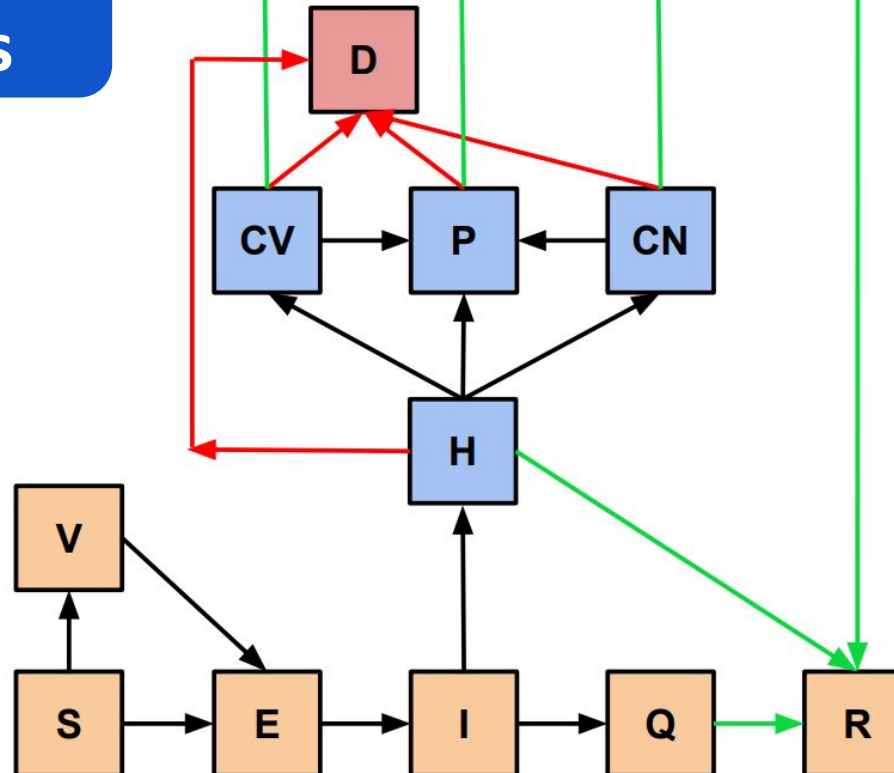
**H** → Hospital Ward

**CV** → ICU with  
Ventilator

**CN** → ICU without  
Ventilator

**P** → In-Patient  
Care

**D** → Death



# Clinical Progression Parameters

| Parameters: | Meaning:                           | Compartment Movement                |
|-------------|------------------------------------|-------------------------------------|
| $h_{eff}$   | Hospitalization Rate               | $[I] \Rightarrow [H]$               |
| $g_h, d_h$  | Hospital Discharge & Mortality     | $[H] \Rightarrow [D]    [R]$        |
| $m_v, m_n$  | ICU Admission Rates                | $[H] \Rightarrow [C_v]    [C_n]$    |
| $g_c, d_c$  | ICU Recovery and Mortality         | $[C_n][C_v] \Rightarrow [D]    [R]$ |
| $p_h, p_c$  | In-Patient Transition Rates        | $[H][C_n][C_v] \Rightarrow [P]$     |
| $g_p, d_p$  | In-Patient Discharge and Mortality | $[P] \Rightarrow [D]    [R]$        |



# ODE Structure

| Two Main Rules: | Inflow & Outflow                                    | Interactions                           |
|-----------------|-----------------------------------------------------|----------------------------------------|
|                 | Positive Terms → Inflow<br>Negative Terms → Outflow | Compartment populations are multiplied |

## Examples:

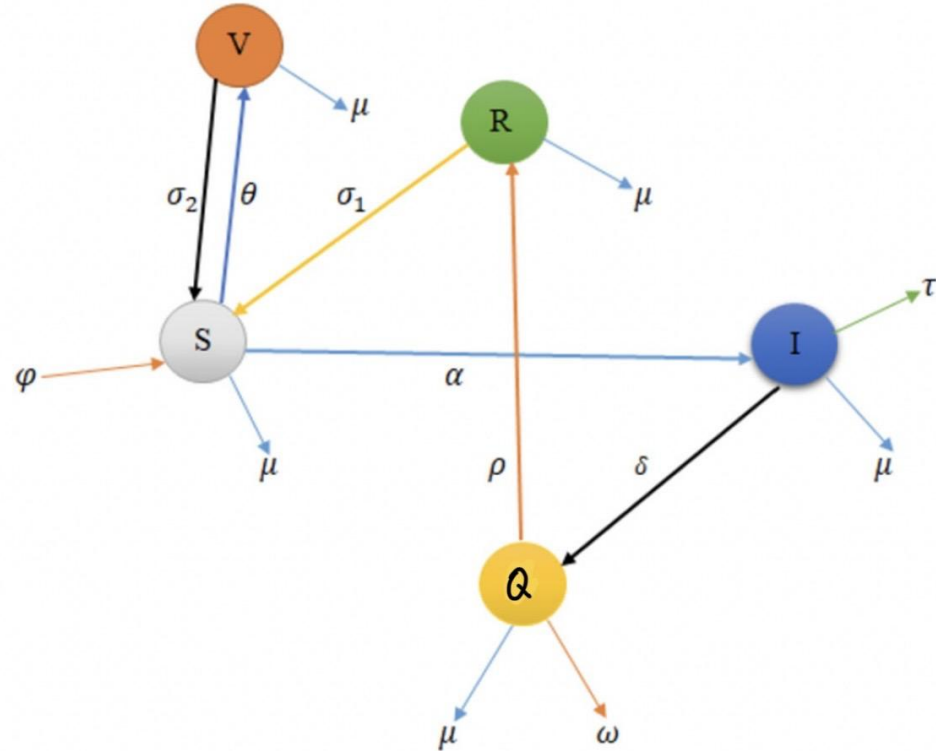
|                                          |                                                         |
|------------------------------------------|---------------------------------------------------------|
| In Patient Care Facilities:              | $\frac{dP}{dt} = p_h H + p_c (CV + CN) - (d_p + g_p) P$ |
| To Exposed From Susceptible & Vaccinated | $\frac{dE}{dt} = aSI + a^*VI - bE$                      |

# Stochastic model

## Key Differences from Original Model

**Instant Transmissibility:** Omits the exposure phase (E); individuals become infectious immediately upon contact ( $S \rightarrow I$ ).

**Direct Immunity Decay:** Individuals losing vaccine immunity return directly to the Susceptible state ( $V \rightarrow S$ ).





# Stochastic model

## Stochastic Noise & Randomness

**Standard Noise ( $Y=X+\epsilon$ ):** Adds a simple, static error term to a deterministic model

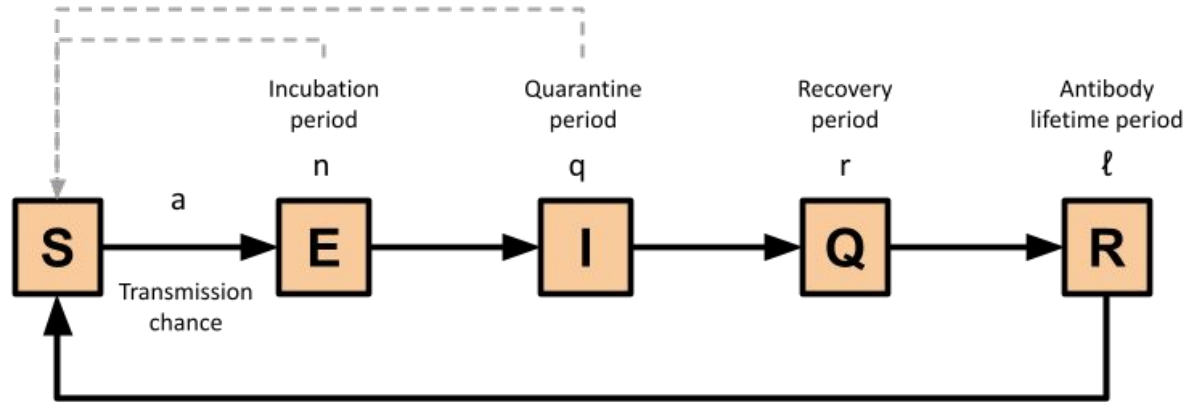
**Our Approach:** Integrates **Brownian motion** to dynamically capture real-world continuous randomness

$$\begin{cases} dS(t) = (\varphi + \sigma_1 R(t) + \sigma_2 V(t) - (\alpha I(t) + \theta + \mu)S(t)) dt + \beta_1 S(t) dB_1(t), \\ dV(t) = (\theta S(t) - (\mu + \sigma_2)V(t)) dt + \beta_2 V(t) dB_2(t), \\ dI(t) = (\alpha S(t)I(t) - (\mu + \delta + \tau)I(t)) dt + \beta_3 I(t) dB_3(t), \\ dT(t) = (\delta I(t) - (\mu + \rho + \omega)T(t)) dt + \beta_4 T(t) dB_4(t), \\ dR(t) = (\rho T(t) - (\mu + \sigma_1)R(t)) dt + \beta_5 R(t) dB_5(t), \end{cases}$$

$$\Delta W_i = \sqrt{\Delta t} Z_{i+1} \iff dW1 = \text{sqrt}(\text{dt}) * \text{randn}();$$

# Agent based model (ABM)

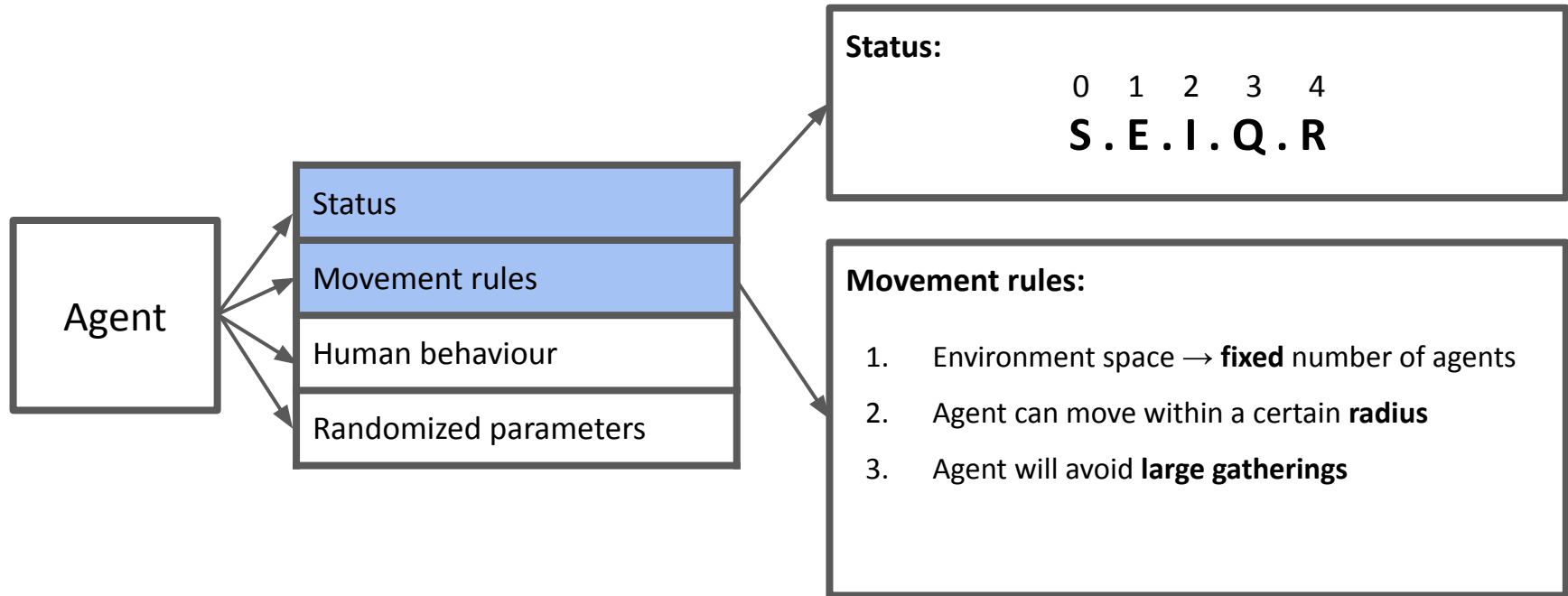
**Highlight:** Each agent acts independently and have randomized interactions with other agents.



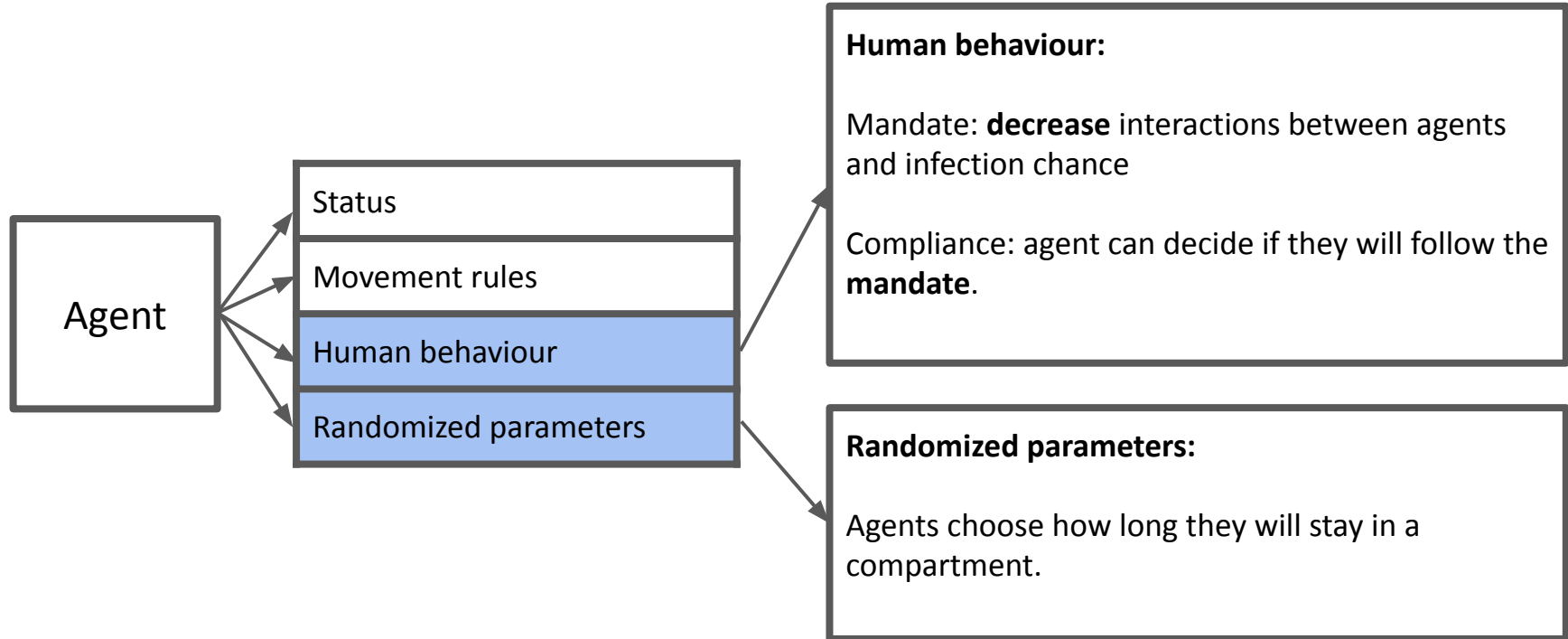
| Parameter | Meaning                  | Value      |
|-----------|--------------------------|------------|
| $a$       | Transmission chance      | 33%        |
| $n$       | Incubation period        | 2-7 days   |
| $q$       | Quarantine period        | 0-14 days  |
| $r$       | Recovery period          | 10-14 days |
| $\ell$    | Antibody lifetime period | 80-90 days |



# Attributes of an agent



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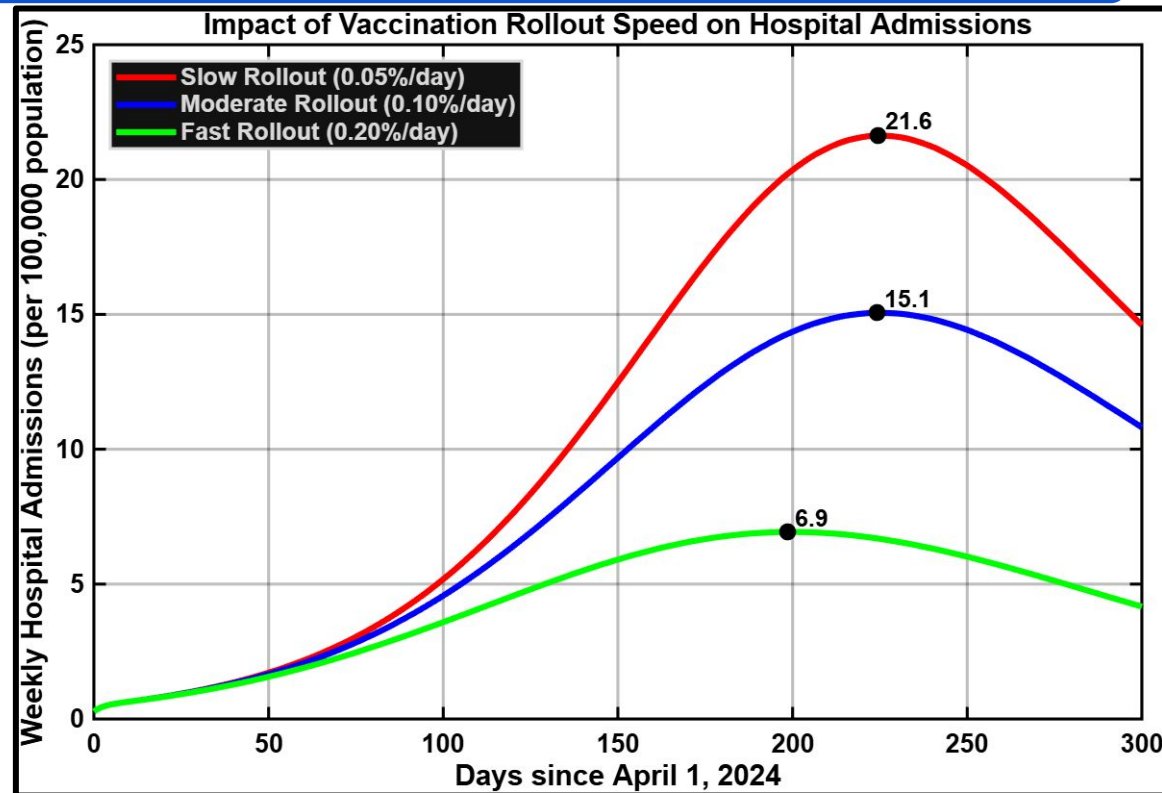


# Results

# Daily Vaccination Rate on Hospital Admissions

## Parameter → $vr$

- Daily Vaccination Rate
- **Slow rollout:** 0.05% of population/day
- **Moderate rollout:** 0.10% of population/day
- **Fast rollout:** 0.20% of population/day



# Model Vs Real World Data

## Data Source

CDC COVID-NET  
Weekly Hospital Admission  
Rates

## Study Period

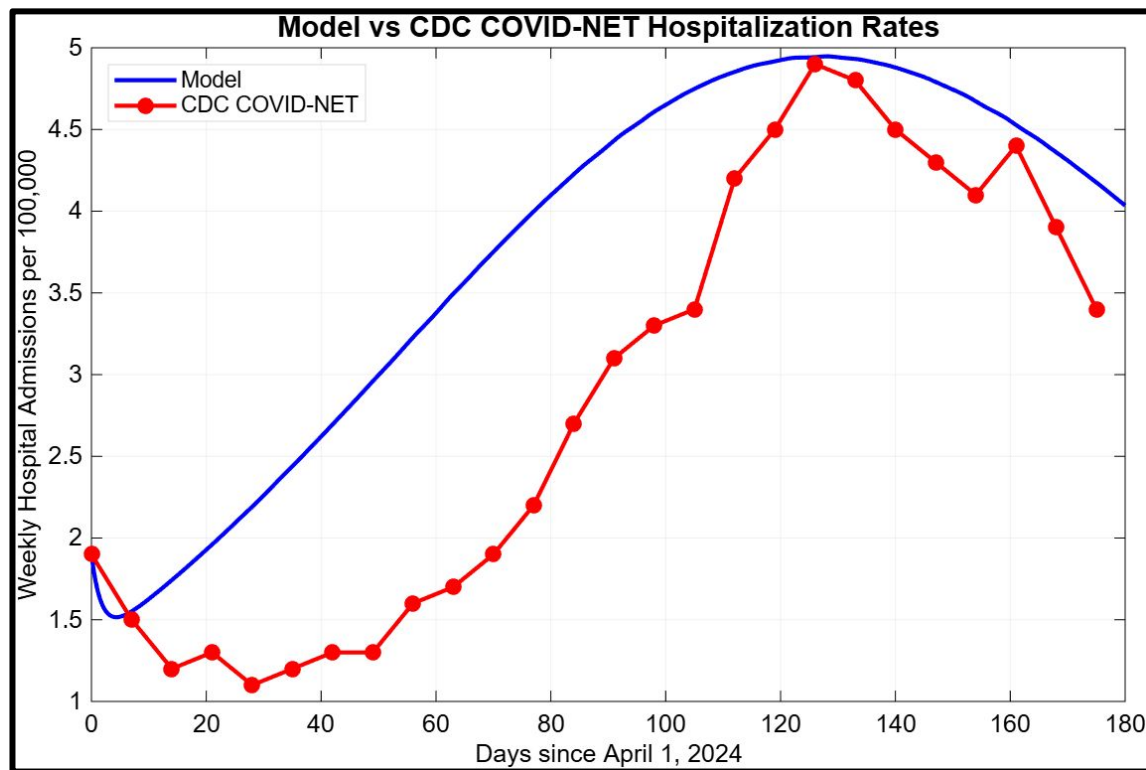
April 2024 – September 2024

## Model Performance

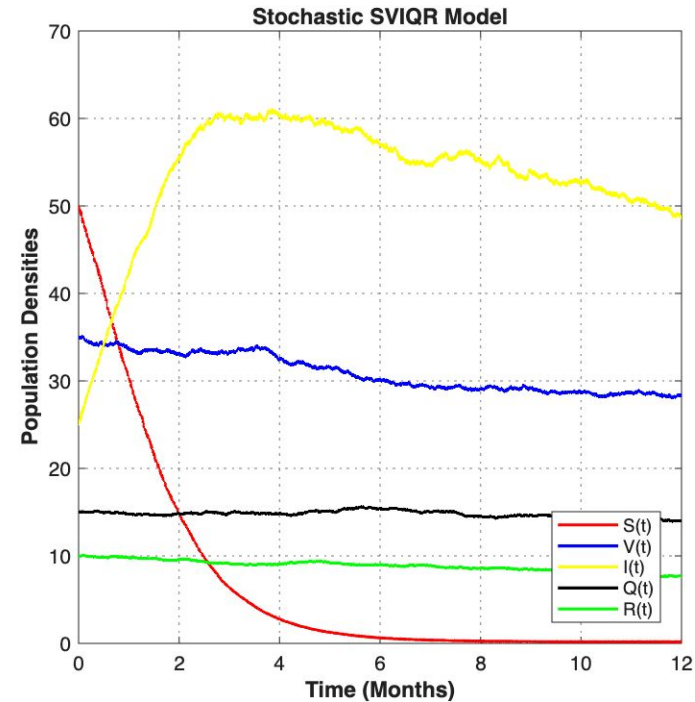
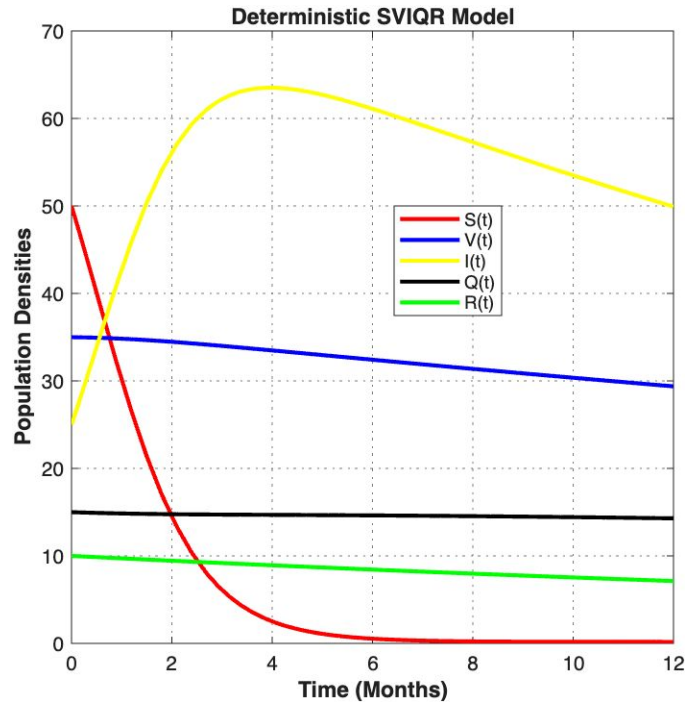
RMSE = 1.08

## Key Finding

- Captures the **overall hospitalization trend**
- Peak timing closely matches CDC observations



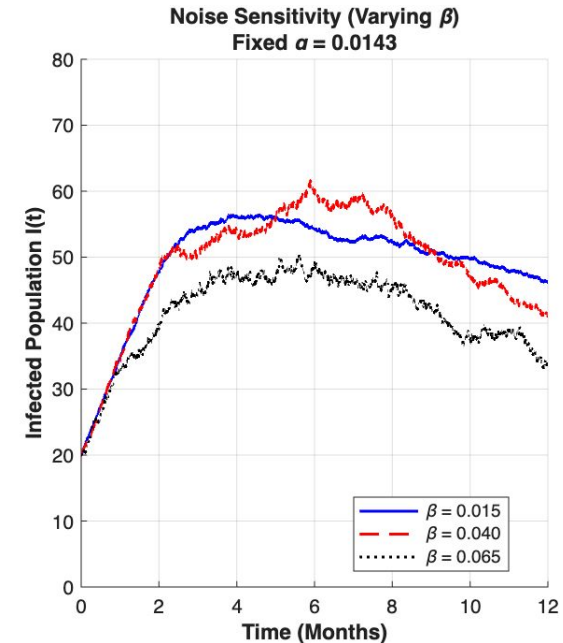
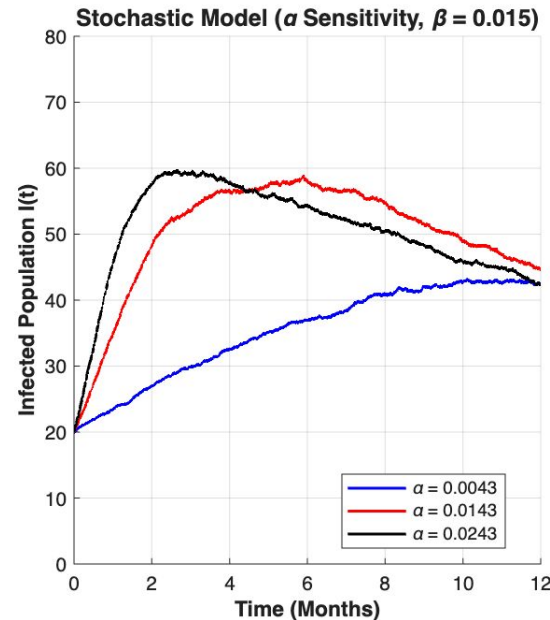
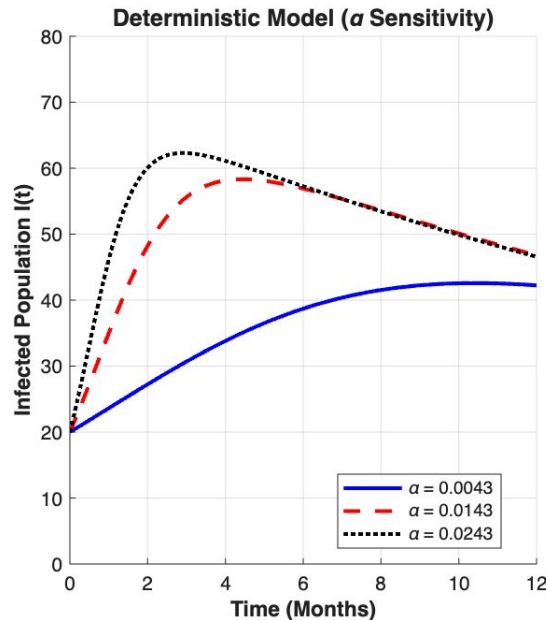
# Deterministic & Stochastic SVIQR Models





# Parameters Tuning: Deterministic vs. Stochastic models

**Transmission Rate ( $\alpha$ ):** Controls the rate at which individuals move from **Susceptible (S)** to **Infected (I)**



# Models vs. Real World Data

## Data Source:

Public Health Agency of Canada (PHAC) COVID-19 Dataset (.csv)

## Key Variables:

Weekly deaths (numdeaths\_last7) over time (Jan 1, 2022 – Dec 31, 2022); Weekly Infected Cases (numtotal\_last7) over time (Sep 1 2020 - Aug 30 2021)

## Model Alignment:

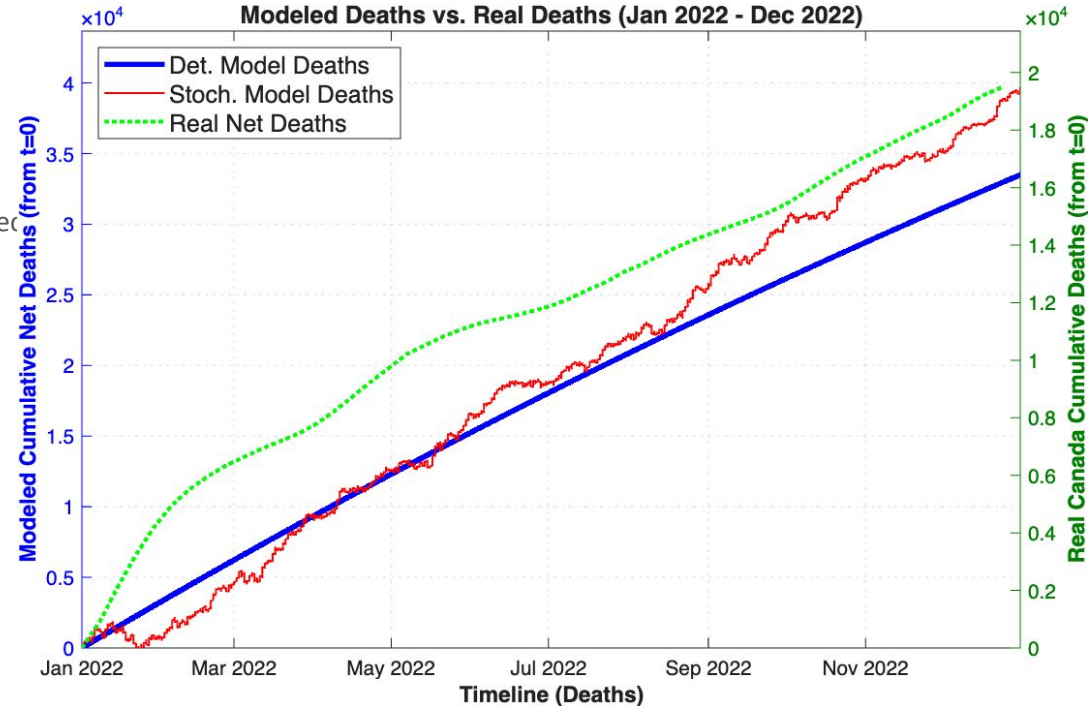
Evaluated over a 12-month simulation window

## Cumulative Net Deaths Formula:

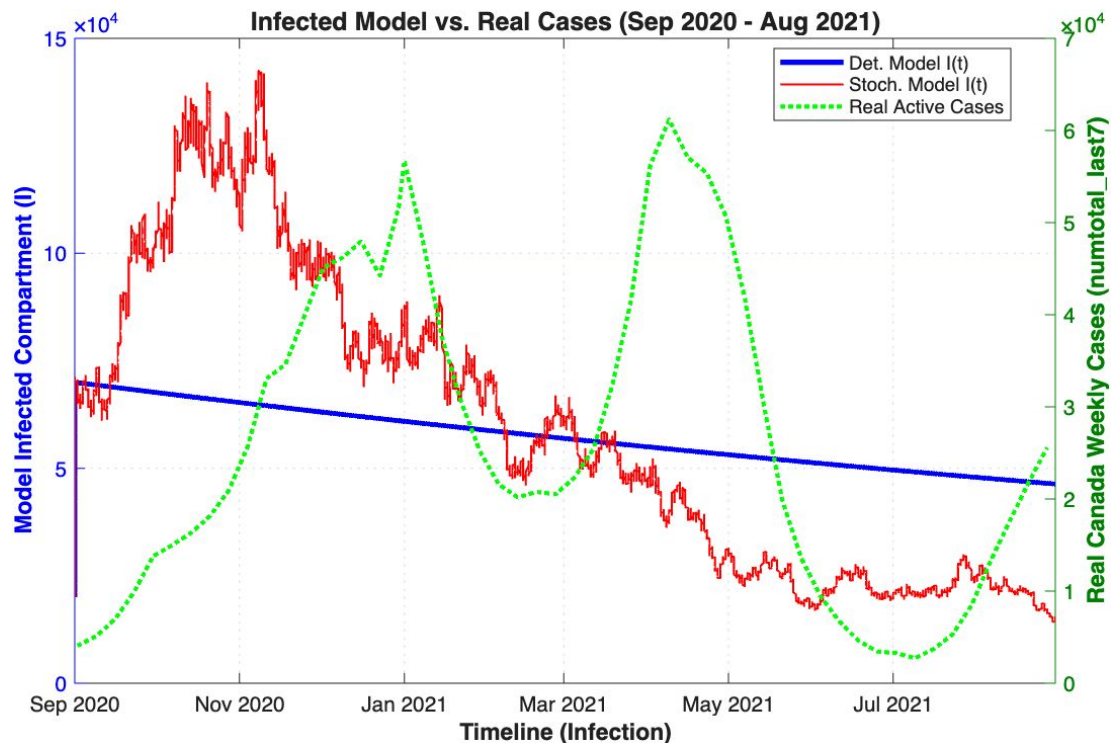
$$D(t) = N_0 - \sum Y(t)$$

Where  $N_0$  is the initial population and

$\sum Y(t)$  is the total living population.



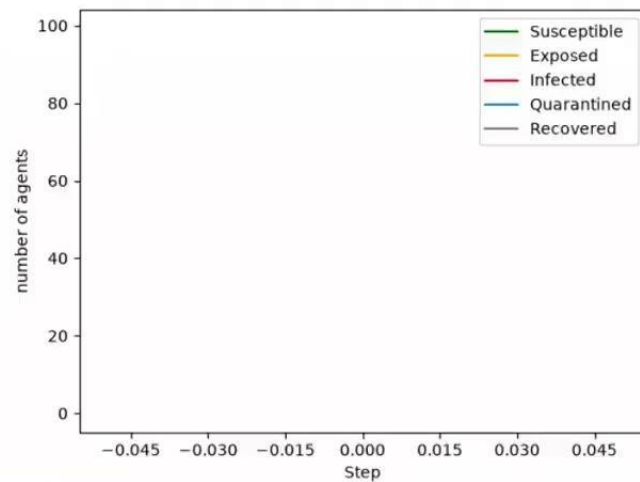
# Models vs. Real World Data



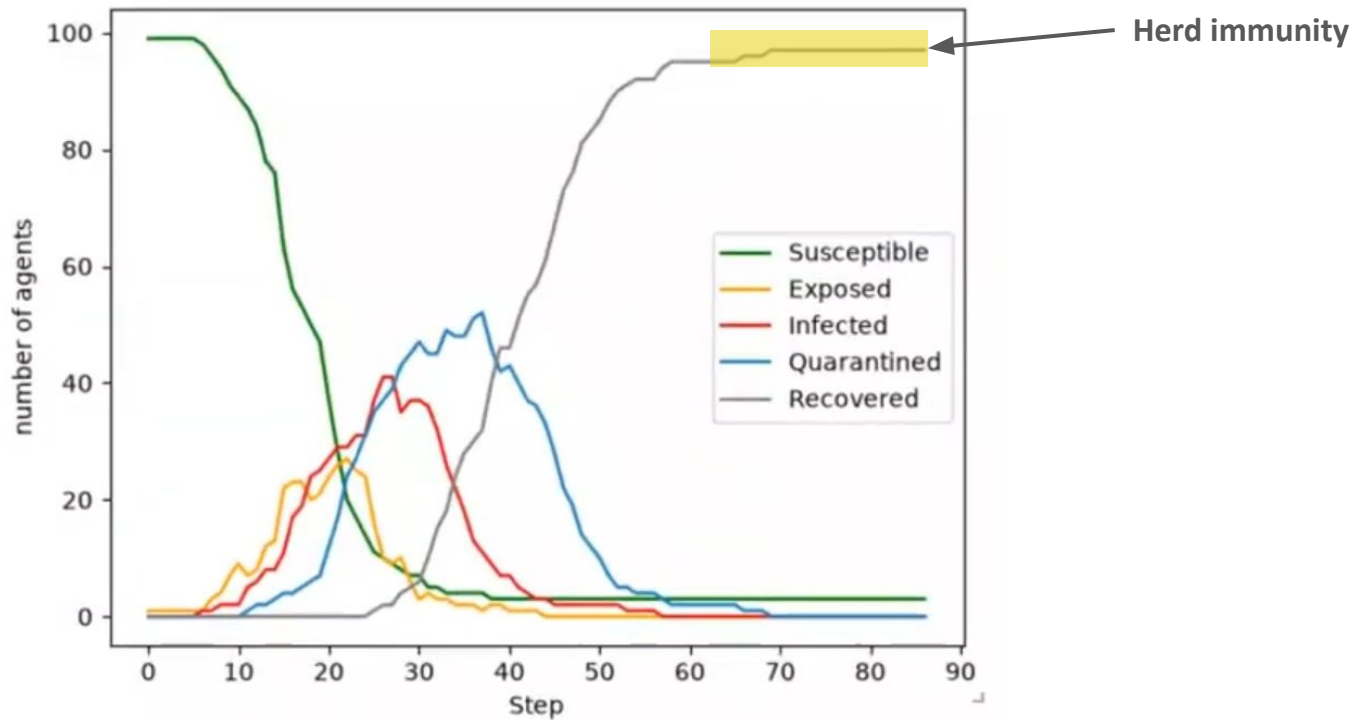
# Sample ABM simulation



Day 0

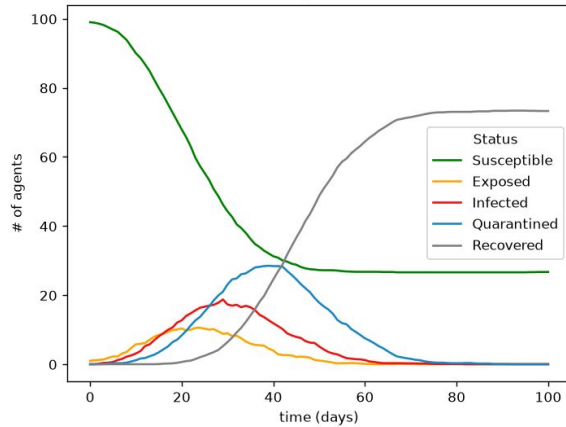


# Observations

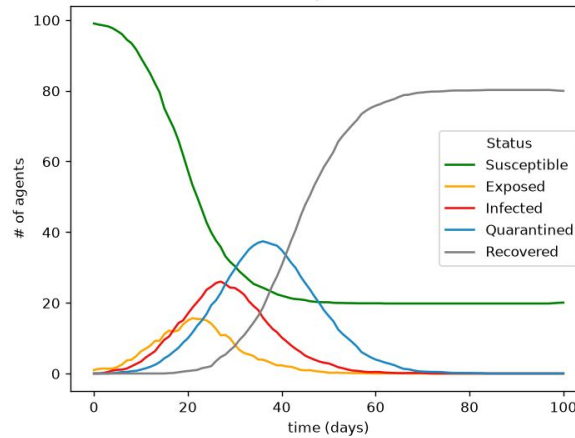


# Effects of compliancy

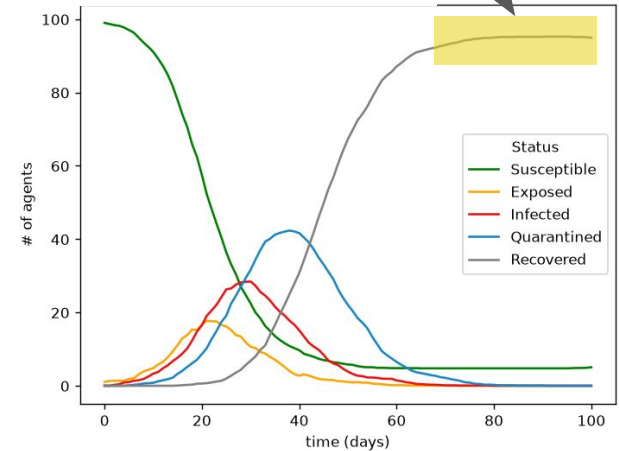
\*the graphed results are the mean of 20 simulation runs



95% compliancy



75% compliancy



50% compliancy

# Conclusion



## Strengths

- Captures the natural variance in real-world data
- Considers the effects of preventive measures & healthcare systems on COVID





# Limitations

- Linear ODE Constraints
- Coupled system
- Absence of Age variable
- Small-Population Constraints

## Future work

- Introduction of health-based **variables** (Age, seasonal, etc...)
- **Combine** the stochastic and the hospitalization compartments
- **Comparison** with agent base model

Thank you!

**Questions?**