

Dynamics

Analysis of complex interconnected data







Outline

- Graphs and Time
- Diffusion Processes
 - Modelling Epidemics as Spreads
 - Contact Graphs Data Sources
 - Mobility Data and Population Dynamics
 - Classic compartment based models
 - Network-based variations
 - Covid examples: contact SEIR, flight SEIR
- Dynamic Graphs
 - Modelling Temporal Graphs
 - Dynamic network analysis: Patten example
 - Dynamic network analysis: Measure example
 - Dynamic network analysis: Module example

Slides mostly based on Introduction to network book, <u>chapter</u> 17 and <u>network science</u> chapter 6 and 10



Graphs and Time

- Diffusion Processes
 - propagates/transmits/commutes/spreads over the graph structure
- Cascading graphs
 - evolving graphs that trace propagation without a given underlying structure
- Dynamic Graphs
 - graphs that naturally change through time, nodes and edges are added/removed
- Streaming Graphs
 - Dynamic graphs that are too large to be considered at once

structure as change

structure is changing

substructure is changing



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Diffusion Processes

- Graph structure provides the routes for dynamic processes
- An entity propagates/spreads over the graph
 - disease (epidemics on contact nets) Ο
 - meme & news (social media) Ο
 - traffic (transport nets) Ο

Disease spread: infected, contagious, susceptible Similar models can be applied to understand the **flow** Information: news, rumors, or gossip Exposed, believed, credulity



Oldest and youngest

are more susceptible to "fake news": 41% of consumers ages 18-34 and 44% ages 65+ admit to falling for it.



"Old and young US adults most susceptible to fake news.

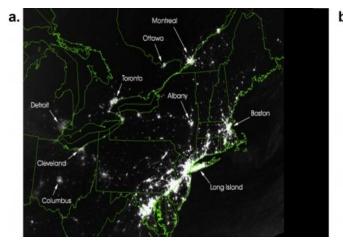
#DidYouKnow

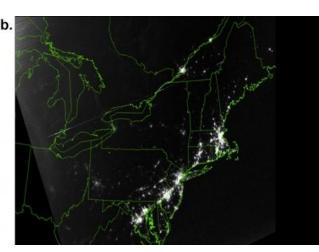


Diffusion Processes as flows

traffic (transport nets), population mobility, electricity cascading failure as a contagious behavior

Transmission line failure in power grids, can overload other edges and lead to large power outages and blackouts





Percolation and network resilience Chapter 16 of NI

2003 North American Blackout from Network Science book

Diffusion Processes example networks and agents

Phenomena	Agent	Network
Venereal Disease	Pathogens	Sexual Network
Rumor Spreading	Information, Memes	Communication Network
Diffusion of Innovations	Ideas, Knowledge	Communication Network
Computer Viruses	Malwares, Digital viruses	Internet
Mobile Phone Virus	Mobile Viruses	Social Network/Proximity Network
Bedbugs	Parasitic Insects	Hotel - Traveler Network
Malaria	Plasmodium	Mosquito - Human network



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Modelling Epidemics as Spreads



Infectious diseases spread when people come into close contact droplet, touch, airborne (same room), etc.

Close contact can be modeled as an edge in the graph One of the reasons for interest in Network Science from early on but relevant now more than ever

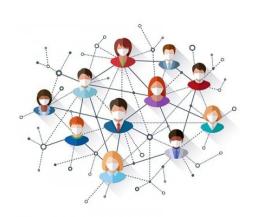
- Understand and predict the outcomes of epidemics
- Decide on interference strategies (restrictions, vaccination, etc.)

Where can we get data on how people come into contact?



Contact Graphs Data Sources

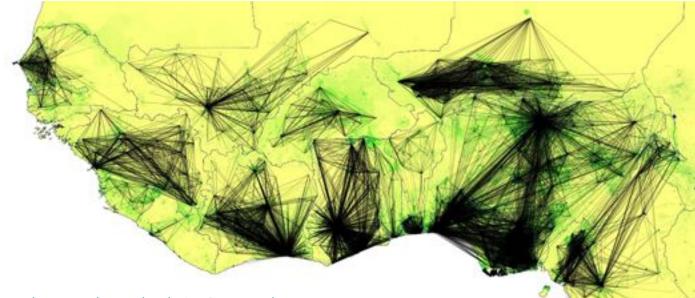
- Mobile Carriers
 - cell-phone pings to towers
- Wifi providers
 - cell-phone connections to wifi hubs
- GPS tracking apps
 - Google location history
- Rfids
 - special purpose tracking devices





Contact Graphs from Mobile Carriers: example

This model of West African regional transportation patterns was built using, among other sources, mobile-phone data for Senegal, released by the mobile carrier Orange.

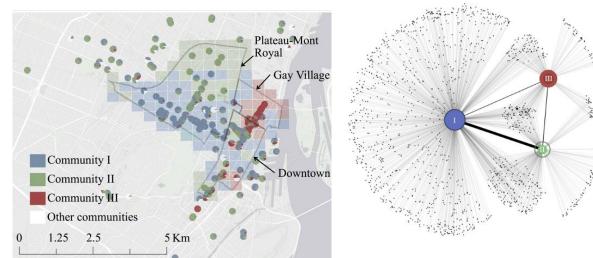


Cell-Phone Data Might Help Predict Ebola's Spread

Contact Graphs from Wifi providers: example

edges are formed between nodes (mobile phones) that are connected to the same public wifi hub at the same time

Île Sans Fil (ÎSF) is a not-for-profit organization established in 2004 in Montreal, Canada, that operates a system of public Internet hotspots. Hotspots are located in cafes, community and recreation centers, salons, markets, and other small businesses and public places.



<u>Epidemic Wave Dynamics Attributable to Urban Community Structure: A Theoretical Characterization of</u> <u>Disease Transmission in a Large Network</u>

Contact Graphs from GPS tracking: example



All android devices, enabled on most "GLH reporting disabled (as measured by a 'No' response to the question) ranged from 5.6% in Brazil to 17.5% in the UK"

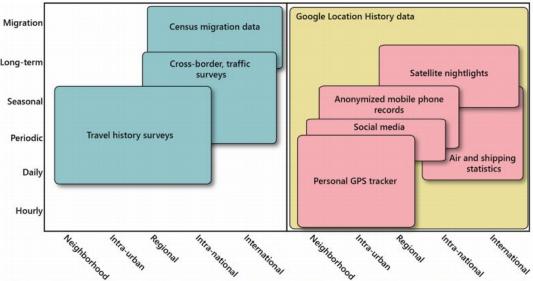


Fig. 1 The information niche that Google Location History occupies. Adapted from [9]; left includes traditional mobility data, right includes mobility data available with more recent technologies. Google Location History data (yellow) record location points similarly to GPS trackers, while spanning timescales similar to mobile phone data, and cover a breadth of time spans and spatial scales not possible in other datasets

Using Google Location History data to quantify fine-scale human mobility

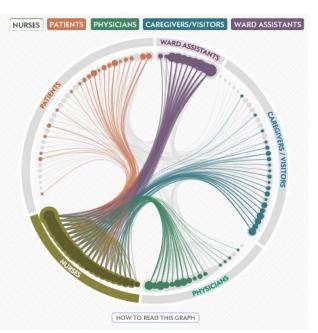
Contact Graphs from rfid: example

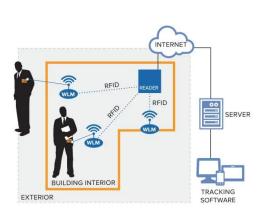
Click the labels on the right to filter the data displayed

Hospitals shouldn't make you sicker. But plenty of people acquire illnesses while hospitalized—in some countries, such so-called nosocomial infections afflict more than 10 percent of patients.

To investigate transmission pathways, European researchers of the SocioPatterns collaboration fitted 119 people in a ward of the Bambino Gesù Children's Hospital with radiofrequency identification (RFID) badges. The tags registered face-toface interactions—and the potential spreading of airborne pathogens.

Nurses interacted with the widest variety of individuals across the ward —patients, doctors, other nurses, and so on. The study indicates that nurses should take priority in strategies for preventing or controlling hospital outbreaks.





https://www.scientificamerican.com/article/graphic-science-rfids-tags-track-possible-outbreak-pathways-in-hospital/

Hospital Acquired Infections

Common & Costly (money & lives)

Yearly	Cases	Deaths
US	1.7M	200K
Canada	99K	8K



CENTERS FOR DISEASE CONTROL AND PREVENTION



"The patient in the next bed is highly infectious. Thank God for these curtains."

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Mobility Data and Population Dynamics

Beyond modelling contact between individuals, we can model between population movements that are critical in global modelling of pandemic as well as disaster response, migration statistics, etc.

- Data sources:
 - All the sources for contact graphs
 - Border crossing records
 - https://www150.statcan.gc.ca/t1/tbl1/en/cv.action?pid=2410004101
 - Flight and rail records
 - https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=2310000201
 - o Social Media
 - Use of Twitter social media activity as a proxy for human mobility to predict the spatiotemporal spread of COVID-19 at global scale

See the covid infected flights in and out of Canada: <u>https://youtu.be/FJO</u> <u>UmINAgOI</u>



Population Dynamics from phones: example

FLOWMINDER.ORG

Ouagadougou

Estimated population movements between settlements (red points, major settlements labeled). The map shows the total predicted number of trips lasting up to one week over the course of a year using a gravity model built on mobile phone call data (in this case using data from Kenya, though data from Senegal and Cote d'Ivoire produces almost identical models). In Nigeria, black lines are shown to represent where more than 30,000 trips between settlements further than 20km apart are estimated. For the remaining countries, a blue line is shown if more than 10,000 trips between locations over 20km apart are estimated.

https://covid19.flowminder.org/

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Nciamena

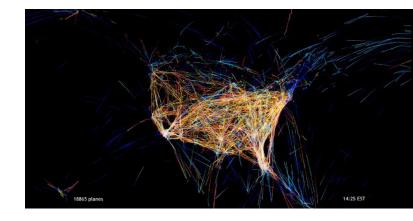
Maiduguri

data

Population Dynamics from flights: example

North American Flight Patterns: <u>https://vimeo.com/5368967</u>

Global Epidemic and Mobility (GLEAM) http://www.gleamviz.org/



captures the worldwide spread of the pandemic



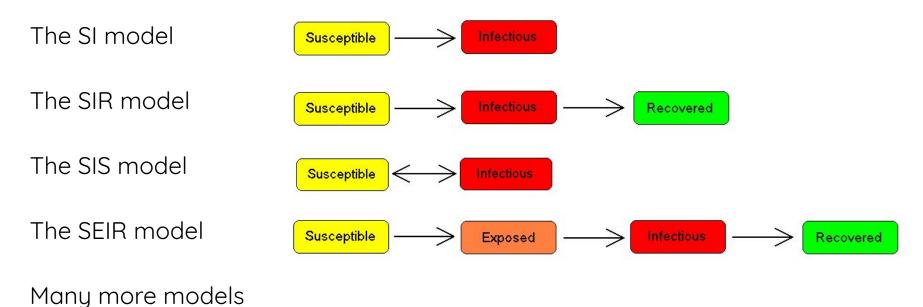
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Compartmental Models of the spread of infection

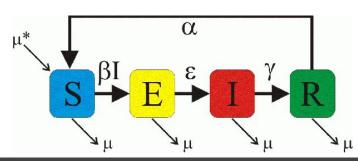
dynamics of the disease is reduced to changes between a few basic states



form <u>Wiki</u>

Compartmental Models: traditional models

- Population dynamics, mathematical modelling
- <u>Kermack-McKendrick theory</u> (1927) and <u>Reed-Frost model</u> (1928)
- Ignore the contact networks, assume people come into contact at random
- Only consider population size
 - S(t): [expected] number of susceptible individuals at time t
 - I(t): [expected] number of infected individuals at time t
 - R(t): [expected] number of recovered individuals at time t
 - E(t): [expected] number of exposed individuals at time t



$$\frac{dS(t)}{dt} = -\beta(\frac{S(t)}{P})I(t) + \alpha R(t) + \mu(P - S(t))$$
$$\frac{dI(t)}{dt} = \beta(\frac{S(t)}{P})I(t) - \gamma I(t) - \mu I(t)$$

$$\frac{dR(t)}{dt} = \gamma I(t) - \alpha R(t) - \mu R(t)$$

differential equations Solve (analytically or numerically), or simulate

<u>source</u>

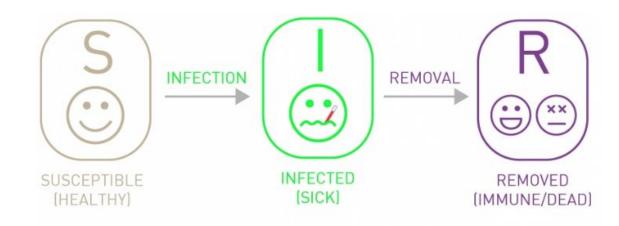
$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$

What are S, I, R?



$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$

What are S, I, R?



$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$

What are S, I, R? susceptible-infected-removed What are β and γ ?



$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$

What are S, I, R? susceptible-infected-removed What are β and γ? β: number of contacts each individual has γ: rate at which infected individuals recover (or die)

dS/dt = ?



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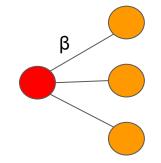
$$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$$

β: number of contacts each individual has dS/dt = ?

Probability of meeting a susceptible person at random? Given S + I + R = n (total population size)



$$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$$



β: number of contacts each individual has dS/dt = ?

Probability of meeting a susceptible person at random? S/n How many susceptible people an infected person meets?

$$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$$

β: number of contacts each individual has dS/dt = ?

Probability of meeting a susceptible person at random? S/n How many susceptible people an infected person meets? β S/n Given X infected individuals, overall average rate of new infections is?



$$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$$

β: number of contacts each individual has dS/dt = ?

Probability of meeting a susceptible person at random? S/n How many susceptible people an infected person meets? β S/n Given X infected individuals, overall average rate of new infections is? β SX/n



$$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$$

Given X infected individuals, overall average rate of new infections is? $\beta \text{SX/n}$

$$\frac{\mathrm{d}S}{\mathrm{d}t} = -\beta \frac{SX}{n} \qquad s = \frac{S}{n}, \quad x = \frac{X}{n}$$
$$s + x + r = 1$$

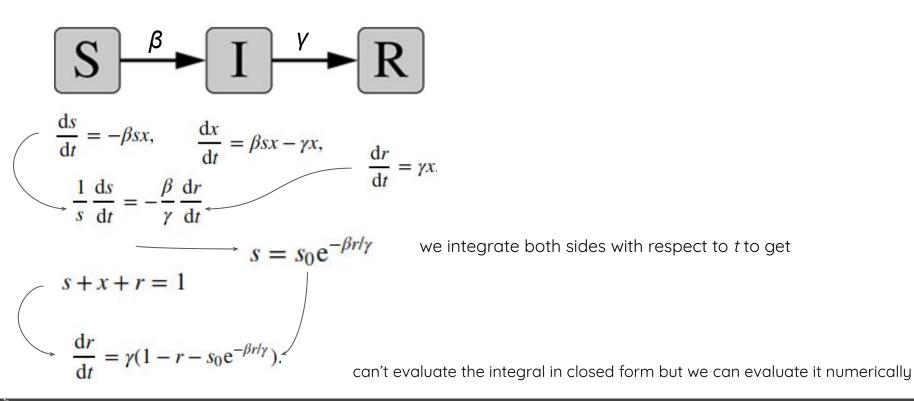
reformulating in terms of population ratios

$$\frac{\mathrm{d}s}{\mathrm{d}t} = -\beta sx,$$

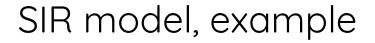
$$S \xrightarrow{\beta} I \xrightarrow{\gamma} R$$

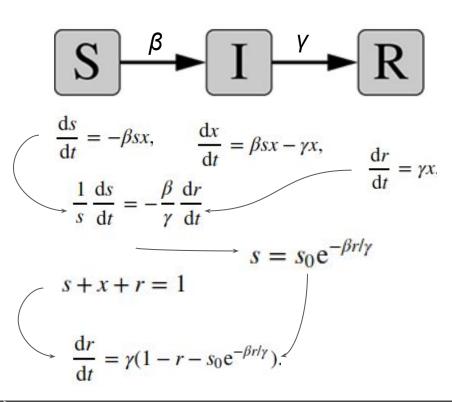
$$\frac{ds}{dt} = -\beta sx, \qquad \frac{dx}{dt} = \beta sx - \gamma x, \qquad \frac{dr}{dt} = \gamma x.$$

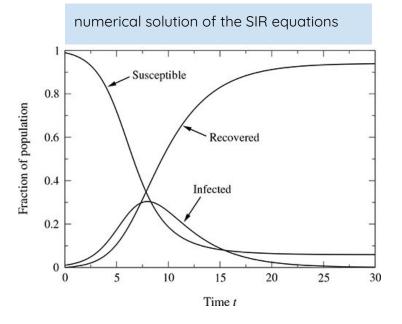
other rate of changes, derived similarly



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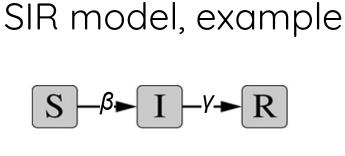


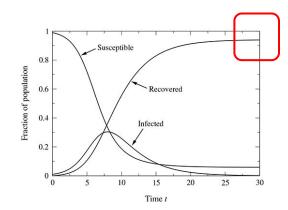




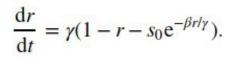
Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0 Newman's book

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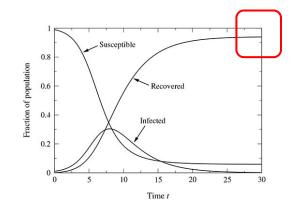
Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0



What does asymptotic value of r represent? (dr/dt = 0)



 $S \rightarrow I \rightarrow R$



Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0

$$\frac{\mathrm{d}r}{\mathrm{d}t} = \gamma (1 - r - s_0 \mathrm{e}^{-\beta r/\gamma}).$$

Asymptotic value of \mathbf{r} (dr/dt = 0):

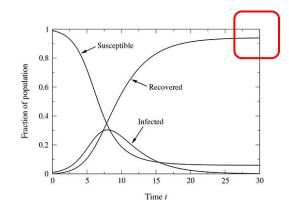
total number of individuals who ever catch the disease **total outbreak size**, final attack rate

$$r=1-\mathrm{e}^{-\beta r/\gamma}.$$



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 $S \xrightarrow{\beta} I \xrightarrow{\gamma} R$



Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0

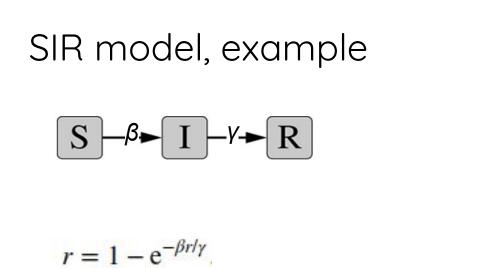
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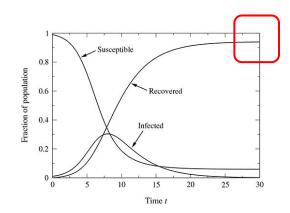
Asymptotic value of \mathbf{r} (dr/dt = 0) :

total number of individuals who ever catch the disease **total outbreak size**, final attack rate

$$r = 1 - e^{-\beta r/\gamma}$$

When do we have outbreak?





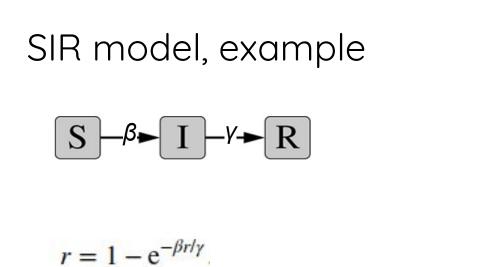
Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0 Newman's book

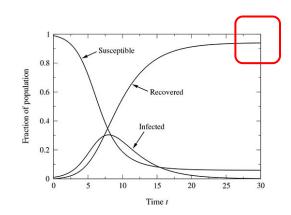
Asymptotic value of r, total outbreak size \Rightarrow epidemic threshold (β = γ)

$\beta \leq \gamma \Rightarrow$ no epidemic at all

"infected individuals recover faster than susceptible individuals become infected, so the disease cannot get a toehold in the population"







Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0 Newman's book

Asymptotic value of r, total outbreak size \Rightarrow epidemic threshold (β = γ)

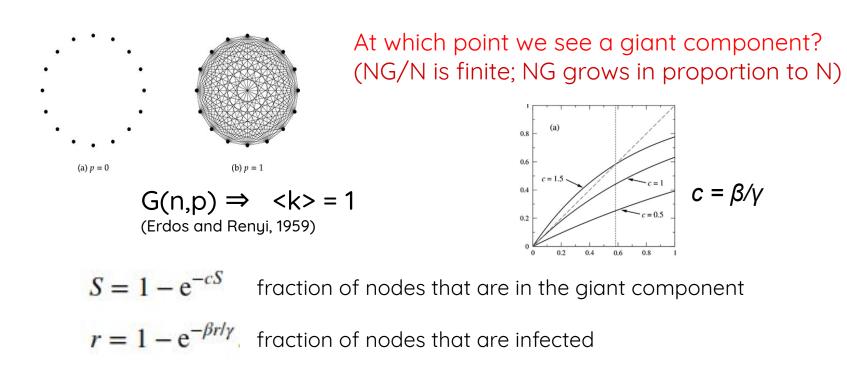
$B \leq \gamma \Rightarrow$ no epidemic at all

"infected individuals recover faster than susceptible individuals become infected, so the disease cannot get a toehold in the population"

Any relation to graphs?



Emergence of a giant component in ER graphs



probability that the individual is still infected after a total time τ is given by?

$$\lim_{\delta\tau\to 0} (1 - \gamma \delta\tau)^{\tau/\delta\tau} = e^{-\gamma\tau}$$

$$\lim_{x\to 0} (\frac{1}{x}\ln(1 - ax)) = -a$$
Steps
$$\lim_{x\to 0} (\frac{1}{x}\ln(1 - ax))$$
Simplify $\frac{1}{x}\ln(1 - ax)$: $\frac{\ln(1 - ax)}{x}$

 $\gamma \, \delta \tau$: probability of recovering in any time interval $\delta \tau$

 $\lim_{x \to 0} \left(\left(1 - ax\right)^{\frac{b}{x}} \right)$ $\lim_{x \to 0} \left(\frac{1 - ax}{x} \right)$ $\lim_{x \to 0} \left($



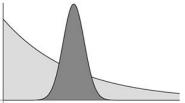
° (* 1997)

probability that the individual is still infected after a total time r is given by

$$\lim_{\delta\tau\to 0} (1-\gamma\delta\tau)^{\tau/\delta\tau} = \mathrm{e}^{-\gamma\tau}$$

probability the individual remains infected for time τ and then recovers in the interval between τ and τ +d τ

$$p(\tau)\mathrm{d}\tau = \gamma \mathrm{e}^{-\gamma\tau}\mathrm{d}\tau.$$



"an infected person is most likely to recover immediately after becoming infected, but might in theory remain in the infected state for quite a long time"



probability that the individual is still infected after a total time τ is given by

$$\lim_{\delta\tau\to 0} (1-\gamma\delta\tau)^{\tau/\delta\tau} = \mathrm{e}^{-\gamma\tau}$$

probability the individual remains infected for time τ and then recovers in the interval between τ and τ +d τ $\gamma e^{-\gamma \tau} d\tau$.

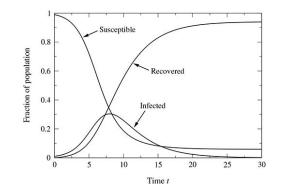
expected number of others they will have contact with during that time is $\beta \tau$

Basic reproduction number

"average number of additional people that a person passes the disease on to before they recover"

$$R_0 = \beta \gamma \int_0^\infty \tau e^{-\gamma \tau} d\tau = \frac{\beta}{\gamma} \qquad \qquad R_0 = 1 \Rightarrow \text{ epidemic threshold } (\beta = \gamma)$$

$S - \beta \rightarrow I - \gamma \rightarrow R$



Time evolution of the SIR mode β =1, γ =0.4, s₀=0.99,x₀=0.01, and r₀=0

Asymptotic value of r (dr/dt = 0) \Rightarrow epidemic threshold (β = γ)

$B \le \gamma \Rightarrow$ no epidemic at all

"infected individuals recover faster than susceptible individuals become infected, so the disease cannot get a toehold in the population"

Basic reproduction number ($R_0=1$) \Rightarrow **epidemic threshold (\beta=\gamma)**

"average number of additional people that a person passes the disease on to before they recover"

Dynamics- Quick recap

- Graphs & Time: diffusion on graph, cascade as the graph, dynamic graph, streaming graph
- Diffusion on Graphs
 - An entity that spreads/flows over the graph: disease, meme & news (social media), etc.
 - Epidemic modelling with contact graphs & between population dynamics
 - Classic compartment based models
 - Differential equations of compartment size changes (S, I, E, R)
 - Total outbreak size (asymptotic value of R) relates to the size of giant component in ER graph
 - We have an outbreak with the similar condition as having a giant component
 - Assume full mixing (= ER contact graph)

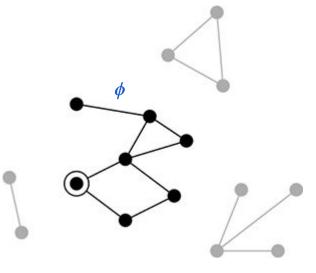
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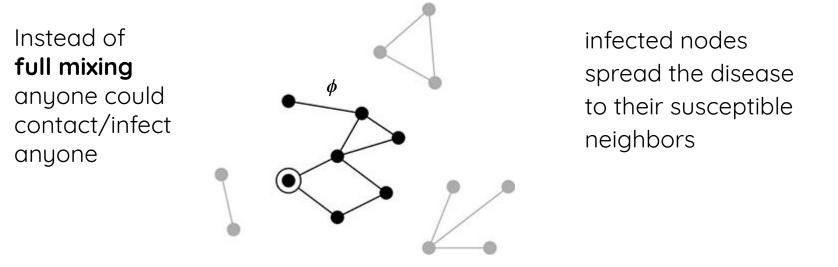
generalized to the network case considering transmission rate for edges

Instead of **full mixing** anyone could contact/infect anyone



infected nodes spread the disease to their susceptible neighbors

generalized to the network case considering transmission rate for edges

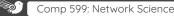


Depends on the network structure and on the position in the network of the first infected individual

an individual's probability of infection at early times is proportional to **eigenvector centrality :** higher \Rightarrow infected sooner

the position of the epidemic threshold depends on the **leading eigenvalue** of the adjacency matrix. If the leading eigenvalue is small, then the probability of infection β must be large, or the recovery rate γ small, for the disease to spread

$$\frac{\beta}{\gamma} = \frac{1}{\kappa_1}.$$



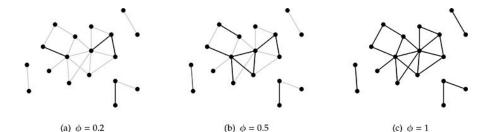
connecting outbreak sizes and percolation

SIR model, transmission probability $\phi = 1 - e^{-\beta\tau}$

Bond percolation: a fraction ϕ of edges are occupied uniformly at random represent those along which disease will be transmitted if it reaches either of the nodes at the ends of the edge

percolation transition \Rightarrow epidemic threshold

count the nodes in the appropriate percolation cluster



As **\ophi** increases, S also increases and hence both the probability and the size of an epidemic increase with **\ophi**.

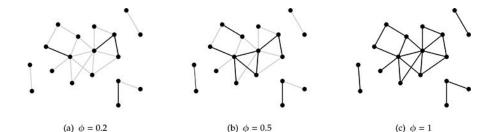
connecting outbreak sizes and percolation

SIR model, transmission probability $\phi = 1 - e^{-\beta\tau}$

Bond percolation: a fraction ϕ of edges are occupied uniformly at random represent those along which disease will be transmitted if it reaches either of the nodes at the ends of the edge Can measure the

percolation transition \Rightarrow epidemic threshold

count the nodes in the appropriate percolation cluster

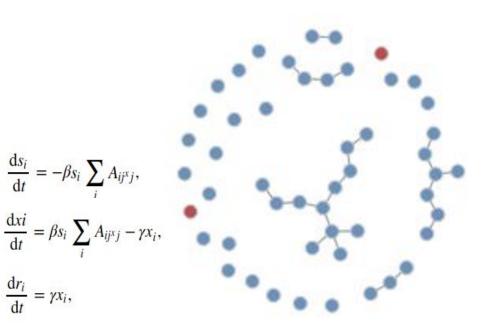


Can measure the long-time behavior, about the overall total number of individuals infected by the disease But not the temporal evolution of the disease outbreak ⇒ simulate instead

Network Modelling

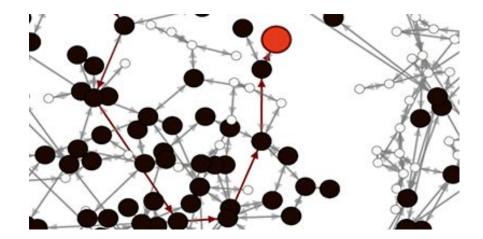
We can model/simulate it!

- More accurate
- Enables further analysis
 - Contact tracing
 - Finding super-spreaders
- Enables comparing interventions
 - Vaccination
 - Social distancing
 - Quarantine
 - Wearing masks



 $s_i(t)$, $x_i(t)$, and $r_i(t)$ to be the probabilities that node *i* is susceptible, infected, or recovered respectively at time *t*.

Network structure and patient zero are both important

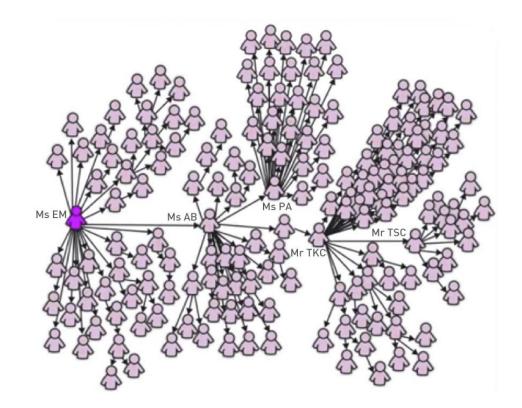


Identification of Patient Zero in Static and Temporal Networks: Robustness and Limitations



Contact Tracing

One-hundred-forty-four of the 206 SARS patients diagnosed in Singapore were traced to a chain of five individuals that included four super-spreaders. The most important of these was **Patient Zero**, the physician from Guangdong Province in China, who brought the disease to the Metropole Hotel.



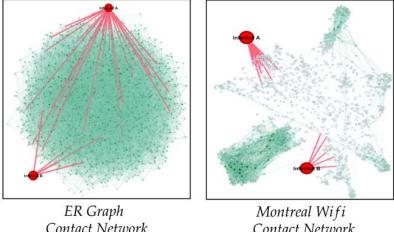
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Contact Graph Epidemic Modelling of COVID-19 example Location Date Event(s) Mar. 11 [Worldwide] WHO declares global pandemic

for Transmission and Intervention Strategies



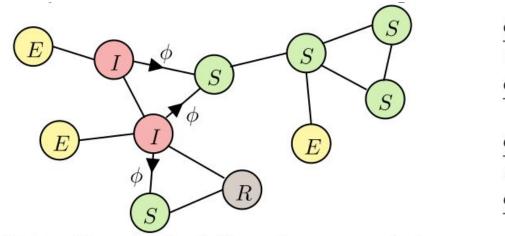
Contact Network

Mar. 12 [QC] returning travellers to self-isolate [ON] close public schools [ON, AB] cancel events > 250Mar. 13 [BC, MB] cancel events > 250[NS, NB] discourage gatherings > 150[QC, ON] ban visits to long term care facilities Mar. 14 Mar. 15 [NS] close schools, childcare, casinos ban visits to long term care facilities ban gatherings over 150 [Canada] close borders, excluding US. Mar. 16 [Canada] mandatory 14 days guarantine [QC] close schools, universities, and davcares [ON, AB] ban public events of over 50 Mar. 17 [BC] close schools, restaurants, and bars Mar. 19 [NB] close most businesses, gatherings < 10[Canada] close boarder with US Mar. 20 Mar. 23 [NS] quarantine for domestic travellers social distancing enforced [Canada] [ON, OC] close all non-essential workplace [Canada] advise to wear masks Apr. 6 [MTL] May 22 allow outdoor gatherings ≤ 50 ease social distancing for some reopen shops with exterior entrance May 25 [MTL] [QC] reopen manufacturers without restrictions [MTL] reopen personal and aesthetic care June 15 June 22 [MTL] reopen restaurants June 28 [MTL] reopen educational childcare facilities July 18 [00] reopen offices Aug. 1 [QC] allow indoor gathering < 250[QC] allow outdoor gathering ≤ 250 Aug. 5

Table 1: Timeline of Canada COVID-19 selected NPI events based on (Vogel 2020; Trevor Lawson 2020)

Read more here & here

Contact Graph Epidemic Modelling of COVID-19 example

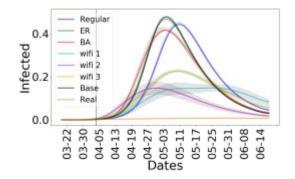


$$\frac{dS}{dt} = -\frac{\beta SI}{N}$$
$$\frac{dE}{dt} = \frac{\beta SI}{N} - \sigma E$$
$$\frac{dI}{dt} = \sigma E - \gamma I$$
$$\frac{dR}{dt} = \gamma I$$

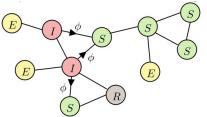
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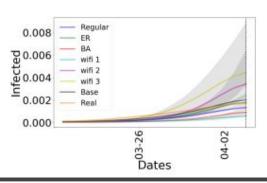
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Contact Graph Epidemic Modelling of COVID-19 example



CGEM closely approximates the base SEIR model when the contact network is assumed to be Erdős-Reńyi graph.

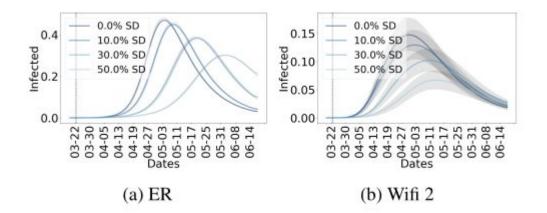




Assuming an Erdős-Reńyi graph as the contact network overestimates the impact of COVID-19 by more than a factor of 3 when compared with more realistic structures.

° (* 1997)

Contact Graph Epidemic Modelling of COVID-19 example



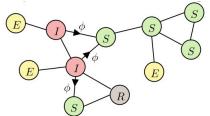
Quarantining delays the peak of infection on the ER graph whereas the peak on the real world graphs are lowered but not delayed significantly.

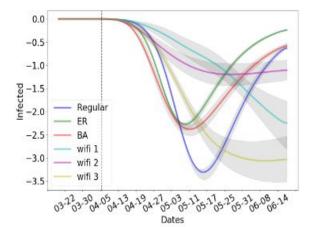


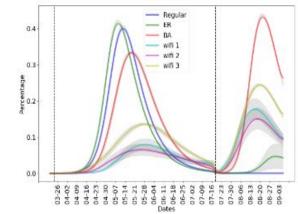
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Contact Graph Epidemic Modelling of COVID-19 example

The ER graph significantly underestimates the effect of wearing masks in terms of the total decrease in the final attack rate







ER graph significantly underestimates the second peak after reopening public places, i.e. allowing back hubs.

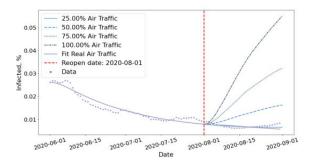
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Incorporating Dynamic Flight Network in SEIR to Model Mobility between Populations

- Early detection of outbreaks due to imported pre-symptomatic and asymptomatic cases
- More accurate estimation of the reproduction number
- Evaluation of the impact of travel restrictions and the implications of lifting these measures



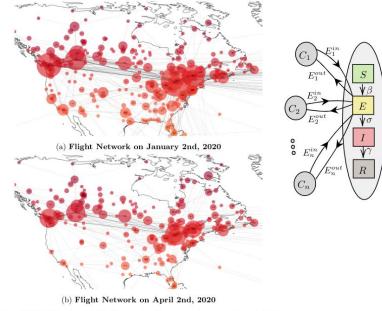
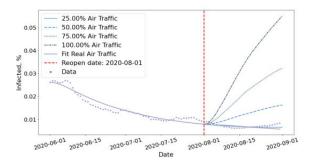


Figure 1: Flight network before and after imposing travel restrictions

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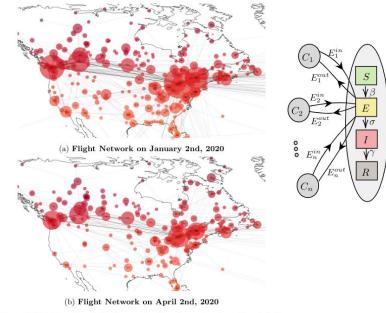


Figure 1: Flight network before and after imposing travel restrictions

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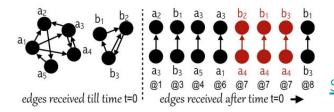
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Common Types of Temporal Information

- Diffusion Processes
 - Graph structure provides the routes for dynamic processes
 - An entity propagates/spreads over the graph
- Dynamic Graphs
 - Graph evolves over time
 - Structure is changing, as interactions/edges often happen at a specific time
 - Some edges are more dynamic than others: email exchanges, v.s. followership
- Streaming edges
 - Graphs received over time and can not be kept fully



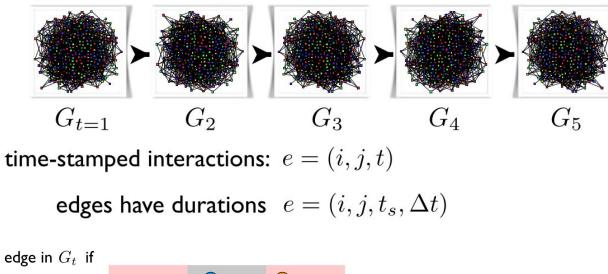
SEDANSPOT: Detecting Anomalies in Edge Streams



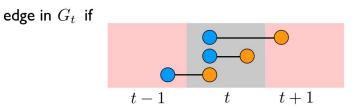


Modelling Dynamic Graphs

Sequence of graphs:



Consider edge persistence



From Clauset's slides

Outline

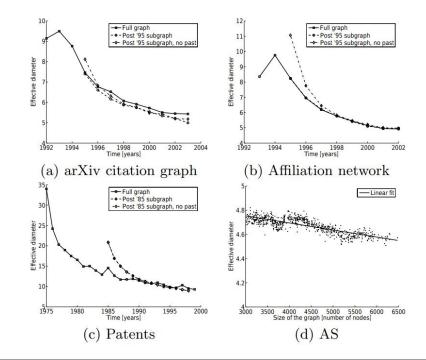
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Dynamic network analysis: Patten example

We can define and study patterns in dynamic graphs

E.g. diameter over time

<u>Graphs over Time: Densification Laws,</u> <u>Shrinking Diameters, and Possible Explanations."</u>



° (* 1997)

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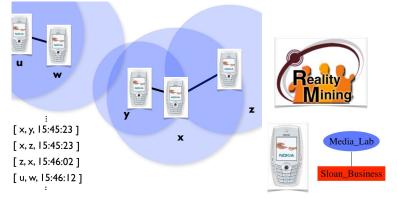
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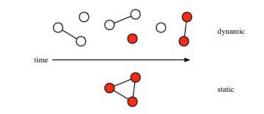
Dynamic network analysis: Measures example

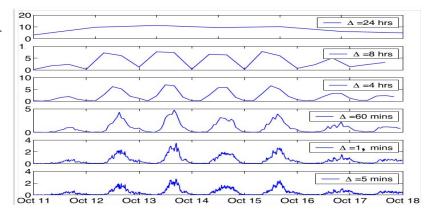
We can define measure on dynamic graphs

E.g. compute mean degree over time

time-varying physical proximity of 115 individuals over the course of one month in the MIT Reality Mining study







Persistence and periodicity in a dynamic proximity network



° (* 1997)

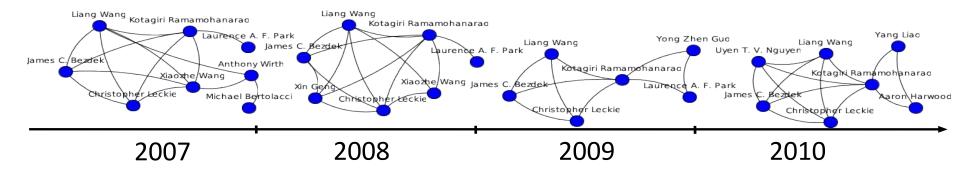
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Dynamic network analysis: Modules examples

We can find persistent or evolving communities over time

E.g. Communities have fluctuating members in DBLP co-authorship network



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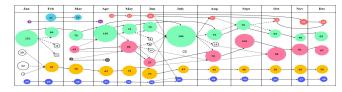
Dynamic network analysis: Modules examples

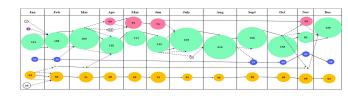
- Independent Community Mining
 - Detect communities at each snapshot without considering temporal information
 - Suitable for networks with highly dynamic community structures
 - Communities are tracked and matched based on their similarity
- Incremental Community Mining
 - Use the temporal information directly to detect communities
 - Suitable for networks with community structures that are more stable over time

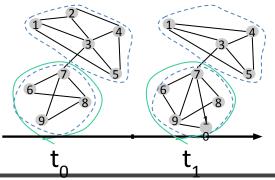
$$cost = \alpha SC(G_i, C_i) + (1 - \alpha)TC(C_{i-1}, C_i)$$

 \circ SC: snapshot cost TC: temporal cost

the snapshot cost SC() measures the quality of the detected communities the temporal cost TC() measures how similar the current communities are with the previous detected communities







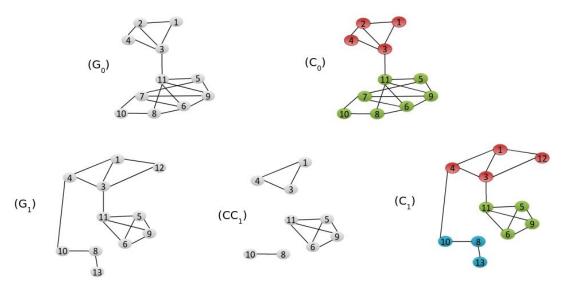


Dynamic network analysis, incremental example

The community structure is updated as new data arrives

group the nodes based on the communities detected at previous snapshot and current graph structure i.e. only consider edges in the same module and find connect components

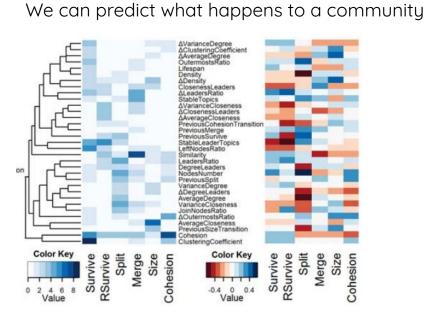
Expand these cores for find new modules



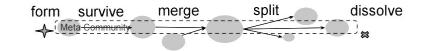
Incremental Local Community Identification in Dynamic Social Networks

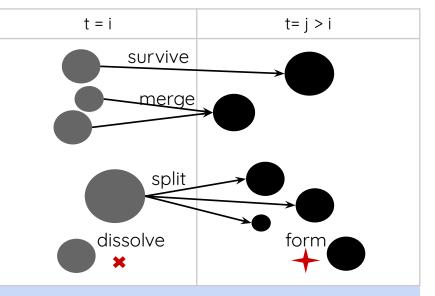


Dynamic network analysis, prediction example



<u>Community evolution prediction in dynamic social networks</u>



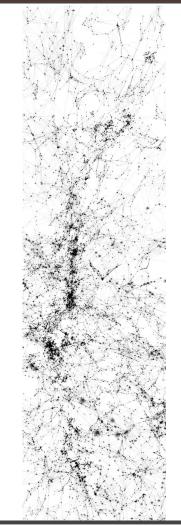


events that characterize the evolution of communities

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Common tasks in network science

- Pattern & Anomaly Detection
- Modelling of Structure, Evolution, & Dynamics
- Measurements of Ranking & Similarity
- Clustering & Community Detection
- Prediction of Missing Link & Attributes
- Summarization, Visualization, & Layouts
- Temporal analysis of Evolution & Diffusion



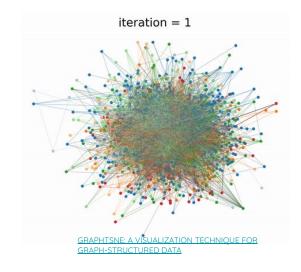
What tasks are unsupervised in Network Science?

• Community Detention

- a.k.a. clustering nodes, finding modules
- If semi-supervised or supervised, it becomes attribute prediction or classification

Anomaly Detection

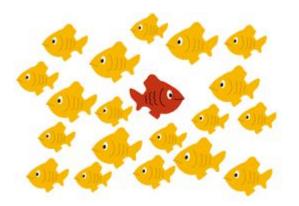
- A.k.a. outlier detection
- Goes hands in hands with pattern detection
- Summarization
 - How to compress the graph
- Visualization
 - \circ How to plot the graph
- Alignment
 - \circ $\$ How to align two given graphs



What is an anomaly?

"An outlier is an observation that differs so much from other observations as to arouse suspicion that it was generated by a different mechanism."

Hawkins' Definition of Outlier, 1980



Slides based on: Akoglu L, Tong H, Koutra D. Graph based anomaly detection and description: a survey. Data mining and knowledge discovery. 2015 May 1;29(3):626-88.



General Graph Anomaly Detection Problem

Given a graph, find the graph objects (nodes/edges/substructures) that differ significantly from the majority of the reference objects in the graph.

