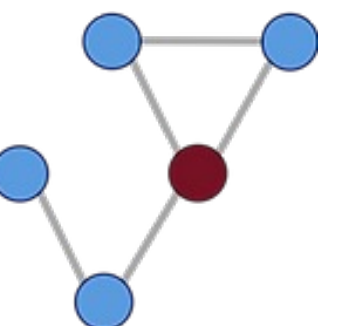




GEORGETOWN UNIVERSITY

# Characterizing heterogeneities in contact patterns

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## contact is spatially heterogeneous

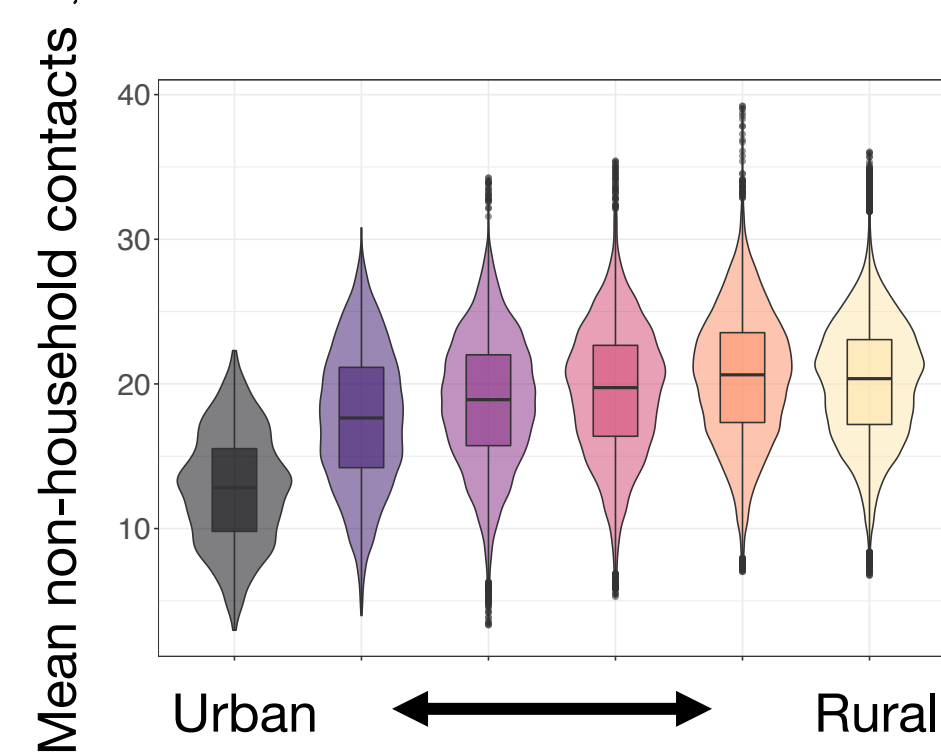
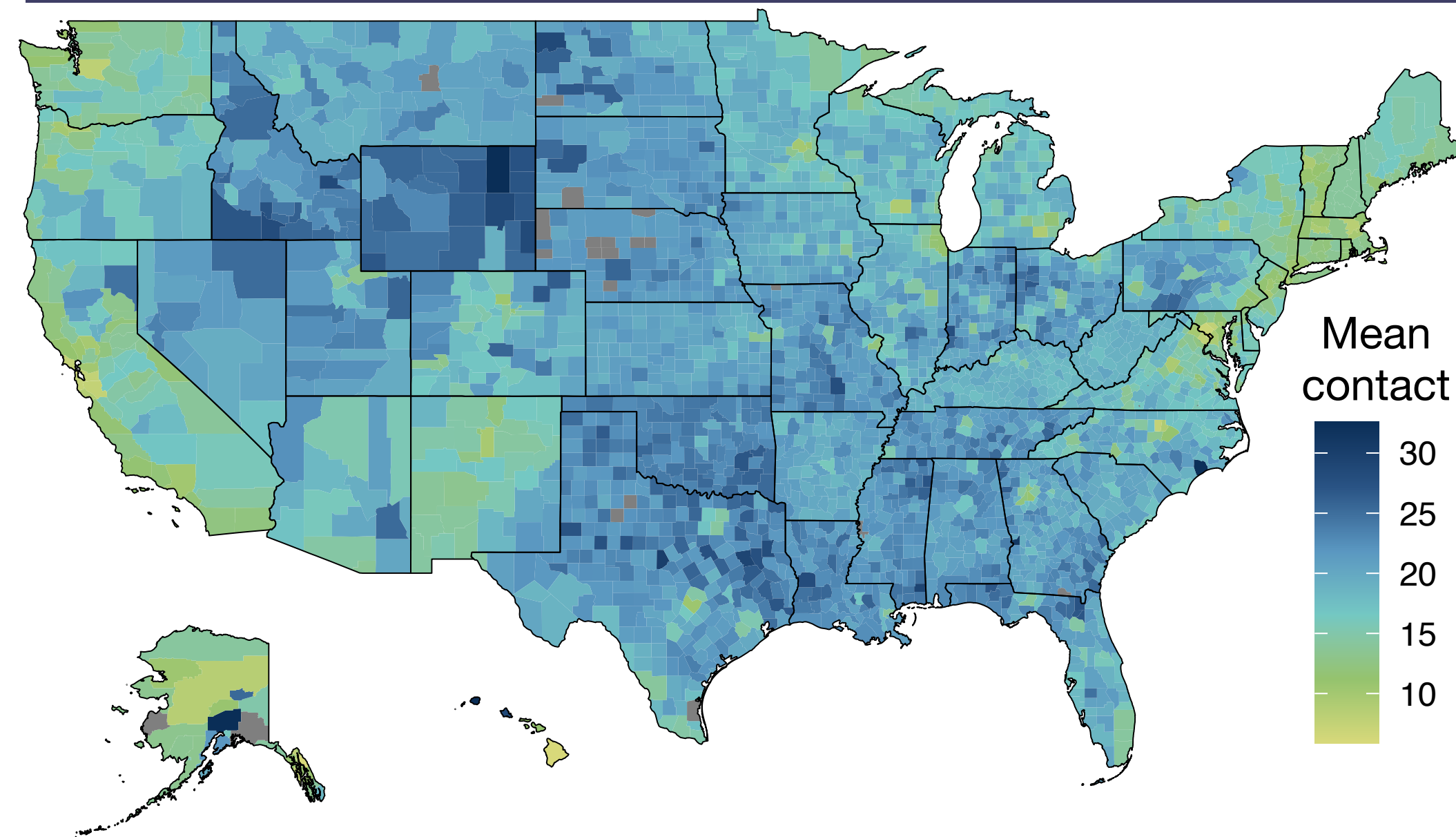


Fig 1. Mean non-household contacts from May 2020 through April 2021 are **spatially heterogeneous** with a moderate urban-rural gradient.

Fig 3. Contact is relatively constant over time when we remove the effect of the pandemic (see methods). Future studies should confirm this finding.

## contact is temporally stable

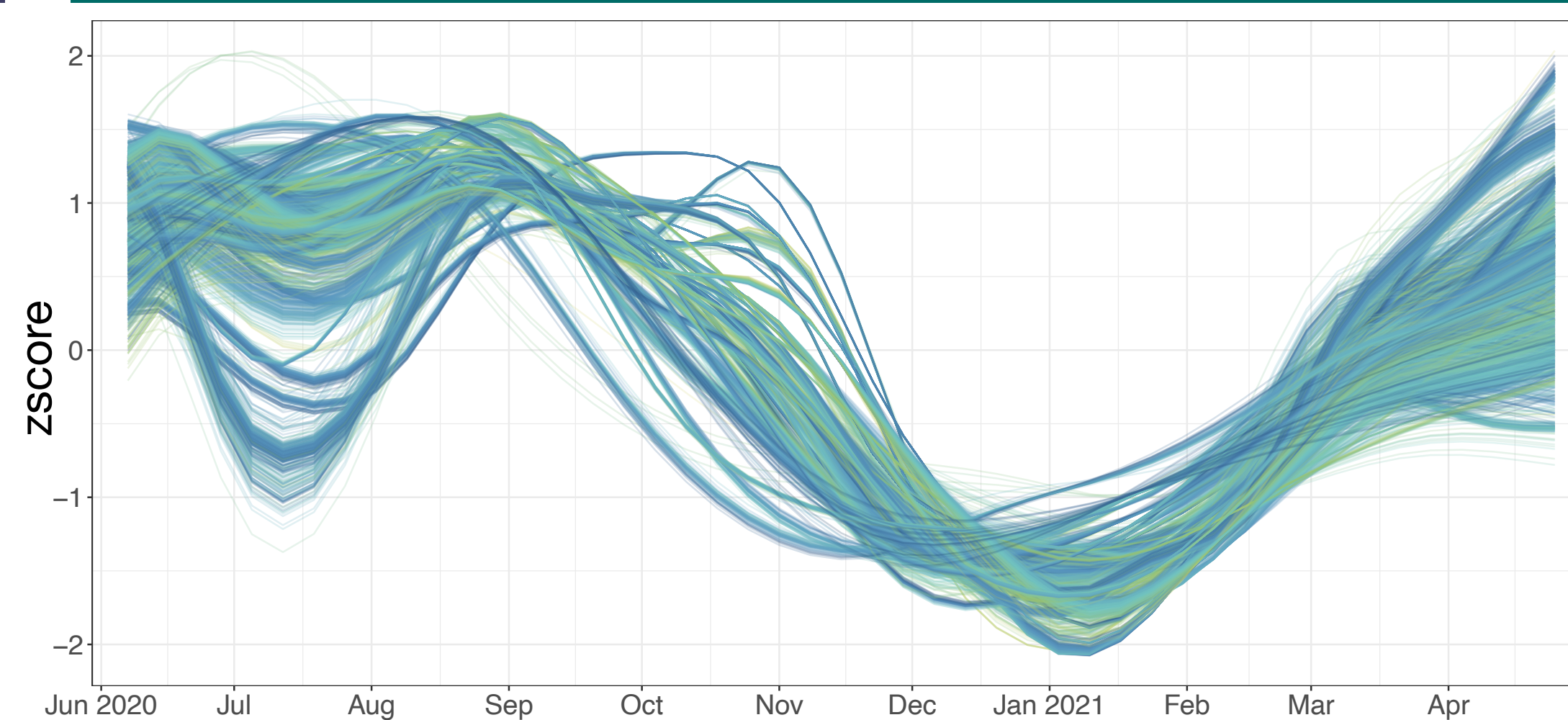
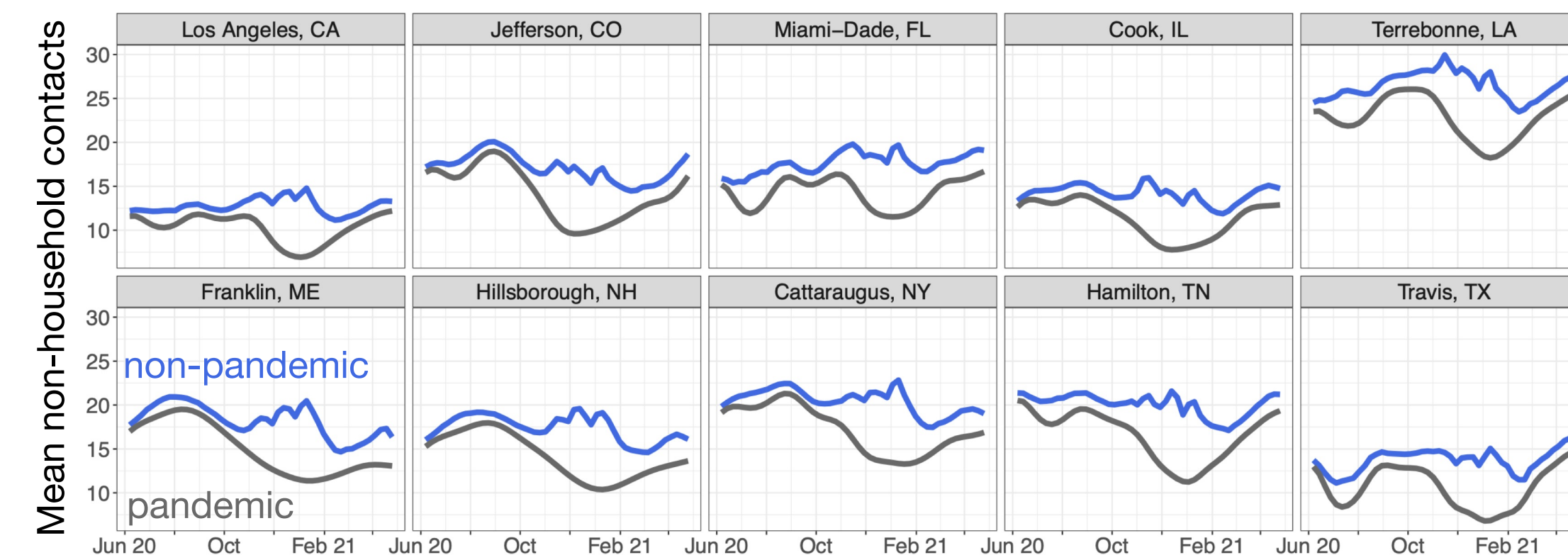


Fig 2. Counties have similar contact dynamics over time, with a uniform decrease in winter 2020-21. Summer 2020 case surges in some counties/states likely drove decreased contact at that time.



## contact varies by demography

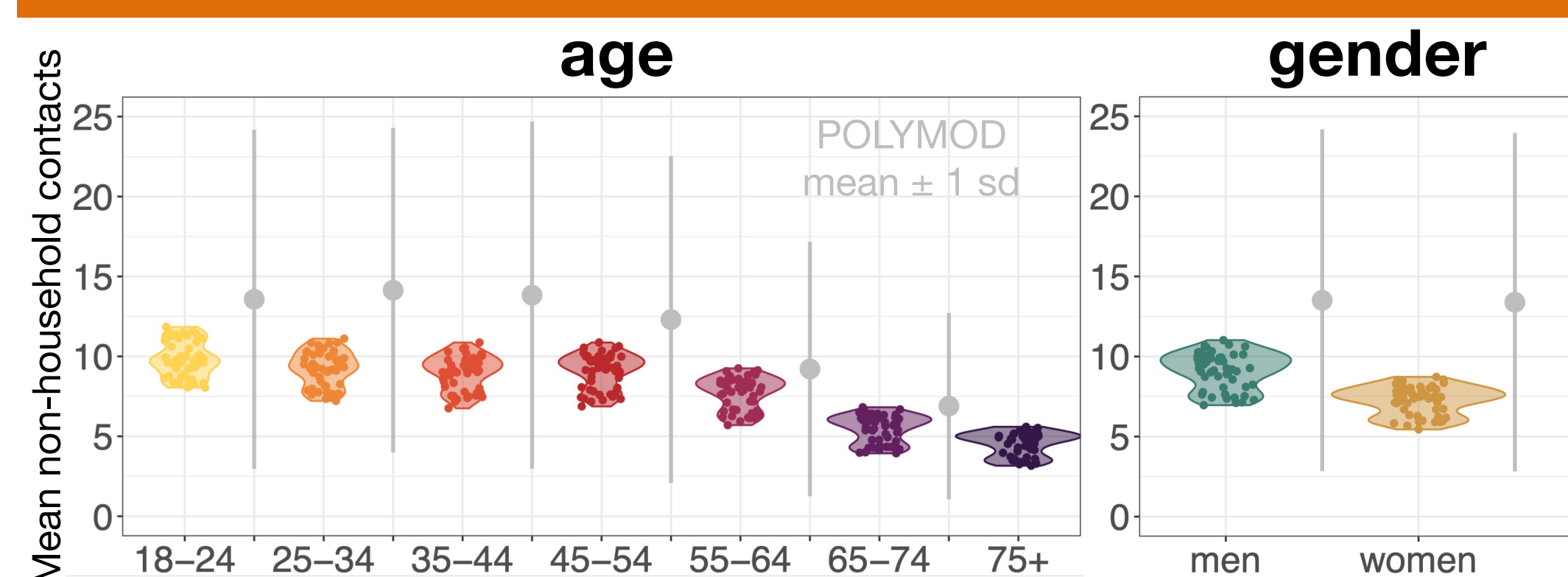
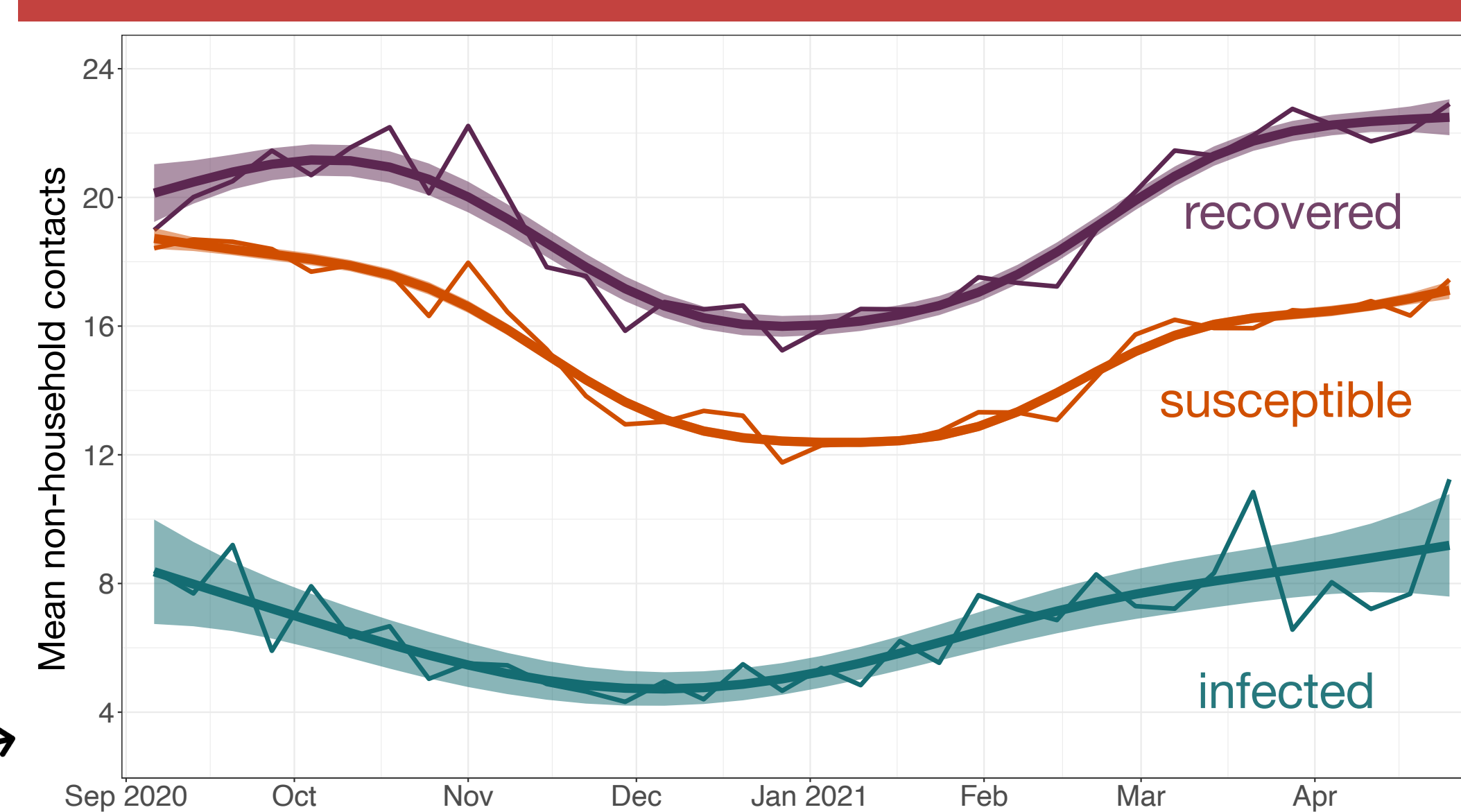


Fig 4. Mean number of contacts decrease with age, while men tend to have more contacts than women.

Fig 5. Recently infected (< 14 days ago) respondents have the fewest contacts, followed by susceptible, then recovered individuals.

## contact structures disease risk



### motivation

- Respiratory pathogens rely on **close contact** for transmission
- Contact patterns are **heterogeneous**, as shown by the POLYMOD study conducted in Europe over 15 years ago
- **Lack of recent data in the US** leaves open questions about how contact patterns vary across **space, seasons, disease states, & demographic groups**
- This information is key to designing **targeted disease control** strategies and developing accurate **estimates of transmission risk**, that account for individual **heterogeneities & spatial structure**

### data

COVID-19 Trends and Impacts Survey



May 2020 – April 2021

~ 13 million respondents age 18+, post-stratified by age & gender

# of non-household contacts in last 24 hrs (> 5 mins, < 6ft)

### methods

Figs 1&2. Spatiotemporal GAMs by state with county random effects

Fig 3. Linear regression with partial pooling, county random effect:

- response: county mean contact
- predictors: county, state, & national incidence, urban/rural NCHS class, interaction between urban/rural class & national incidence

Fig 4. Weekly county means post-stratified by age & gender to match ACS estimates, censored at 29 contacts for POLYMOD comparison

Fig 5. National GAM, factor-smooth interaction with disease state. Disentangled from behavior change using mechanistic models (not shown)

### takeaways

- Non-household contacts **exhibit spatial heterogeneity with lower contact in urban areas** and **similar temporal dynamics** associated with disease
  - Consider including this variability in models & exploring how these differences contribute to observed disease dynamics
- **Contact is seasonally stable**, after controlling for disease
  - Need non-pandemic data to validate this finding
- Empirical **data supports network epidemiology theory** that high degree nodes will be infected first
  - Need to incorporate this phenomenon into disease management efforts & data interpretation (e.g., analysis of contact tracing data, adaptive vaccination policy)