# SENSITIVITY ANALYSIS IN COVID-19 EPIDEMIC MODEL

# A THESIS SUBMITTED TO THE INSTITUTE OF GRADUATE STUDIES

OF

# NEAR EAST UNIVERSITY

By

# SARKHEL AKBAR MAHMOOD MAHMOOD

In Partial Fulfillment of the Requirements for the Degree of Master of Science in Mathematics

NICOSIA, 2021

# SENSITIVITY ANALYSIS IN COVID-19 EPIDEMIC MODEL

# A THESIS SUBMITTED TO THE INSTITUTE OF GRADUATE STUDIES OF NEAR EAST UNIVERSITY

By

# SARKHEL AKBAR MAHMOOD MAHMOOD

In Partial Fulfillment of the Requirements for the Degree of Master of Science in Mathematics

NICOSIA, 2021

# Sarkhel Akbar Mahmood MAHMOOD: SENSITIVITY ANALYSIS IN COVID-19 EPIDEMIC MODEL

### Approval of Director of Institute of Graduate Studies

Prof. Dr. K. Hüsnü Can BAŞER

# We certify this thesis is satisfactory for the award of the degree of Masters of Science in Mathematics

Examining Committee in Charge:

Prof. Dr. Evren Hincal

Committee Chairman, Department of Mathematics, NEU

Assist. Prof. Dr. Bilgen Kaymakamzade

Supervisor, Department of Mathematics, NEU

Assist. Prof.Dr. Meryem Cumhur

Department of Mathematics Education, NEU

I declare that all information in this document has been obtained and presented in accordance with academic rules and ethical conduct. I also declare that, as required by these rules and conduct, I have fully cited and referenced all material and results that are not original to this work.

Name: Sarkhel Akbar Mahmood Mahmood

Signature:

Sal

Date: 04/02/2021

#### ACKNOWLEDGEMENTS

I want to express my thanksgiving to my supervisor, Assist. Prof. Dr. Bilgen Kaymakamzade, for her support, encouragement, and valuable suggestions throughout the preparation of this work.

I express gratitude to my family, especially my mother and father, for their encouragement, help, love, and indulgence during this thesis's preparation.

I express my gratitude, especially to my cousin Awder Shex Awmer and Prof. Dr. Faraydun Kader; I cannot start this project without their help.

I want to extend my thanksgiving to all my teachers during the master's degree courses who have given me vital information and thank the dean and staff members who help me succeed in this thesis, especially the mathematics department's staff.

To my parents...

#### ABSTRACT

This thesis studied the sensitivity analysis of COVID-19 epidemics models of two epidemics models, with and without vaccination model to see the effect of each parameter on the basic reproduction number.

The first vaccination-free model utilizes the SIR scheme. The second model with vaccination uses the SVIR model. With the assumption that the population is fixed, the average birth and death ratio for the susceptible class are included in the model with all births. However, in the second model, it is assumed that there is no double infection for the disease.

Both models are represented mathematically by the set of nonlinear first-order ordinary differential equations. The boundedness and persistence of both models' solutions are investigated. The local stability condition of all possible equilibrium points is established, the global stability condition for some of the possible equilibrium points, and the basic reproduction number for both models discussed. Finally, a numerical solution of both models are solved to study the dynamic behavior, with the sensitivity of each parameter in basic reproduction number to show the influence of each parameter on the model with the help of code (ode45) solver in Matlab program.

*Keywords:* epidemic model; influenza; vaccination; basic reproduction number; stability; sensitivity analysis

### ÖZET

Bu tez, aşılama ve aşılama olmadan oluşturulan iki epidemik Covid-19 modelinin modellerinin duyarlılık analizini incelemiştir. Amaç, her parametrenin temel üreme sayısı üzerindeki etkisini görmektir.

Aşısız modelde SIR modeli oluşturulmuştur. Aşılamanın olduğu ikinci modelde SVIR modeli oluşrturulmuştur. Nüfusun sabit olduğu varsayımı duyarlı sınıf için ortalama doğum ve doğal ölüm oranı modele dahil edilmiştir. Ancak ikinci modelde hastalığın 2. kez tekrarlanmadığı varsayılmıştır.

Her iki model de doğrusal olmayan birinci dereceden adi diferansiyel denklemler seti ile matematiksel olarak temsil edilmiştir. Her iki modelin çözümlerinin sınırlılığı ve kalıcılığı araştırılmıştır. Tüm olası denge noktalarının yerel kararlılık koşulu belirlenip, bazı olası denge noktaları için küresel kararlılık koşulu ve her iki model için de temel üreme sayısı çözümlenmiştir. Son olarak, her parametrenin model üzerindeki etkisini göstermek için temel üreme oranındaki her parametrenin hassasiyeti ile dinamik davranışı incelemek adına her iki modelin sayısal bir çözümü bulunmuştur. Bu çözümlemede Matlab programında kod (ode45) kullanılmıştır.

*Anahtar Kelimeler:* salgın modeli; grip; aşılama; temel üreme sayısı; istikrar; duyarlılık analizi.

### **TABLE OF CONTENTS**

ACKNOWLEDGEMENTS	i
ABSTRACT	iii
ÖZET	iv
LIST OF TABLES	vii
LIST OF FIGURES	viii

# **CHAPTER 1: INTRODUCTION**

1.1 Background of influenza	1
1.2 Epidemic	3
1.3 The type of Model	6
1.4 Mathematical Tool	9
1.5 Sensitivity analysis	15

# **CHAPTER 2: SENSITIVITY ANALYSIS WITHOUT VACCINATION**

2.1 Model without vaccine for Covid-19	17
2.2 Mathematical analysis	19
2.3 Stability analysis	22
2.4 Numerical solution	25
2.5 Sensitivity analysis	26

# **CHAPTER 3: SENSITIVITY ANALYSIS WITH VACCINATION**

3.1 Model with vaccine for Covid-19	31
3.2 Mathematical analysis	33
3.3 Stability analysis	40

3.4 Numerical solution	
3.5 Sensitivity analysis	46
CHAPTER 4: RESULTS AND CONCLUSION	53
REFERENCES	55
APPENDICES	69
APPENDIX 1: Ethical Approval Letter	70
APPENDIX 2: Similarity Reports	

### LIST OF TABLES

<b>Table 2.1:</b> Describes the Variable and the Parameter of the Model (2.1)	18
<b>Table 2.2:</b> The Value of Parameter in System (2.2)	25
Table 2.3: Sensitivity indexes of the system (2.3)	27
<b>Table 3.1:</b> Describes the Variable and the Parameter of the Model (3.1)	32
<b>Table 3.2:</b> The Value of Parameter in System (3.2)	4
Table 3.3: Sensitivity indexes of the system (3.3)	48

### LIST OF FIGURES

Figure 2.1: Transfer diagram of a model	17
Figure 2.2: State variable of the system (2.1)	26
<b>Figure 2.3:</b> Effect on ( <i>I</i> ) of the variation of ( $\Lambda$ )	28
<b>Figure 2.4:</b> Effect on ( <i>I</i> ) of the variation of ( $\beta$ )	29
<b>Figure 2.5:</b> Effect on ( <i>I</i> ) of the variation of ( $\mu$ )	29
<b>Figure 2.6:</b> Effect on ( <i>I</i> ) of the variation of (d)	30
<b>Figure 2.7:</b> Effect on ( <i>I</i> ) of the variation of (y)	30
Figure 3.1: Transfer diagram of a model with vaccination	31
Figure 3.2: State variable of the system (3.1)	45
<b>Figure 3.3:</b> Effect on ( <i>I</i> ) of the variation of ( $\Lambda$ )	49
<b>Figure 3.4:</b> Effect on ( <i>I</i> ) of the variation of ( $\beta$ )	50
<b>Figure 3.5:</b> Effect on ( <i>I</i> ) of the variation of ( $\mu$ )	50
<b>Figure 3.6:</b> Effect on ( <i>I</i> ) of the variation of (d)	51
<b>Figure 3.7:</b> Effect on ( <i>I</i> ) of the variation of (y)	51
<b>Figure 3.8:</b> Effect on ( <i>I</i> ) of the variation of (r)	52
Figure 3.9: Effect on ( <i>I</i> ) of the variation of (k)	52

# CHAPTER 1 INTRODUCTION

Throughout the world, infectious diseases burden populations and cultures. In every population, as the occurrence of an infectious disease continues to escalate, individuals tend to search at the most appropriate ways to combat the epidemic or calculate the number of pathogens. In the battle against sickness, scientists have produced enormous strides. Infectious diseases, however, remain an important source of mortality. In epidemiology, in order to monitor associated health issues, one attempts to study the enhancement of well-being and circumstances in a given population. Utilizing assumptions and theories about the associated pathways, this study applies mathematics to explain complicated disease dynamics.

#### 1.1 Background of Influenza

In this section, we give some backgrounds of influenza, vaccination, and coronaviruses.

#### 1.1.1 Influenza Viruses

Influenza viruses belong to the clan Orthomyxoviridae and have a single-stranded segmented RNA genome. The influenza viruses are distributing into types A, B, and C based on their core proteins. Type A influenza viruses are the most malignant human pathogens among the three influenza types and cause acute disease. Moreover, they can be subdivided according to their envelope glycoproteins with hemagglutinin (HA) or neuraminidase (NA) into eleven serotypes based on H and N. These serotypes are H1N1, H2N2, H3N2, H5N1, H7N7, H1N2, H9N2, H7N2, H7N3, H10N7, H7N9 (RHilleman, 2002; Alan J. Hay, 2001). The influenza B virus almost exclusively infects humans and is less common than influenza A. Only human beings are influenced by the last form (C), and it could seldom be Distinguished since it triggers no outbreaks from the flu virus (Webster, 1992). The creepiest part is that subgroups of influenza A and influenza B viruses could be identified by genealogy. A modern genealogy of influenza

occurs in two best strategies; antigenic drift and antigenic change. Antigenic drift emerges, which occurs, by incremental shifts in the virus. There is a new genealogy, which could then be unique to the recipient antibodies.

In addition, a drastic alteration in the influenza virus is an antigenic move that results in a new strain that has seldom become observed previously. Influenza A undergoes both alterations, whereas B undertakes just antigenic drift. That has never been seen before (N L Michael, M Vahey, D S Burke, R R Redfield, 1992).

#### 1.1.2 Vaccination

Vaccine, suspension of scattered microorganisms or lymphocytes have been destroyed or diminished, or of antibodies or toxins that have been provided to deter diseases including Covid-19. By activating the immune system to fight the agent, a vaccine may provide effective immunity against a particular harmful variable. If it once again reaches the person, the time a vaccine, the antibody-producing cells, labeled B cells (or B lymphocytes), stay sensitized and planned to react to the variable. A vaccination could also grant passive immunity by having antibodies or lymphocytes already produced by an animal or human donor. Vaccines, delivered by injection, are popular but others are given orally or even nasally. Those passages of the gut or nasal lining seem to induce a stronger effect from antibodies, and therefore the most powerful route of administration (Brunson, 2008).

#### 1.1.3 Coronavirus (CoV-2) Pandemic, COVID-19

The 2019 (COVID-19) spread-unfolding coronavirus disease pandemic has devastated life worldwide. In Wuhan, China, the novel coronavirus (CoV-2, later renamed SARS-CoV-2) arose from an undisclosed origin (Qun Li, M.Med., Xuhua Guan, 2020). Unlike past epidemics of coronaviruses, (El Zowalaty ME, Järhult JD, 2020). An as-yet-unconfirmed animal source, this extremely infectious zoonotic virus (McCloskey B, Zumla A, 2020). It

progressed from a moderate acute respiratory illness associated with local flu to a pandemic that endangered the existences of millions within several months. In many nations, COVID-19 created huge challenges for global public health and halted several healthcare programs. They rapidly moved from china to all over the world for just two months (Anderson M, Mckee M, 2020). As it circulated via social interaction, to reduce the distribution percentage, billions were pushed into quarantine. The shutdown was important because, as with past pandemics, including SARS and MARS, researchers needed time to create a vaccine or successful treatment. No pressing approach is definitely in the near future for COVID-19 (CDC, 2020). For the rapidly increasing number of affected individuals, let alone emerging or poorly developed countries, the first-world healthcare system has struggled to deliver medical services (D, 2020). In most situations, nations insensitive to leadership and officialism are struggling to control the outbreak. The active exchange of any single individual on planet, in the context of exercise, solitude, quarantine, social distancing, enhancing personal cleanliness, and employing personal protective instruments including masks, gloves, and hand sanitizers, has turned strict for the first time in global history to collect COVID-19, deter desirable exhausted health professionals, and allow scholars way to do (Fraser C, Riley S, Anderson RM, Ferguson NM, 2004). Thousands of millions have lost Their freedom, jobs, career, leisure, and education. Nevertheless, due to shifting awareness, perceptions, and procedures, securing willing involvement in COVID-19 prohibitions policies has faced numerous countries (KAP). Therefore, the resolution and effectiveness of anti-contagion interventions depend on the macro-and micro-level perception of KAP in the regions involved and within each community.

#### **1.2 Epidemic Prevention**

In this part, some background of the epidemic, epidemic model, and classification of the epidemic model are given.

#### **1.2.1 History of The Epidemic**

The record of outbreaks dates back decades, and their related human morbidity and mortality was a problem for many millennia (WHO, 2005). It has been reported that 25 million Europeans perished from the Bubonic plague throughout the 14th century, comprising 30-60 percent of the whole populace. Approximately half of the Aztec population reportedly died from smallpox during the year 1520, and around 150 years afterward, 68,000 deaths occurred from the plague outbreak in London. Another 2.5 million are believed to have been killed since World War 1 by Typhus in Russia. It is believed that about 20 million deaths were reported from worldwide influenza outbreaks during that time. (R. Anderson, R. May R, 1991). The importance of clinical study has long been recognized in the area of epidemiology (J.A.P. Heesterbeek, M.G. Roberts, 2015). In specific, with the 'germ theory of disease' growth. This definition explains that microorganisms (pathogens) trigger certain illnesses, and the circumstances they develop are considered infectious diseases. Mathematical simulation of epidemiology has a long tradition as well. (R. Anderson, R. May R, 1991). Numerous mathematical epidemiology developments led to general information available, improved understanding of disease spreading advances in medicine and computer programming (J.A.P. Heesterbeek, M.G. Roberts, 2015). Countries consequently started to take advantage of recognizing disease outbreaks to global surveillance systems (P. Yan, H. Chen, D. Zeng, 2008). Over the years, protocols and incentive vaccine systems have been developed to discourage or monitor widespread transmission (J.S. Nguyen-Van-Tama, A.W. Hampson, 2003). To improve vaccination rates in different communities (T. Jefferson, C. Di Pietrantoni, L.A. Al-Ansary, E. Ferroni, S. Thorning, R.E. Thomas, 2010). In the middle of such advances in the epidemiological sector, due to the ongoing occurrences of specific influenza viruses impacting diverse populations, there is still space for significant development to understand disease transmission better ( C.R. Simpson, N. Lone, J. McMenamin, R. Gunson, C. Robertson, L.D. Ritchie, A.Sheikh, 2015). Influenza diseases have severe health issues, like physical disease or death, pose a risk to individuals with poor immune systems (Cassar, 1965). These consequences result in a substantial workload on the health and wellbeing states. (J.F.

Bishop, M.P. Murnane, R. Owen, 2009). This demonstrates the central role and growing influence of mathematical modeling in epidemiology in forecasting and projecting societies' future state and, most notably, in quantifying the variability in these expectations (Keeling, 2009). This, in essence, advises public health decision about the risk of an epidemic of an infectious illness, how the epidemic can occur, and how it could be managed (Woolhouse, 2011).

#### 1.2.2 Epidemiology Study

Epidemiology is the study of how many times diseases occur in diverse groups of people and why. Epidemiological information is used to plan and assess strategies to prevent illness and evidence from managing patients whom the disease has already developed (D.Coggon, 2003).

#### **1.2.3 Epidemic Models**

Under the presumption that the observational population can be separated into many subsets, named compartments, and pandemics' mathematical models are developed. Kermack and McKendrick described the simplest compartmental models in 1927 (C.R. Simpson, N. Lone, J. McMenamin, R. Gunson, C. Robertson, L.D. Ritchie, 2015). In its modern formulation, the Kermack-McKendrick Model (M.I. Meltzer, N.J. Cox, K. Fukuda,, 1999). The overall flow between the multiple compartments is based on reasonably basic assumptions. It uses a delay time and a generalized mode of dissemination to model the transmission of infectious diseases. The SIR and SEIR models explain nonlinear transmission. The impact of immunity from reinfection is included in these models. This indicates that there is a flow of persons from the vulnerable class "S" via the exposed "E" to the infected "I." Upon exposure, individuals join the group "R," meaning that they are excluded from the community of concern through demise or through immunity. This model underlies several theories. The population is believed to be huge and closed, for example. Natural births and deaths during diseases are therefore not taken into account. The lack of a delay cycle (individuals remain infectious as soon as they become infected). lifelong immunity following regeneration and homogeneous mixture are other

simplifications (L. Temime, G. Hejblum, M. Setbon, A.J. Valleron, 2008).

#### **1.2.4 Classifications of Epidemic Model**

When research models, the categories of models it is so helpful to identify. It is easy to show some of their fundamental principles to the individual model if classified into different categories (Daniel Lawson and Glenn Marion, 2015). the model that represents a situation where uncertainty is present is said a stochastic model. In other words, the model that has some random operation. The name stochastic comes from the Greek word stokhazesthai, meaning to aim or guess. In the real world, uncertainty is a part of everyday life, so that a stochastic model could represent anything. Deterministic is the opposite of random. They can be used to find some future event accurately, without the involvement of randomness. If some object is deterministic, you have all of the data necessary to predict the outcome with certainty (stephanie, 2013).

#### 1.3 Type of Model

This section gives information about the model, scientific model, mathematic model, and SIR model with the next-generation matrix's basic reproduction number.

#### **1.3.1 Scientific Model**

When you hear the word 'model,' what is the first thing that comes to mind? Maybe the beautiful girls on the stage dressing in very nice clothes. So, what is a model? Unfortunately, a model is a bit more abstract, which is the seed scientific model. A scientific model represents a particular phenomenon in the world using something else to describe it, making it easier to know. A scientific model could be anything, a graph or a physical model, or complex mathematics set that. Whatever it is, the aim is to make the particular thing you are modelling easier to understand. We can use it to prophesy. When we do that, we can forecast what will

happen in the next step-for example, predicting what will happen when a complex generation of the epidemic virus becomes? It gets simple to make a fully careful model of all viruses come before (Wood, 2017).

#### **1.3.2 Mathematical Modelling**

Models create assumptions about the goal of the planet. We transform such values into the vocabulary of mathematics in mathematical modeling. This has multiple benefits.

- 1) Mathematics is a very specific language. This encourages one to articulate thoughts and describe fundamental assumptions.
- 2) Mathematics is a simplified vocabulary of manipulation techniques with well-defined concepts.
- 3) It can be used at any time for all outcomes that are proven by mathematics.
- Computers may be configured for computational simulations to conduct (Daniel Lawson and Glenn Marion, 2015).

#### 1.3.3 The SIR Model

Mathematical models are easily showing how infection across the population over time. In general, the endemic model is based on dividing the population into different categories. Mathematical models are the impersonation of infection spreads in the inhabitance throw time. Each is containing individuals that are identical in terms of their status concerning the disease in question. In the *SIR* model, the three rooms are:

- 1) Susceptible (*S*): The class of individuals who are susceptible to infection; this can include all population, especially the people, have weak immune.
- 2) Infected (*I*): In this class, the level of a deadhead is sufficiently large within the host, and there is the possibility of transmitting the infection to other people.
- 3) Recovered or Resistant (R): This class contains all people who have been infected

and recovered.

The total population size is considered constant, i.e., N = S + I + R (Rodrigues, 2016).

$$\frac{dS}{dt} = -\alpha SI$$

$$\frac{dI}{dt} = \alpha SI - \lambda I$$

$$\frac{dR}{dt} = \lambda I$$
(1.1)

Here  $\alpha$  is the rate of infection and  $\lambda$  is the rate of removal.

#### 1.3.4 The Basic Reproductive Number, $R_0$

The next-generation matrix G in which the  $ij^{th}$  G is the expected number of secondary infections of type 1 caused by a single infection individual of type j assuming that the population of type 1 is completely susceptible. Furthermore, the basic reproduction number is defined as the dominant eigenvalue of the new generation matrix G:

$$G = FV^{-1}, F = \left[\frac{\partial f_{i(x0)}}{\partial x_j}\right], V = \left[\frac{\partial v_{i(x0)}}{\partial x_j}\right]$$

where,

 $f_i$  are new infection,

 $v_i$  are transferred infection from one compartment to another,

 $x_0$  is the disease-free equilibrium state.

The specific reproduction number,  $R_0$ , is described as the predicted number of secondary instances in a fully susceptible population created by a single (typical) infection. It is a prophecy that  $R_0$  should be remembered. It is a dimensionless number and it is not a proportion that will have time,  $e_{-1}$ . Some journalists wrongly name  $R_0$  as the "basic reproductive ratio." To assist us to quantify it, we can utilize the fact that " $R_0$ " is a dimensionless number."

$$R_0 \propto \left(\frac{infection}{contact}\right) \times \left(\frac{contact}{time}\right) \times \left(\frac{time}{infection}\right).$$

More specifically:  $R_0 = ICT$ ,

where I is the transmissibility (i.e., probability of infection given to contact between a susceptible and infected individual), C is the average rate of contact between susceptible and infected individuals, and T is the duration of infectiousness (Jones, 2007).

#### **1.4 Mathematical Tool**

The mathematical instruments, concepts, and theorems utilized analytically in this study are discussed in this section.

#### **1.4.1 Local Stability Analysis**

Considering the preceding system, which contains of n n-dimensional first-order independent differential equations

$$\frac{dx_{1}}{dt} = F_{1}(x_{1}, x_{2}, ..., x_{n});$$

$$\frac{dx_{2}}{dt} = F_{2}(x_{1}, x_{2}, ..., x_{n});$$

$$\vdots$$

$$\frac{dx_{n}}{dt} = F_{n}(x_{1}, x_{2}, ..., x_{n});$$

$$\Rightarrow x' = F(x),$$
(1.2)

where  $x = (x_1, x_2, ..., x_n) \in \mathbb{R}^n$  and  $F = (F_1, F_2, ..., F_n)^T \in \mathbb{R}^n$ . The non-linear functions  $F_i = i = 1, 2, ..., n$  are continuously differentiable functions defined on  $U \subseteq \mathbb{R}$ .

Moreover, before explaining the linearization procedure for equation, some basic definitions needed to study the system's stability (1.2) are presented.

#### 1.4.1.1 Definition

A point  $x^* = (x_1^*, x_2^*, ..., x_n^*)$  is supposed to be the equilibrium point (or a steady fixed point) of the system (1.2) if it satisfies the subsequent equations  $F_i(x^*) = 0$ ;  $\forall i = 1, 2, ..., n$ .

#### 1.4.1.2 Definition

An equilibrium point  $x^*$  of the system (1.2) is said to be stable if for any  $\varepsilon < 0$ , there exist  $\delta = \delta(\varepsilon) > 0$  such that if  $||x(0) - x^*|| < \delta$ , then  $||\vartheta(t, x(0) - x^*|| < \varepsilon$  for all  $t \ge 0$ . Here  $\vartheta(t, x(0))$  represents the solution of system (1.2) at a time t that started of x(0). If besides,  $||\vartheta(t, x(0) - x^*|| \rightarrow 0$  as  $t \rightarrow 0$  for all  $||x(0) - x^*||$  sufficiently small, then the equilibrium point  $x^*$  is said it to be asymptotically stable. The equilibrium point that is not stable is said to be unstable.

#### 1.4.1.3 Definition

An equilibrium point  $x^*$  The system (1.2) is globally asymptotically stable if it is asymptotically stable for any initial point (0)  $\in R$ .

#### 1.4.1.4 Definition

Let  $x^*$  Be an equilibrium point of the system (1.2). then  $x^*$  is called a hyperbolic equilibrium point if some of the eigenvalue of  $J = dF(x^*)$  has zero areal part. Otherwise, it is a non-hyperbolic equilibrium point.

Note that according to the above argument, the following classification of an equilibrium point  $x^*$  Of the system (1.2) can be made.

(A) A saddle Point: A hyperbolic equilibrium point of a vector field given by Eq. (1.2) termed a saddle point if some, but not all, of the eigenvalues of  $J = dF(x^*)$ , have positive real parts, and the rest of the eigenvalues have genuine negative parts.

(B) A stable Node (sink): If all the eigenvalues of  $J = dF(x^*)$  have negative real parts, then the hyperbolic equilibrium point, is called a stable node or sink.

(C) Unstable Node (source): If all the eigenvalues of  $J = dF(x^*)$  have positive real parts, then the hyperbolic equilibrium point, is called an unstable node or source.

(D) Center: if all the eigenvalues of  $J = dF(x^*)$  are purely imaginary and non-zero, then the non-hyperbolic equilibrium point is called a center (Henry, 1994).

#### 1.4.2 Lyapunov Method

The mechanism of Lyapunov is an effective tool for evaluating the equilibrium of the stability or unitability of nonlinear systems. In addition, zero and infinite dimensions' work; the fundamental concept of this technique is as follows.

Suppose that a vector field (1) exists with an equilibrium point x, then determining whether x is stable, it is sufficient to find a neighborhood N of X for which the orbits starting in N remain in N for all positive time. This condition would be satisfied if it can be shown that the vector field is either tangent to the boundary of N or pointing inward towards X. This situation should also remain true even as N is shrunk down onto X. Notice that the Lyapunov process understands how this condition is illustrated. The general theorem for the stabilization of an equilibrium point thus describes these principles in the following theorem (PARKS, A. M. Lyapunov's stability theory—100 years on, 1992).

#### Theorem 1.1 (Lyapunov Stability Theorem).

Let *X* be an equilibrium point of system (1) and let  $L: N \rightarrow R$  be a *C* real-valued function defined on some neighborhoods *N* of *X* ( $N \subseteq R^n$ ) such that:

- 1. L(x) = 0 and L(x) > 0 for all  $x \in N$ ,  $x \neq X$  (that means L is a positive definite function).
- 2.  $\frac{d}{dt}L(x) > 0$  in  $N \{X\}$ , then X is stable.
- 3.  $\frac{d}{dt}(x) < 0$  in  $N \{X\}$ , then X is asymptotically stable.

Note that the function L provided above is recognized as the function Lyapunov (weak function Lyapunov) if and only if the assumptions (1) and (2) hold. On the other hand, the Lyapunov function (strong Lyapunov function) is strictly understood if and only if conditions (1) and (3) have it. Besides, when it is possible to choose N to be all of  $R_n$ , then X is said to be worldwide asymptotically constant if conditions (1) and (3) hold (PARKS, 1992).

#### 1.4.2.1 Definition

A scaler function V(x) in any domain D, is a Lyapunov function for nay dynamic system x = F(x) if its continuous and there exist a  $\delta > 0$  such that for any  $x \in D$ ,

- 1. V(x) has a positive defined function about x,
- 2. V(x) has continuous partial derivative,
- 3. V(x) is a negative semi-defined.

#### 1.4.2.2 Definition

Let

x = f(x), f(0) = 0. (1.3)

A set  $M \subseteq \mathbb{R}^n$  is said to be

- an invariant set concerning (1.3) if  $x(0) \in M \Rightarrow x(t) \in M, \forall t \in R$ .
- a positively invariant set concerning if:  $x(0) \in M \implies x(t) \in M, \forall t \ge 0$ .

#### Theorem 1.2 (LaSalle's Theorem).

Let  $\Omega \subset D \subset \mathbb{R}^n$  be a compact, positively invariant set for the system dynamics (1.3). Let  $V : D \to \mathbb{R}$  be a continuously differentiable function such that  $V(x(t)) \leq 0$  in  $\Omega$ . Let  $E \subset \Omega$  be the set of all points in  $\Omega$  where V(x) = 0. Let  $M \subset E$  be the largest invariant set in E. Then any solution starts in the  $\Omega$  approaches M as  $t \to \infty$ , that is

$$\lim_{t \to \infty} (\inf ||x(t) - z||) = 0, \text{ where } \inf ||x(t) - z|| = dist (x(t), M).$$

#### **1.4.3 Jacobian Matrix**

Generally, any  $f: \mathbb{R}^m \to \mathbb{R}^n$  is defined by *n* coordinate functions  $f_1, f_2, \dots, f_n$  and we write

$$f = \begin{pmatrix} f_1(x_1, \dots x_m) \\ f_2(x_1, \dots x_m) \\ \vdots \\ \vdots \\ f_n(x_1, \dots x_m) \end{pmatrix}.$$
 (1.4)

Then, our first issue is how we interpret the derivative of several variables as a vector-valued function. Recall that if  $f: \mathbb{R}^2 \to \mathbb{R}$ , then we can form the directional product, i.e.,

$$D_u f = u_1 \frac{\partial f}{\partial x} + u_2 \frac{\partial f}{\partial y} = \nabla f \times u,$$

where  $u = (u_1, u_2)$  is a unit vector. Thus, knowledge of the gradient of (f) provides all directional derivatives details. It is rational, thus, to presume

$$\nabla_{\mathbf{p}} f = \left(\frac{\partial f}{\partial x} (\mathbf{p}), \frac{\partial f}{\partial y} (\mathbf{p})\right)$$

is the derivative of (f) at (p). (The story is more complicated than this, but when we say f is differentiable, we mean  $\nabla f$  represents the derivative, to be discussed a little later). More generally, if  $f: \mathbb{R}^m \to \mathbb{R}$ , then we take the derivative at (p) to be the row vector

$$\left(\frac{\partial f}{\partial x_1} (\mathbf{p}), \frac{\partial f}{\partial x_2} (\mathbf{p}), \dots, \frac{\partial f}{\partial x_m} (\mathbf{p})\right) = \nabla_{\mathbf{p}} f.$$

Now take  $f: \mathbb{R}^m \to \mathbb{R}^n$  where f is as in equation (1.4), then the natural candidate for the derivative of f at p is

$$Jpf = \begin{pmatrix} \frac{\partial f_1}{\partial x_1} & \frac{\partial f_1}{\partial x_2} & \cdots & \frac{\partial f_1}{\partial x_m} \\ \frac{\partial f_2}{\partial x_1} & \frac{\partial f_2}{\partial x_2} & \cdots & \frac{\partial f_2}{\partial x_m} \\ & & \ddots & \\ & & \ddots & \\ \frac{\partial f_n}{\partial x_1} & \frac{\partial f_n}{\partial x_2} & \cdots & \frac{\partial f_n}{\partial x_m} \end{pmatrix},$$
(1.5)

where the partial derivatives are evaluated at p. This  $n \times m$  matrix is termed the Jacobian matrix of (f). Writing the function f as a column assists us get the Jacobian matrix rows and columns the right way. Note the Jacobian is generally the determinant of this matrix when the matrix is square, i.e., when m = n (Tisdell, 2011).

#### Theorem 1.3 (Stability of Nonlinear Systems).

Consider the system

$$x'(t) = f(x, y), \quad y'(t) = g(x, y),$$

where f, g is differentiable with continuous partial derivatives, and they both disappear at the point  $(x_0, y_0)$ . Let J denote the Jacobian matrix at that point, namely

$$J = \begin{pmatrix} f_x(x_0, y_0) & f_y(x_0, y_0) \\ g_x(x_0, y_0) & g_y(x_0, y_0) \end{pmatrix}$$

If all eigenvalues of (*J*) have a negative real part, then  $(x_0, y_0)$  is asymptotically stable. And if some eigenvalue of (*J*) has a positive real part, then  $(x_0, y_0)$  is unstable.

#### Remark 1.1

This theorem provides no conclusions in the case that some eigenvalue of J has zero real part. Should that case arise, stability can be determined either by finding a Lyapunov function for the system or else by explicitly solving the method.

#### **1.5 Sensitivity Analysis**

(H.S.rodrigues, monteiro, torres, 2013), the normalized forward sensitivity index of  $R_0$  that depended differentiable on parameter *P* is defined by

$$Y_P^{R_0} = \frac{\partial R_0}{\partial P} \times \frac{P}{R_0}.$$

For mathematical models, sensitivity analysis is highly significant. The variance of a model's outputs induced by differences in the inputs is analyzed by sensitivity analysis. Sensitivity analysis basically defines the parameters, and initial conditions (inputs) influence the model's quantities of interest (outputs) the most (Francesca,Keith,Jim, 2016). The first explanation for this study's significance is that it shows the researcher which parameters merit the most numerical consideration. As a small difference in that parameter can result in significant quantitative changes to the volume of interest and yield qualitatively different outcomes, a highly sensitive parameter should be meticulously planned. Qualitative changes to an amount of interest fall under the scope of bifurcation theory and will not be explored in great detail here (M. Teresa. Monteiro,Delfim , 2013).

An insensitive parameter, on the other hand, does not take as much work to measure. A slight difference in the parameter would not cause a significant amount of concern to shift. In model

analysis, the most sensitive parameters are often the most well-established, since they do not alter much from one time to the next. The second explanation for sensitivity analysis is more pronounced if this is the case (Keith, Jim f., Jim w., 2016). That is, sensitivity analysis highlights which parameters should be attacked in management strategies. One purpose of mathematical modeling is to decide what a system's current result could be, and to figure out how to adjust any detrimental results if appropriate. Adjusting the most sensitive parameters' values would be the most powerful technique for modifying the effects of the model. The model will then implement any applicable real-world scenarios that will change the most sensitive parameter values obtain the control the to most over outcome (Edmundas, Zenonas, Titas, 2007)

#### **CHAPTER 2**

#### SENSITIVITY ANALYSIS WITHOUT VACCINATION

We have analyzed an outbreak model of (Covid-19) with one strain liner in this chapter. The model contains two equilibrium points; disease-free equilibrium point and endemic equilibrium point.

Using the Jacobian matrix, we found eigenvalues to show the global asymptotically stability for both the equilibrium points. The basic reproduction number,  $R_0$ , is found by applying the next generation matrix to demonstrate that the outbreak dies out if it is less than one, and if it is more than one, an outbreak happens.

In final, to support the analytic results, the numerical simulation was carried out, and the sensitivity analysis was used to show each parameter's effect on the pandemic.

#### 2.1 Model without Vaccine for Covid-19

We considered a framework for (Covid-19) in this section, (Figure 2.1). The population N(t) is divided into three compartments, which are S(t), I(t), and R(t) that denotes the population of susceptible, infected, and recovered individuals, respectively.



Figure 2.1: Transfer diagram of the model.

With using Figure (2.1) and with the following assumptions,

- 1. The population is fixed,
- 2. The natural birth and death rate are included in the model,
- 3. All birth is for susceptible class only,

the system of ordinary differential equations is obtained. Parameters are explained in Table 2.1.

$$\frac{dS(t)}{dt} = \Lambda - (\beta I(t) + \mu)S(t),$$
  

$$\frac{dI(t)}{dt} = \beta I(t)S(t) - (\mu + y + d)I(t),$$
(2.1)  

$$\frac{dR(t)}{dt} = \mu I(t) - d R(t).$$

Table 2.1: Describes the variable and the parameter of the model (2.2).

Parameters	Descriptions
Λ	The recruitment rate of individual
В	The transmission coefficient of susceptible to the infection
D	compartment
d	The death rate from the disease
$\frac{1}{\mu}$	Average time of life expanding
$\frac{1}{y}$	Average infection period

### 2.2 Mathematical Analysis

Since N = S + I + R,

$$N'(t) = \frac{dS}{dt} + \frac{dI}{dt} + \frac{dR}{dt}$$
  
=  $\Lambda - (\beta I(t) + \mu)S(t) + \beta I(t)S(t) - (\mu + y + d)I(t)$   
+  $y I(t) - \mu R(t) - \mu S(t) - (\mu + d)I(t) - \mu R(t)$   
 $\leq \Lambda - \mu N(t),$ 

then,

$$\frac{dN}{dt} = \Lambda - \mu N.$$

Hence, the general solution is obtained as

$$N(t) = \frac{\Lambda}{\mu} + c e - \mu t,$$

thus,

$$\lim_{t\to\infty}\sup\left(S+I+R\right)\leq\frac{\Lambda}{\mu}.$$

The feasible region for (2.1) is,

$$\pi = \{ (S + I + R) : S + I + R \le \Lambda, S(t) > 0, I(t) \ge 0, R(t) \ge 0 \},\$$

Therefore, in the system (2.1), instead of R(t), it can be written, N(t) - S(t) - I(t). Then it is enough to study with the following system,

$$\frac{dS(t)}{dt} = \Lambda - (\beta I(t) + \mu)S(t),$$
  
$$\frac{dI(t)}{dt} = \beta I(t)S(t) - (\mu + \gamma + d)I(t).$$
 (2.3)

### 2.2.1 Equilibria Point

To detect the equilibrium points of the system (2.3), each equation is equalized to zero as follows:

$$\Lambda - (\beta I(t) + \mu) S(t) = 0, \qquad (2.4)$$

$$\beta I(t) S(t) - (\mu + y + d) I(t) = 0.$$
(2.5)

Then, we have two biologically equilibrium points;

For disease free equilibrium point, I(t) = 0,

$$\Lambda - \mu S(t) = 0 \implies S(t) = \frac{\Lambda}{\mu}.$$

for endemic equilibrium point  $I(t) \neq 0$ ,

$$\Lambda - (\beta I(t) + \mu)S(t) = 0 \implies S(t) = \frac{\Lambda}{\beta I(t) + \mu}.$$
(2.6)

If put (2.5) in (2.6) we get,

$$\beta I(t) \frac{\Lambda}{\beta I(t) + \mu} - (\mu + y + d) I(t) = 0,$$

$$\left[\beta \frac{\Lambda}{\beta I(t) + \mu} - (\mu + y + d)\right] I(t) = 0.$$

$$I(t) = 0 \qquad \text{or} \qquad \beta \frac{\Lambda}{\beta I(t) + \mu} - (\mu + y + d) = 0.$$

Since,

$$I(t) \neq 0 \implies \frac{\beta \Lambda}{\beta I(t) + \mu} - (\mu + y + d) = 0,$$
  
$$(\beta I(t) + \mu)(\mu + y + d) = \beta \Lambda,$$
  
$$I(t) = \frac{\Lambda}{\mu + y + d} - \frac{\mu}{\beta}.$$

By using the above calculations, the below two equilibrium points have been acquired:

- *i*) disease-free equilibria point  $E_0 = (S_0, I_0) = \left(\frac{\Lambda}{\mu}, 0\right)$
- *ii* ) the endemic equilibrium point  $E_1 = (S^*, I^*) = \left(\frac{\mu + y + d}{\beta}, \frac{\Lambda}{\mu + y + d} \frac{\mu}{\beta}\right)$ .

Since  $E_0$  is always positive for the equilibrium point (biologically), we only need to show endemic equilibrium is greater than or equal to zero. The first coordinate of the endemic equilibrium,

$$S^* = \frac{\mu + y + d}{\beta}$$

which is always positive. For the existence of the second coordinate,  $I^*$  must be greater than zero, that means

$$I^* = \frac{\Lambda}{\mu + y + d} - \frac{\mu}{\beta} > 0.$$

Therefore,

$$\frac{\Lambda}{\mu+y+\,d}\,\geq\,\frac{\mu}{\beta}\!.$$

Hence the endemic equilibria exist if,

$$\frac{\Lambda\beta}{\mu(\mu + y + d)} \ge 1.$$

#### 2.2.2 Basic Reproduction Number

This can be described as the number of secondary infections in a fully susceptible population induced by an infected person. Here, we utilize matrix approach of the next generation to test it.

$$F = \begin{bmatrix} 0 \\ \beta S(t)I(t) \end{bmatrix}, V = \begin{bmatrix} -\Lambda + (\beta I(t) + \mu) S(t) \\ (\mu + y + d) I(t) \end{bmatrix}$$
$$\partial F = \begin{bmatrix} 0 & 0 \\ \beta I(t) & \beta S(t) \end{bmatrix}, \quad \partial V = \begin{bmatrix} \beta I(t) + \mu & \beta S(t) \\ 0 & \mu + y + d \end{bmatrix}$$
$$\partial F(E_0) = \begin{bmatrix} 0 & 0 \\ 0 & \beta \frac{\Lambda}{\mu} \\ 0 \end{bmatrix}, \quad \partial V(E_0) = \begin{bmatrix} d\mu & \beta \frac{\Lambda}{\mu} \\ 0 & \mu + y + d \end{bmatrix}$$
$$V^{-1} = \frac{1}{\det V} \times adj V$$
$$V^{-1} = \frac{1}{d(\mu + d)} \begin{bmatrix} \mu + y + d & -\beta \frac{\Lambda}{\mu} \\ 0 & d \end{bmatrix} = \begin{bmatrix} \frac{1}{d\mu} & \frac{-\beta\Lambda}{\mu(\mu + y + d)} \\ 0 & \frac{1}{\mu + y + d} \end{bmatrix}$$

the basic reproduction number is the spectrum of the  $FV^{-1}$ ,  $G = FV^{-1}$ .

$$G = F V^{-1} = \begin{bmatrix} 0 & 0 \\ 0 & \beta \frac{\Lambda}{\mu} \end{bmatrix} \begin{bmatrix} \frac{1}{d} & \frac{-\beta\Lambda}{\mu^2(\mu+d)} \\ 0 & \frac{1}{\mu+y+d} \end{bmatrix} = \begin{bmatrix} 0 & 0 \\ 0 & \frac{\beta\Lambda}{\mu(\mu+y+d)} \end{bmatrix}$$

The Jacobian matrix of (G) will be

$$R_{01} = \frac{\beta \Lambda}{\mu(\mu + y + d)}.$$
 (2.7)

# 2.3 Stable Analysis

**Theorem 2.1.** The disease-free equilibrium  $E_0$  is locally asymptotically stable.

**Proof.** Evaluating (2.2) in the Jacobian matrix, we get,

22

Let

$$J(S,I) = \begin{bmatrix} -\beta I(t) - \mu & -\beta S(t) \\ \beta I(t) & \beta S(t) - (\mu + y + d) \end{bmatrix}.$$
 (2.8)

Evaluating the disease-free equilibria point  $E_0$  in (2.4) Jacobian matrix we get,

$$J\left(\frac{\Lambda}{\mu},0\right) = \begin{bmatrix} -\mu & -\beta \frac{\Lambda}{\mu} \\ 0 & \beta \frac{\Lambda}{\mu} - (\mu + y + d) \end{bmatrix}.$$

By using the previous Jacobian matrix, the eigenvalues obtained as  $\lambda_1 = -\mu$  and  $\lambda_2 = \frac{\beta \Lambda}{\mu} - (\mu + y + d)$ .

Since  $\lambda_1 < 0$ , to show that the stability of the disease-free equilibrium  $E_0$ , we need to show

$$\begin{split} \lambda_2 &< 0, \\ \lambda_2 &= \frac{\beta \Lambda}{\mu} - (\mu + y + d) = (\mu + y + d) \left( \frac{\beta \Lambda}{\mu(\mu + y + d)} - 1 \right) = (\mu + y + d) (R_{01} - 1). \end{split}$$

Since  $\lambda_2 < 0$ , if  $R_{01} < 1$ , then both eigenvalues are negative, so the disease-free equilibrium point is locally asymptotically stable.

Furthermore, the global stability condition of  $E_0 = \left(\frac{\Lambda}{\mu}, 0\right)$  is established in the Theorem 2.2.

**Theorem 2.2.** If  $R_0 \le 1$ , then the system's disease-free equilibrium point is worldwide asymptotically stable on U.

**Proof.** To establish the global stability of disease equilibrium point, we build the below Lyapunov function W:  $U \rightarrow R$ . Then the time derivative of W is

W'(S, I) = 
$$\beta I(t)S(t) - (\mu + y + d)I(t)$$
,  
W'(S, I) =  $(\mu + y + d)I(t)[R_{01} - 1]$ .

Thus,  $W'(S, I) \le 0$  for  $R_{01} \le 1$ , further W'(S, I) = 0 and if  $R_{01} = 1$ , then W'(S, I) = 0. Hence, by the LaSalle invariance principle, the diseases free equilibrium point is globally asymptotically stable. **Theorem 2.3.** The endemic equilibrium  $E_1$  is locally asymptotically stable.

**Proof.** Evaluating the endemic equilibria point  $E_1$  in (2.4) Jacobian matrix we get,

$$J\left(\frac{\mu+y+d}{\beta},\frac{\Lambda}{\mu+y+d}-\frac{\mu}{\beta}\right) = \begin{bmatrix} \frac{-\Lambda\beta}{\mu+y+d} & -(\mu+y+d)\\ \frac{\Lambda\beta}{\mu+y+d}-\mu & 0 \end{bmatrix}.$$

By using the previous Jacobian matrix, the eigenvalues obtained from the characteristic equation of the endemic equilibria point

$$\lambda^{2} + R_{01}\lambda + d(\mu + y + d)(R_{01} - 1) = 0.$$

The root of the above equation or the eigenvalue is,

$$\lambda_{1,2} = \frac{1}{2} \left[ -R_{01} \pm \sqrt{R_0^2 - 4d(\mu + y + d)(R_0 - 1)} \right].$$

Since  $4d(\mu + y + d)(R_{01} - 1)$  it is positive. The volume under the square root is getting  $R_{01}^2$   $< 4d(\mu + y + d)(R_{01} - 1)$  then the eigenvalues are complex with a negative real part. If  $R_{01}^2 > 4d(\mu + y + d)(R_{01} - 1)$  then the volume under the square root must be smaller than  $R_0$ . We both assume that the endemic equilibrium point is asymptotically stable since the real part of both eigenvalues is negative with one condition, which is under the square root must be smaller than  $R_{01}$ .

Furthermore, the global stability condition of  $E_0 = \left(\frac{\mu+y+d}{\beta}, \frac{\Lambda}{\mu+y+d} - \frac{\mu}{\beta}\right)$  is established in the Theorem 2.4.

**Theorem 2.4**. The endemic equilibrium point  $E^*(S^*, I^*)$  is the system is globally asymptotically stable on  $\mathcal{O}$ .

**Proof.** We construct a Lyapunov function

$$L: \mho + \rightarrow R$$
,

where

$$\forall + = \{S(t), I(t) \in \forall, S(t) > 0, \qquad I(t) > 0\}.$$

They are given, where W1 and W2 are positive constant,
$$L(S,I) = W1\left[(S-S^*)In\left(\frac{S}{S^*}\right)\right] + W2\left[(I-I^*)In\left(\frac{I}{I^*}\right)\right].$$

Then, the time derivative is given by,

$$\frac{dL}{dt} = W_1(S - S^*)(\frac{\Lambda}{S} - \beta I - \mu) + W_2(I - I^*)(\beta S - (\mu + y + d)),$$

consider the equilibrium point we get  $\beta S^* = \mu + y + d$ ,  $\mu = \frac{\Lambda}{S} - \beta I^*$ , and

$$\frac{dL}{dt} = \beta(S - S^*)(I - I^*)(W1 - W2).$$

For W1 and W2, if we put the same price,  $\frac{dL}{dt} \le 0$  also if  $S = S^*$  and  $I = I^*$ ,  $\frac{dL}{dt} = 0$ . Hence, by the LaSalle invariance principle, the endemic equilibrium point is globally asymptotically stable.

# **2.4 Numerical Simulations**

The simulation was conducted for the initial state utilizing following value (S,I) = (471,7); the final time was t = 100 days. Solved numerically by using the (ode45) solvers in Matlab in a table, and the parameter is given in Table 2.2.

Parameters	Values
Λ	200
В	0.005
d	0.02
μ	0.002
у	0.69

Table 2.2: The value of the parameters in the system (2.2).



Figure 2.2: State variable of the system (2.1) with initial condition and parameter in Table 2.2.

#### 2.5 Sensitivity Analysis

Give the free formula (2.3) for  $R_0$ ; a theoretical expression for the sensitivity of  $R_0$  can be conveniently obtained with regard to each parameter in Table 2.1. The values of the parameters obtained are listed in Table 2.2, which displays the sensitivity indices in the last row of the table for the baseline parameter value in Table 2.2.

Take sensitivity for parameter  $\beta$ ,

$$Y_{\beta}^{R_{0}} = \frac{\partial R_{0}}{\partial \beta} \times \frac{\beta}{R_{0}} \rightarrow \frac{\Lambda}{\mu(\mu + y + d)} \times \frac{\beta \mu(\mu + y + d)}{\Lambda \beta} = 1.$$

Take sensitivity for parameter  $\Lambda$ ,

$$Y_{\Lambda}^{R_0} = \frac{\partial R_0}{\partial \Lambda} \times \frac{\Lambda}{R_0} \rightarrow \frac{\beta}{\mu(\mu + y + d)} \times \frac{\Lambda \mu(\mu + y + d)}{\Lambda \beta} = 1.$$

Take sensitivity for parameter d,

$$Y_{d}^{R_{0}} = \frac{\partial R_{0}}{\partial d} \times \frac{d}{R_{0}} \rightarrow \frac{-\beta \Lambda \mu}{[\mu(\mu+y+d)]^{2}} \times \frac{d\mu(\mu+y+d)}{\Lambda \beta} = \frac{-d}{\mu+y+d} = -0.0280898.$$

Take sensitivity for parameter  $\mu$ ,

$$Y_{\mu}^{R_{0}} = \frac{\partial R_{0}}{\partial \mu} \times \frac{\mu}{R_{0}} \rightarrow \frac{-\beta \Lambda (2\mu + y + d)}{[\mu(\mu + y + d)]^{2}} \times \frac{\mu^{2}(\mu + y + d)}{\Lambda \beta} = \frac{-(2\mu + y + d)}{\mu + y + d} = -1.00228089.$$

Take sensitivity for parameter y,

$$Y_{y}^{R_{0}} = \frac{\partial R_{0}}{\partial y} \times \frac{y}{R_{0}} \rightarrow \frac{-\beta \Lambda \mu}{[\mu(\mu+y+d)]^{2}} \times \frac{y\mu(\mu+y+d)}{\Lambda \beta} = \frac{-y}{\mu+y+d} = -0.9691011.$$

By using the above calculations, we obtained Table 2.3 as follows.

Parameters	Values
Λ	1
β	1
d	-0.0280898
μ	-1.0022808
у	-0.9691011

Table 2.3: Sensitivity indices.

The sensitivity indices are positive and the remaining are negative. Since all indices are the other parameter's function, the sensitivity indices will change with different parameter values.

The most sensitivity parameter for  $R_0$  is the  $\beta$  (Transmission coefficient of (S) to (I),  $\Lambda$  (Recruitment of individual) have the positive sensitivity parameter,  $Y_{\Lambda,\beta}^{R_0} = +1$ 

(see Figure 2.3 and Figure 2.4), which has increased the sensitivity index, then the reproduction number has the same.

The parameter  $(d, y, \mu)$  has a negative sensitivity index (see figure 2.4,2.5,2.6). Then the average of expanding and rare disease, where those are increasing by 10%, the basic reproduction number is decreasing by 10%.

The most effective variables are  $\Lambda$  and y while the least effectives are  $\mu$  and d.



Figure 2.3: Effect on *I* of the variation of  $\Lambda$ , ;  $\Lambda = 220, \beta = 0.005, d = 0.02, y = 0.69, \mu = 0.002, (S, I) = (471,7).$ 



**Figure 2.4:** Effect on *I* of the variation of  $\beta$ ;  $\Lambda = 220, \beta = 0.0055, d = 0.02, y = 0.69, \mu = 0.002, (S, I) = (471,7).$ 



**Figure 2.5:** Effect on *I* of the variation of  $\mu$ ;  $\Lambda = 200, \beta = 0.005, d = 0.02, y = 0.69, \mu = 0.0022, (S, I) = (471,7).$ 



**Figure 2.6:** Effect on *I* of the variation of *d*;  $\Lambda = 200, \beta = 0.005, d = 0.022, y = 0.69, \mu = 0.002, (S, I) = (471,7).$ 



**Figure 2.7:** Effect on *I* of the variation of *y*;  $\Lambda = 200, \beta = 0.005, d = 0.02, y = 0.759, \mu = 0.002, (S, I) = (471,7).$ 

#### **CHAPTER 3**

### SENSITIVITY ANALYSIS WITH VACCINATION

We researched an outbreak model of (Covid-19) for one strain liner in this chapter. The model contains two equilibrium points; disease-free equilibrium point and endemic equilibrium point with vaccination influence.

The Jacobian matrix eigenvalue is used to show the global asymptotically stability for both of the equilibrium point. Basic reproduction number,  $R_0$ , is found, and we have to prove that the outbreak dies out if there is less than one, and if there is more than one epidemic.

In final, we showed that the numerical simulation was carried out to support the logical result. Furthermore, the reproduction number's sensitivity is used to show the effect of each parameter on the model.

### 3.1 Model with Vaccine for Covid-19

We considered a framework for Covid-19 in this section, (Figure 3.1). The population N(t) is divided into four compartments, which are S(t), V(t), I(t), and R(t) that denotes the population of susceptible, vaccinated, infected, and recovered individuals, respectively.



Figure 3.1: Transfer diagram of a model with vaccination.

With using Figure 3.1 and with the following assumptions,

- 1. The population is fixed,
- 2. The natural birth and death rate are included in the model,
- 3. All birth is for susceptible class only,
- 4. There is no double infection,

we obtained the following system of ordinary differential equation,

$$\frac{dS(t)}{dt} = \Lambda - (\beta I(t) + r + \mu) S(t),$$

$$\frac{dV(t)}{dt} = r S(t) - k I(t)V(t) - (\mu + 1 - k)V(t),$$

$$\frac{dI(t)}{dt} = [\beta S(t) + kV(t)]I(t) - (\mu + y + d)I(t),$$

$$\frac{dR(t)}{dt} = (1 - k) V(t) + y I(t) - \mu R(t).$$
(3.1)

Tab	le 3	.1:	De	escrip	otion	of	variab	les	and	parameters	used	in	the	mode	el (	(3.1	1).
-----	------	-----	----	--------	-------	----	--------	-----	-----	------------	------	----	-----	------	------	------	-----

Parameters	Description				
Λ	The recruitment rate of individual				
D	The transmission coefficient of susceptible to the infection				
D	compartment				
d	The death rate from the disease				
1	Average time of life expanding				
μ					
1	Average infection period				
У					
r	Rate of vaccination				
k	The transmission coefficient of vaccination $V$ to $I$				
1 - k	The transmission coefficient of vaccination $V$ to $R$				

# **3.2 Mathematical Analysis**

Since,

$$N = S + V + I + R,$$
  
$$\frac{dN}{dt} = \frac{dS(t)}{dt} + \frac{dV(t)}{dt} + \frac{dI(t)}{dt} + \frac{dR(t)}{dt}.$$

Then,

$$\begin{aligned} \frac{dN}{dt} &= \Lambda - (\beta I(t) + r + \mu)S(t) \\ &+ [\beta S(t) + kV(t)]I(t) - (\mu + y + d)I(t) + rS \\ &- k I(t)V(t) - (\mu + 1 - k)v(t) + (1 - k)V(t) + y I(t) \\ &- \mu R(t) \leq \Lambda - \mu N. \end{aligned}$$

Therefore,

$$\frac{dN}{dt} = \Lambda - \mu N.$$

Hence, the general solution is obtained as

$$N(t) = \frac{\Lambda}{\mu} + c e - \mu t.$$

Thus,

$$\lim_{t\to\infty}\sup N(t)\leq \frac{\Lambda}{\mu}.$$

The feasible region for (3.1) is,

$$\pi = \{ (S + I + V + R) : S + I + V + R \le \Lambda, S(t) > 0, V(t) \ge 0, I(t) \\ \ge 0, R(t) \ge 0 \}.$$

Therefore, in the system (3.1) instead of R(t) it can be written, N(t) - S(t) - V(t) - I(t). So, it is enough to study with the following system,

$$\frac{dS(t)}{dt} = \Lambda - (\beta I(t) + r + \mu)S(t),$$
  

$$\frac{dV(t)}{dt} = r S(t) - k I(t)V(t) - (\mu + 1 - k)V(t),$$
  

$$\frac{dI(t)}{dt} = [\beta S(t) + kV(t)] I(t) - (\mu + y + d) I(t).$$
(3.2)

# **3.2.1 Equilibria Point**

To detect the equilibrium point of the system (3.2), each equation is equalized to zero,

$$\Lambda - (\beta I(t) + r + \mu) S(t) = 0, \qquad (3.3)$$

$$r S(t) - k I(t) V(t) - (\mu + 1 - k) V(t) = 0, \qquad (3.4)$$

$$[\beta S(t) + kV(t)] I(t) - (\mu + y + d) I(t) = 0.$$
(3.5)

Then, biologically we have two equilibrium points, where  $\alpha = \mu + y + d$ ,  $\delta = \mu + r$ .

For disease free equilibrium point, I(t) = 0.

Putting it in equation (3.3) we get,

$$S(t) = \frac{\Lambda}{\mu + r}.$$
(3.6)

Putting it in equation (3.3) we get,

$$r S(t) - (\mu + 1 - k) V(t) = 0.$$

Hence,

$$V(t) = \frac{r \ s(t)}{\mu + 1 - k}.$$
(3.7)

Putting equation (3.6) in equation (3.7), we get,

$$V(t) = \frac{\Lambda r}{(\mu + r)\mu + 1 - k}.$$

For endemic equilibrium point  $I(t) \neq 0$ , we putted it in equation (3.3) and we get,

$$S(t) = \frac{\Lambda}{\beta I(t) + \mu + r}.$$
(3.8)

Put in equation (3.4) we get,

$$r S(t) - [k I(t) - (\mu + 1 - k)] V(t) = 0.$$

Hence,

$$V(t) = \frac{r S(t)}{k I(t) - (\mu + 1 - k)}.$$
(3.9)

Put in equation (3.5) we get,

$$([\beta S(t) + k V(t)] - (y + \mu + d)) I(t) = 0.$$

So, this means either I(t) = 0 or  $\left( \left[ \beta S(t) + k V(t) \right] - (y + \mu + d) \right) = 0$ .

But we say  $I(t) \neq 0$  so,

$$[\beta S(t) + k V(t)] - (y + \mu + d) = 0, \text{ and}$$

$$V(t) = \frac{(y + \mu + d) - \beta S(t)}{k}$$
(3.10)

Equalizing to (3.8), (3.9) and putting equation (3.6) we get,

$$\frac{\frac{r\Lambda}{\beta I(t) + (\mu + r)}}{k I(t) - (\mu + 1 - k)} = \frac{(y + \mu + d) - \frac{\beta\Lambda}{\beta I(t) + (\mu + r)}}{k}$$

and,

$$\frac{r\Lambda k}{\beta I(t) + (\mu + r)} = (y + \mu + d)k I(t) - (y + \mu + d)(\mu + 1 - k) - \frac{(y + \mu + d)\beta\Lambda k I(t) - (\mu + 1 - k)\beta\Lambda}{\beta I(t) + (\mu + r)},$$

$$\beta \alpha k (I^*)^2 + \left[ \alpha \left( k\delta + \beta (\mu + 1 - k) \right) - \beta \Lambda k \right] I^* + \delta (\mu + 1 - k) \alpha - r \Lambda k - \beta \Lambda (\mu + 1 - k) = 0.$$

By using the above calculations, we obtained the followings:

*i* ) Disease-free equilibria point,

$$E_0 = (S_0, V_0, I_0) = \left(\frac{\Lambda}{\mu + r}, \frac{\Lambda r}{(\mu + r)\mu + 1 - k}, 0\right).$$

ii ) The endemic equilibrium point

$$E_{1} = (S^{*}, V^{*}, I^{*}) = \left(\frac{\Lambda}{\beta I^{*} + \delta}, \frac{(y + \mu + d) - \beta S(t)}{k}, I^{*}\right).$$

where  $I^*$  is the solution of the following equation,

$$\beta \boldsymbol{\alpha} \operatorname{k} (\mathrm{I}^*)^2 + \left[ \boldsymbol{\alpha} \left( k \delta + \beta (\mu + 1 - \mathrm{k}) \right) - \beta \Lambda \mathrm{k} \right] \mathrm{I}^* + \delta(\mu + 1 - \mathrm{k}) \boldsymbol{\alpha} - \mathrm{r} \Lambda \mathrm{k} - \beta \Lambda(\mu + 1 - \mathrm{k}) = 0.$$

Since  $E_1$  is always positive for the equilibrium point (biologically), we only need to show endemic equilibrium is greater than or equal to zero. The first coordinate of the endemic equilibrium,

$$S^* = \frac{\Lambda}{\beta \ I^* + \delta}$$

is always positive. For the existence of the second coordinate, I\* must be greater than zero, that means,

$$V^* = \frac{(y+\mu+d) - \beta S(t)}{k}.$$

Hence, exist if  $k \ge 0$ .

When  $I^*$  given by,

$$\beta \boldsymbol{\alpha} \operatorname{k} (\mathrm{I}^*)^2 + \left[ \boldsymbol{\alpha} \left( k \delta + \beta (\mu + 1 - \mathrm{k}) \right) - \beta \Lambda \mathrm{k} \right] \mathrm{I}^* + \delta \boldsymbol{\alpha} (\mu + 1 - \mathrm{k}) - r \Lambda \mathrm{k} - \beta \Lambda (\mu + 1 - \mathrm{k}) = 0.$$

The solution of I\* can be found with the following formula,

$$I^* = \frac{-b \pm \sqrt{b^2 - 4ac}}{2a}$$

here,

$$a = \beta \alpha k,$$
  

$$b = [\alpha(k\delta + \beta(\mu + 1 - k)) - \beta \Lambda k],$$
  

$$c = \delta(\mu + 1 - k)\alpha - r\Lambda k - \beta \Lambda(\mu + 1 - k).$$

I<sup>\*</sup> exist if  $4ac \leq 0$ . Since,  $a = \beta \alpha k \geq 0$  we only need to satisfy  $c \leq 0$ ,

$$\Rightarrow c = \delta(\mu + 1 - k)\alpha - r\Lambda k - \beta\Lambda(\mu + 1 - k) \le 0,$$
  
$$\Rightarrow \delta(\mu + 1 - k)\alpha \le r\Lambda k + \beta\Lambda(\mu + 1 - k),$$
  
$$\Rightarrow 1 \le \frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu + 1 - k}\right].$$

Therefore, I\* exist when,

$$1 \leq \frac{\Lambda}{\alpha\delta} \quad [\beta + \frac{rk}{\mu + 1 - k}], \, \alpha \left(k\delta + \beta(\mu + 1 - k)\right) > \beta\Lambda k \text{ and } -b > \sqrt{b^2 - 4ac}.$$

## 3.2.2 Basic Reproduction Number

A fully susceptible population can be described as the number of secondary infections triggered by an infected person. Here, we use the matrix approach of the next generation to test it. Where  $(F_i)$  is represents the rate of appearance of new infections into the compartment  $F_i$ ,  $V_i$  represent the rate of transfer output of the  $i^{th}$  compartment the rate transfer input of the  $i^{th}$  compartment. Where  $\alpha = \mu + y + d$ ,  $\delta = \mu + r$ .

Let

$$F = \begin{bmatrix} 0 \\ r S(t) \\ [\beta S(t) + kV(t)] I(t) \end{bmatrix}, V = \begin{bmatrix} -\Lambda + (\beta I(t) + \delta) S(t) \\ k I(t)V(t) + (\mu + 1 - k) v(t) \\ \alpha I(t) \end{bmatrix}.$$

$$\begin{aligned} \partial F &= \begin{bmatrix} 0 & 0 & 0 \\ r & 0 & 0 \\ \beta I(t) & k I(t) & \beta S(t) + k V(t) \end{bmatrix}, \\ \partial V &= \begin{bmatrix} \beta I(t) + \delta & 0 & \beta S(t) \\ 0 & k I(t) + (\mu + 1 - k) & k V(t) \\ 0 & 0 & \alpha \end{bmatrix}, \end{aligned}$$

put free equilibrium point  $\left(\frac{\Lambda}{\delta}, \frac{\Lambda r}{\delta(\mu+1-k)}, 0\right)$  in matrix we get,

$$\partial F(E_0) = \begin{bmatrix} 0 & 0 & 0 \\ r & 0 & 0 \\ 0 & 0 & \beta \frac{\Lambda}{\delta} + k \frac{\Lambda r}{\delta \alpha} \end{bmatrix}, \\ \partial V(E_0) = \begin{bmatrix} \delta & 0 & \beta \frac{\Lambda}{\delta} \\ 0 & (\mu + 1 - k) & k \frac{\Lambda r}{\delta \alpha} \\ 0 & 0 & \alpha \end{bmatrix}.$$

The basic reproduction number is the spectrum of the  $FV^{-1}$ . Let  $G = FV^{-1}$  and,

$$V^{-1} = \frac{1}{\det V} \times adj V$$

take the determinant to  $\partial V(E0)$  we get,

$$det V = \delta \begin{bmatrix} \mu + 1 - k & k \frac{r\Lambda}{\lambda(\mu + 1 - k)} \end{bmatrix} - 0 \begin{bmatrix} 0 & \beta \frac{\Lambda}{\mu} \\ 0 & \alpha \end{bmatrix} + \beta \frac{\Lambda}{\mu} \begin{bmatrix} 0 & \mu + 1 - k \\ 0 & 0 \end{bmatrix}$$

then,

$$det V = \delta \alpha \left(\mu + 1 - k\right), \tag{3.11}$$

$$adj \ V(E_0) = \begin{bmatrix} + \begin{bmatrix} \mu + 1 - k & k \frac{r\Lambda}{\delta(\mu + 1 - k)} \end{bmatrix} & - \begin{bmatrix} 0 & k \frac{r\Lambda}{\delta(\mu + 1 - k)} \end{bmatrix} & + \begin{bmatrix} 0 & \mu + 1 - k \end{bmatrix} \\ 0 & \alpha \end{bmatrix} \\ - \begin{bmatrix} 0 & \beta \frac{\Lambda}{\mu} \end{bmatrix} & + \begin{bmatrix} \lambda & \beta \frac{\Lambda}{\delta} \end{bmatrix} \\ - \begin{bmatrix} 0 & \beta \frac{\Lambda}{\mu} \end{bmatrix} \\ + \begin{bmatrix} 0 & \beta \frac{\Lambda}{\mu} \end{bmatrix} \\ + \begin{bmatrix} 0 & \beta \frac{\Lambda}{\mu} \end{bmatrix} \\ - \begin{bmatrix} \delta & \beta \frac{\Lambda}{\mu} \end{bmatrix} \\ + \begin{bmatrix} \delta & 0 \\ 0 & \mu + 1 - k \end{bmatrix} \end{bmatrix}$$

$$adj \ V(E_0) = \begin{bmatrix} \alpha(\mu + 1 - k) & 0 & -(\mu + 1 - k)\beta\frac{\Lambda}{\mu} \\ 0 & \delta\alpha & -k\frac{r\Lambda}{(\mu + 1 - k)} \\ 0 & 0 & \delta(\mu + 1 - k) \end{bmatrix},$$
$$V^{-1}(E_0) = \begin{bmatrix} \frac{1}{\delta} & 0 & \beta\frac{\Lambda}{\delta\alpha\mu} \\ 0 & \frac{1}{(\mu + 1 - k)} & -k\frac{r\Lambda}{\delta\alpha(\mu + 1 - k)^3} \\ 0 & 0 & \frac{1}{\alpha} \end{bmatrix}.$$

Then,

$$R_{02} = FV^{-1}$$

$$= \begin{bmatrix} 0 & 0 & 0 & 0 \\ r & 0 & 0 & 0 \\ 0 & 0 & \beta \frac{\Lambda}{\delta} + k \frac{r\Lambda}{\delta(\mu + 1 - k)} \end{bmatrix}$$

$$\times \begin{bmatrix} \frac{1}{\delta} & 0 & \beta \frac{\Lambda}{\delta \alpha \mu} \\ 0 & \frac{1}{(\mu + 1 - k)} & -k \frac{r\Lambda}{\delta \alpha (\mu + 1 - k)^3} \\ 0 & 0 & \frac{1}{\alpha} \end{bmatrix}$$

$$R_{02} = \frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right].$$

# **3.3 Stable Analysis**

**Theorem 3.1.** The disease-free equilibrium  $E_0$  is locally asymptotically stable.

**Proof.** Evaluating the Jacobian matrix, we get,

$$J(S, V, I) = \begin{bmatrix} -\beta I(t) - \delta & 0 & -\beta S(t) \\ r & -kI(t) - (\mu + 1 - k) & -kV(t) \\ \beta I(t) & kI(t) & \beta S(t) + kV(t) - \alpha \end{bmatrix}.$$
 (3.4)

Evaluating the disease-free equilibria point  $E_0$  in (3.4) Jacobian matrix we get,

$$J(\frac{\Lambda}{\delta}, \frac{\Lambda r}{\delta(\mu+1-k)}, 0) = \begin{bmatrix} -\delta & 0 & \frac{-\beta\Lambda}{\delta} \\ r & -(\mu+1-k) & -k \frac{\Lambda r}{\delta(\mu+1-k)} \\ 0 & 0 & \frac{\beta\Lambda}{\delta} + k \frac{\Lambda r}{\delta(\mu+1-k)} - \alpha \end{bmatrix}$$

Solving the matrix, those Eigenvalues we arrive,

$$(-\delta - \lambda) \left[ (-(\mu + 1 - k) - \lambda) \left( \frac{\beta \Lambda}{\delta} + k \frac{\Lambda r}{\delta(\mu + 1 - k)} - \alpha - \lambda \right) \right] = 0.$$

Further solving and simplifying the previous equation, we get,

$$\lambda_1 = -\delta$$
,  $\lambda_2 = -(\mu + 1 - k)$ ,  $\lambda_3 = \frac{\beta \Lambda}{\delta} + k \frac{\Lambda r}{\delta(\mu + 1 - k)} - \alpha$ ,

then  $E_0 = \left(\frac{\Lambda}{\delta}, \frac{\Lambda r}{\delta(\mu + 1 - k)}, 0\right)$ , is locally asymptotically stable if,

$$R_{02} < 1$$
 ,

furthermore, the global stability condition of  $E_0 = \left(\frac{\Lambda}{\delta}, \frac{\Lambda r}{\delta(\mu + 1 - k)}, 0\right)$  is established in the Theorem 3.2.

**Theorem 3.2.** The global stability of the disease-free equilibrium point of the system is globally asymptotically stable on *U*.

**Proof.** To find the global stability of the disease-free equilibrium point, we construct the following Lyapunov function,

$$W: \mathcal{O} \rightarrow R, W(S, V, I) = S(t) + I(t).$$

Then,

$$W'(S, V, I) = S'(t) + I'^{(t)},$$
$$W'(S, V, I) = \left[\frac{rAk}{\delta(\mu+1-k)} - (\mu+y+d)\right]I(t),$$
$$W'(S, V, I) = \left[\alpha(R_{02} - 1) - \frac{\beta\Lambda}{\delta}\right]I(t),$$

Thus, if  $R_{02} < 1$  then, W'(S, V, I) = 0. Hence, if  $R_{02} = 1$  then,  $W'(S, V, I) \le 0$  so by LaSalle invariance principle, the disease-free equilibrium point is globally asymptotically stable.

**Theorem 3.3.** The disease-free equilibrium  $E_0$  is locally asymptotically stable.

**Proof.** Evaluating the endemic equilibria point  $E_1$  in (3.4) Jacobian matrix we get,

$$J\left(\frac{\Lambda}{\beta I^* + \delta}, \frac{(y + \mu + d) - \beta S(t)}{k}, I^*\right)$$
$$= \begin{bmatrix} -\beta I^* - \delta & 0 & -\beta \frac{\Lambda}{\beta I^* + \delta} \\ r & -kI^* - (\mu + 1 - k) & \beta \frac{\Lambda}{\beta I^* + \delta} - \alpha \\ \beta I^* & kI^* & 0 \end{bmatrix}$$
$$-\beta I(t) - \delta - \lambda [(-kI(t) - \flat - \lambda)(\beta S(t) + kV(t) - \alpha - \lambda) + \delta I(t) + kV(t) - \alpha - \lambda]$$

$$k^2 V(t)I(t)] - \beta S(t)[rkI(t) + \beta I(t)(kI(t) + \mathbf{b} + \lambda)] = 0,$$

$$\Rightarrow [k\beta^2 S(t)I(t)^2 - \beta k \alpha I(t)^2 - \beta k\lambda I(t)^2 + \beta \beta^2 I(t)S(t) + \beta kV(t) \beta I(t) - \beta \alpha \beta I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) - \beta I(t)\beta \lambda + \lambda \beta^2 S(t)I(t) + \lambda k\beta V(t)I(t) + \lambda$$

$$\beta \lambda \alpha I(t) - \beta I(t) \lambda^{2}] + [\delta \beta k S(t) I(t) - \delta k \alpha I(t) - \delta k \lambda I(t) + \delta \beta S(t) + \\\delta \beta k V(t) - \delta \beta \alpha - \delta \beta \lambda + \delta \lambda \beta S(t) + \delta \lambda k V(t) - \delta \lambda \alpha - \delta \lambda^{2}] + \\[\lambda \beta k S(t) I(t) - \lambda k \alpha I(t) - k \lambda^{2} I(t) + \lambda \beta S(t) + \lambda \beta k V(t) - \lambda \beta \alpha - \beta \lambda^{2} + \\\lambda^{2} \beta S(t) + \lambda^{2} k V(t) - \lambda^{2} \alpha - \lambda^{3}] + [-rkI(t)\beta S(t) - \beta^{2} k I(t)^{2} S(t) - \\\beta \beta^{2} I(t) S(t) - \lambda \beta^{2} I(t) S(t))] = 0,$$

$$\Rightarrow -\lambda^3 + \lambda^2 [-\beta I(t) - \delta - b - kI(t) + \beta S(t) + kV(t) - \alpha] + \\ \lambda [-\beta kI(t)^2 - \beta I(t)b + k\beta V(t)I(t) - \beta \alpha I(t) - \delta kI(t) - \delta b + \\ \delta \beta S(t) + \delta kV(t) - \delta \alpha + \beta kS(t)I(t) - k \alpha I(t) + b\beta S(t) + bkV(t) - \\ b \alpha] + [-\beta k \alpha I(t)^2 + bkV(t) \beta I(t) - b \alpha \beta I(t) + \delta \beta kS(t)I(t) - \\ \delta k \alpha I(t) + \delta b \beta S(t) + \delta b kV(t) - \delta b \alpha - rkI(t)\beta S(t)] = 0.$$

So, from above calculation, we get,

$$\Rightarrow a\lambda^3 + b\lambda^2 + c\lambda + d,$$

then,

$$a=-1<0,$$

$$b = -\beta I^*(t) - \delta - b - kI^*(t) + \beta S^*(t) + \alpha - \beta S^*(t) - \alpha,$$
  
$$\Rightarrow -(\beta + k)I(t) - \delta - b < 0,$$

$$c = -\beta k I^{*}(t)^{2} - \beta I^{*}(t)b + \beta I^{*}(t)(\alpha - \beta S^{*}(t)) - \beta \alpha I^{*}(t) - \delta k I^{*}(t) - \delta b + \delta \beta S^{*}(t) + \delta(\alpha - \beta S^{*}(t)) - \delta \alpha + \beta k S^{*}(t) I^{*}(t) - k \alpha I^{*}(t) + b \beta S^{*}(t) + b(\alpha - \beta S^{*}(t)) - b \alpha,$$
  

$$\Rightarrow -\beta k I^{*}(t) - \beta b - \beta^{2} S^{*}(t) - \delta k - k^{2} V^{*}(t) < 0,$$

$$\begin{split} d &= -\beta k \,\alpha I^*(t)^2 \flat \,\beta I^*(t) \big( \alpha - \beta S^*(t) \big) - \flat \,\alpha \,\beta I^*(t) + \delta \beta k S^*(t) I^*(t) \\ &- \delta k \,\alpha I^*(t) + \delta \flat \beta S^*(t) + \delta \flat \big( \alpha - \beta S^*(t) \big) - \delta \flat \,\alpha \\ &- r k I^*(t) \beta S^*(t), \\ \Longrightarrow &- \alpha \beta k \, I^*(t) - \flat \beta^2 S^*(t) - r k \beta S^*(t) - \delta k^2 V^*(t) < 0, \end{split}$$

hence,

a, b, c, d < 0 we get all confliction is negative, hence we get all  $\lambda$  is negative, so the endemic equilibrium point is locally stable.

**Theorem 3.4.** the epidemic equilibrium point of the system is globally asymptotically stable on  $\mho$ .

**Proof.** To found the global stability of the epidemic equilibrium point, we construct the following Lyapunov function

$$L: \mho_+ \rightarrow R,$$

where

$$\emptyset + = \{S(t), I(t) \in \emptyset, S(t) > 0, V(t) > 0 \ I(t) > 0\}$$

given, where  $W_3$ ,  $W_2$  and  $W_3$  positive constant,

$$L(S, I, V) = W1 \left[ S - S^* \ln\left(\frac{S}{S^*}\right) \right] + W2 \left[ I - I^* \ln\left(\frac{I}{I^*}\right) \right]$$
$$+ W_3 \left[ V - V^* \ln\left(\frac{V}{V^*}\right) \right]$$

then, the time derivative is given by,

$$\frac{dL}{dt} = W_1(S - S^*) \left[ \frac{\Lambda}{S} - \beta I - \delta \right] + W_2(I - I^*) [(\beta S + kV) - (\mu + y + d)] + W_3(V - V^*) \left[ \frac{rS}{V} - kI - (\mu + 1 - k) \right]$$

consider the equilibrium point we get,

$$\begin{split} \delta &= \frac{\Lambda}{S^*} - \beta I^*, \ (\mu + y + d) = kv^* + \beta S^* \\ \frac{dL}{dt} &= -W_1 \frac{\Lambda(S - S^*)}{S^*S} - W \ \beta(S - S^*)(I + I^*) + W_2(I - I^*)\beta(S - S^*) \\ &- kW_2(I - I^*)(V^* - V) \\ \frac{dL}{dt} &= -W_1 \frac{\Lambda(S - S^*)}{S^*S} + \beta(W_2 - W_1)(I - I^*)(S - S^*) - kW_2(I - I^*)(V^* - V) \end{split}$$

Now if  $W_1 = W_2 = W_3$ , then

$$\frac{dL}{dt} = -W_1 \frac{\Lambda(S-S^*)}{S^*S} - kW_2(I-I^*)(V^*-V) \le 0 \text{ and if } S = S^* \text{ , } V^* = V \text{, then}$$
$$\frac{dL}{dt} = 0.$$

Hence, by using the LaSalle invariance principle, the endemic equilibrium point is globally asymptotically stable.

### **3.4 Numerical Simulations**

For the initial state, simulation was performed utilizing the below value (S, I, V) = (471, 7, 118), the final time was t = 100 days. Solved numerically by using the (ode45) solvers in Matlab in a table, and the parameter is given by Table 3.2.

**Table 3.2:** The value of the parameters in the system (3.2).

Parameters	Values
Λ	200
В	0.005
d	0.02
μ	0.002

у	0.69
r	0.2
k	0.00001



Figure 3.2: State variable of the system (3.1) with initial condition and parameter in Table 3.2.

## 3.5 Sensitivity Analysis

Give the free formula (3.3) for  $R_0$ , one can easily derive an analytical expression for the sensitivity of  $R_0$  concerning each parameter. The obtained values are described in Table 3.1, which presents the sensitivity indices for the baseline parameter value in the last row of Table 3.2.

$$R_0 = \frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu + 1 - k}\right].$$

Take sensitivity for parameter  $\beta$ ,

$$Y_{\beta}^{R_{0}} = \frac{\partial R_{0}}{\partial \beta} \times \frac{\beta}{R_{0}} \to \frac{\Lambda}{\alpha \delta} \times \frac{\beta}{\frac{\Lambda}{\alpha \delta} \left[\beta + \frac{rk}{\mu + 1 - k}\right]} = \frac{\beta}{\beta + \frac{rk}{\mu + 1 - k}} = 0.9996009.$$

Take sensitivity for parameter  $\Lambda$ ,

$$Y_{\Lambda}^{R_{0}} = \frac{\partial R_{0}}{\partial \Lambda} \times \frac{\Lambda}{R_{0}} \rightarrow \left[\beta \frac{1}{\alpha \delta} + \frac{rk}{\alpha \delta(\mu + 1 - k)}\right] \times \frac{\Lambda}{\frac{\Lambda}{\alpha \delta}} \left[\beta + \frac{rk}{\mu + 1 - k}\right] = \frac{\beta}{\beta + \frac{rk}{\mu + 1 - k}} + \frac{rk}{(\mu + 1 - k)\beta + kr} = 1.$$

Take sensitivity for parameter d,

$$Y_{d}^{R_{0}} = \frac{\partial R_{0}}{\partial d} \times \frac{d}{R_{0}} \rightarrow \left[\frac{-\Lambda\beta\delta}{(\alpha\delta)^{2}} + \frac{-\Lambda rk\delta(\mu+1-k)}{(\alpha\delta(\mu+1-k))^{2}}\right] \times \frac{d}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} = \\ \left[\frac{-\Lambda\beta\delta}{(\alpha\delta)^{2}} \times \frac{d}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{-\Lambda rk\delta(\mu+1-k)}{(\alpha\delta(\mu+1-k))^{2}} \times \frac{d}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]}\right] = \\ \left[\frac{-\beta d}{\alpha \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{-rkd}{\alpha \left[(\mu+1-k)\beta + rk\right]}\right] = -0.0280898.$$

Take sensitivity for parameter  $\mu$ ,

$$Y_{\mu}^{R_{0}} = \frac{\partial R_{0}}{\partial \mu} \times \frac{\mu}{R_{0}} \rightarrow \left[\frac{-\beta \Lambda (2\mu + y + d + r)}{[\mu(\mu + y + d)]^{2}} + \frac{-\Lambda r k Q}{(\alpha \delta(\mu + 1 - k))^{2}}\right] \times \frac{\mu}{\frac{\Lambda}{\alpha \delta} \left[\beta + \frac{r k}{\mu + 1 - k}\right]} = \\ \left[\frac{-\beta \Lambda (2\mu + y + d + r)}{[\alpha \delta]^{2}} \times \frac{\mu}{\frac{\Lambda}{\alpha \delta} \left[\beta + \frac{r k}{\mu + 1 - k}\right]} + \frac{-\Lambda r k Q}{(\alpha \delta(\mu + 1 - k))^{2}} \times \frac{\mu}{\frac{\Lambda}{\alpha \delta} \left[\beta + \frac{r k}{\mu + 1 - k}\right]}\right] = \\ \left[\frac{-\beta \mu (2\mu + y + d + r)}{\alpha \delta \left[\beta + \frac{r k}{\mu + 1 - k}\right]} + \frac{-r k \mu Q}{\alpha \delta(\mu + 1 - k) \left[(\mu + 1 - k)\beta + r k\right]}\right] = -0.0127107.$$

Take sensitivity for parameter *y*,

$$Y_{y}^{R_{0}} = \frac{\partial R_{0}}{\partial y} \times \frac{y}{R_{0}} \rightarrow \left[\frac{-\Lambda\beta\delta}{(\alpha\delta)^{2}} + \frac{-\Lambda rk\delta(\mu+1-k)}{(\alpha\delta(\mu+1-k))^{2}}\right] \times \frac{d}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} = \left[\frac{-\Lambda\beta\delta}{(\alpha\delta)^{2}} \times \frac{y}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{-\Lambda rk\delta(\mu+1-k)}{(\alpha\delta(\mu+1-k))^{2}} \times \frac{y}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]}\right] = \left[\frac{-\beta y}{\alpha \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{-rky}{\alpha \left[(\mu+1-k)\beta + rk\right]}\right] = 0.9691011.$$

Take sensitivity for parameter r,

$$Y_{\Gamma}^{R_{0}} = \frac{\partial R_{0}}{\partial r} \times \frac{r}{R_{0}} \rightarrow \left[\frac{-\Lambda\beta\alpha}{(\alpha\delta)^{2}} + \frac{-\Lambda\alpha k(\mu+1-k)(\delta-r)}{(\alpha\delta(\mu+1-k))^{2}}\right] \times \frac{r}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} = \\ \left[\frac{-\Lambda\beta\alpha}{(\alpha\delta)^{2}} \times \frac{r}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{\Lambda\alpha k(\mu+1-k)(\delta-r)}{(\alpha\delta(\mu+1-k))^{2}} \times \frac{r}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]}\right] = \\ \left[\frac{-\beta r}{\delta \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{rk(\delta-r)}{\delta \left[(\mu+1-k)\beta + rk\right]}\right] = -0.9896999.$$

Take sensitivity for parameter k,

$$Y_{\mathbf{k}}^{R_{0}} = \frac{\partial R_{0}}{\partial \mathbf{k}} \times \frac{\mathbf{k}}{R_{0}} \rightarrow \left[\frac{-\Lambda\beta\alpha}{(\alpha\delta)^{2}} + \frac{-\Lambda\alpha k(\mu+1-k)(\delta-r)}{(\alpha\delta(\mu+1-k))^{2}}\right] \times \frac{\mathbf{k}}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} = \left[\frac{-\Lambda\beta\alpha}{(\alpha\delta)^{2}} \times \frac{\mathbf{k}}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{\Lambda\alpha k(\mu+1-k)(\delta-r)}{(\alpha\delta(\mu+1-k))^{2}} \times \frac{\mathbf{k}}{\frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]}\right] = \left[\frac{-\beta y}{\delta \left[\beta + \frac{rk}{\mu+1-k}\right]} + \frac{rk(\delta-r)}{\delta \left[(\mu+1-k)\beta+rk\right]}\right] = 0.00039905.$$

By using the above calculations, we obtained Table 3.3.

 Table 3.3: Sensitivity indices.

Parameters	Values
Λ	1
В	0.9996009
d	-0.0280898
μ	-0.0127107
у	-0.9691011
r	-0.9896999
k	0.00039905

The sensitivity indices are positive and the remaining are negative. Since all indices are the other parameter's function, the sensitivity indices will change with different parameter values.

The most sensitivity parameter for  $(R_0)$  is the  $\Lambda$  (Recruitment of individual) have the positive sensitivity parameter,  $Y_{\Lambda}^{R_0} = +1$  see Figure (3.3,3.4,3.9), with the parameter  $\beta$ (Transmission coefficient of (*S*) to (*I*)), and parameter k( transmission coefficient of vaccinated individuals V to I). which has increased the sensitivity index, then the reproduction number has the same.

The parameter  $(d, y, \mu, r)$  has a negative sensitivity index (see Figure 3.5, Figure 3.6, Figure 3.7, Figure 3.8). Then, the average of expanding and rare disease, where they are increasing by 10%, the basic reproduction number is decreasing by 10%.

The most effective variables are  $\Lambda$  and y; the least effectives are  $\mu$  and k.



**Figure 3.3:** Effect on *I* of the variation of *A*;  $\Lambda = 220, \beta = 0.005, d = 0.02, y = 0.69, \mu = 0.002, r = 0.2, k = 0.00001, (S, I, V) = (471, 7, 118).$ 



Figure 3.4: Effect on *I* of the variation of  $\beta$ ;  $\Lambda = 200, \beta = 0.0055, d = 0.02, y = 0.69, \mu = 0.002, r = 0.2, k = 0.00001$  (*S*, *I*, *V*) = (471, 7, 118).



Figure 3.5: Effect on *I* of the variation of  $\mu$ ;  $\Lambda = 200, \beta = 0.005, d = 0.02, y = 0.69, \mu = 0.0022, r = 0.2, k = 0.00001$  (*S*, *I*, *V*) = (471, 7, 118).



Figure 3.6: Effect on *I* of the variation of *d*;  $\Lambda = 200, \beta = 0.005, d = 0.022, y = 0.69, \mu = 0.002, r = 0.2, k = 0.00001$  (*S*, *I*, *V*) = (471, 7, 118).



**Figure 3.7:** Effect on *I* of the variation of *y*;  $\Lambda = 200, \beta = 0.005, d = 0.02, y = 0.759, \mu = 0.002, r = 0.2, k = 0.00001$  (*S*, *I*, *V*) = (471, 7, 118).



Figure 3.8: Effect on *I* of the variation of *r*;  $\Lambda = 200, \beta = 0.005, d = 0.02, y = 0.69, \mu = 0.002, r = 0.22, k = 0.00001 r(S, I, V) = (471, 7, 118).$ 



Figure 3.9: Effect on *I* of the variation of *k*;  $\Lambda = 200, \beta = 0.005, d = 0.02, y = 0.69, \mu = 0.002, r = 0.2, k = 0.000011$  (*S*, *I*, *V*) = (471, 7, 118)

#### **CHAPTER 4**

### **RESULTS AND CONCLUSION**

In this thesis, two models of epidemics; SIR, and SVIR models constructed of Covid-19. In the models, the effect of disease on inhabitants is discussed where the model has vaccination, and they do not have the vaccination.

In chapter 2, firstly, we constructed the model with and without vaccination showed in Figure 2.1, and the two-equilibrium points are discovered which are the free and endemic equilibrium points. We noted that the disease-free equilibrium point exists when the  $R_{01} < 1$ , which inference that the disease will disappear in the population over some time. The endemic equilibrium point exists when  $R_{01} > 1$ . Further, it is observed that the endemic and free-disease equilibrium point cannot exist together.

For the basic reproduction numbers of the model, we used the matrix approach of the next generation to test it as  $R_{01} = \frac{\beta \Lambda}{\mu(\mu+y+d)}$ . From this basic reproduction number, it can be seen that for the control of the disease, only way is to contract the transmission coefficient of the susceptible to the infection.

We used Jacobian matrix for stability analysis to show that each equilibrium points; diseasefree and endemic equilibrium points are locally asymptotically stable. Furthermore, using the Lyapunov function and the LaSalle invariance principle to show that global stability.

At the end of the chapter, the sensitivity study of the basic reproduction ratio is taken  $R_{01}$ , located the relative importance of the parameters of the model as the epidemic is spreading. This knowledge helps one discern the robustness of the measurement stations, values of parameters and the effect of each parameter on the particular number of reproductions and, subsequently, diseases. Furthermore, we see in Figure 2.4 the sensitivity they did not has the Mentioned influence on the infection the disease, in order in the other hand in Figure 2.3 show as the Mentioned change when we increase the recruitment of individual the infection increased to, but when increased the average infection period the infection decreasing which is seen in figure (2.7).

Chapter three constructs the model with vaccination shown in Figure (3.1) same chapter two, we have an equilibrium point endemic and disease-free equilibrium point.

We use the next generation matrix to find the basic reproduction matrix method to evaluate it as a  $R_{02} = \frac{\Lambda}{\alpha\delta} \left[\beta + \frac{rk}{\mu+1-k}\right]$ , from this basic reproduction number, we can see to control the disease by increasing the rate of vaccination.

We are using a jacobian matrix for stability analysis to show that each equilibrium disease-free and endemic equilibrium point are locales asymptotically stable. And using the Lyapunov function and the LaSalle invariance principle to show that global stability

At the end of the chapter, we take the sensitivity analysis of the basic reproduction ratio  $R_{02}$ , To define the relative value of the parameters of the model in transmitting the disease. This knowledge helps one to discern the robustness of model projections about parameter values and the effect of each parameter on the particular number of reproductions and the frequency of outbreaks subsequently, we see in Figure (3.5,3.6,3.9) the sensitivity they did not has the Mentioned influence on the infection the disease, in order on the other hand in figure (3.3,3.7) show as the big change when increasing 10%.

Comparison between chapter two and chapter three, we see that in figure (2.2) and figure (3.2), the effect of vaccination %20 of the population can be seen. Where there is no vaccine on the population the number of infected people is around 300 000 and when %20 of the population vaccinated infected people will be around 50 000. It is shown that created for the covid-19 outbreak reduces the number of case of an infected individual. However, it can be seen that it would not be sufficient to control the epidemic, and if we looked to the death rate change in both models, we see in the first model death rate is greater than the death rate in model with vaccination.

#### REFERENCES

- C.R. Simpson, N. Lone, J. McMenamin, R. Gunson, C. Robertson, L.D. Ritchie, A.Sheikh. (2015). Early estimation of pandemic influenza Antiviral and Vaccine Effectiveness (EAVE): use of a unique community and laboratory national data-linked cohort study. *Health Technology Assessment*, DOI: 10.3310/hta19790. .
- Fraser C, Riley S, Anderson RM, Ferguson NM. (2004). Factors that make an infectious disease outbreak controllable. *Proceedings of the National Academy of Sciences*, https://doi.org/10.1073/pnas.0307506101.
- J.A.P. Heesterbeek, M.G. Roberts. (2015). How mathematical epidemiology became a fied of biology: a commentary on Anderson and May (1981) 'The population dynamics of microparasites and their invertebrate hosts. *the royal socety*.
- J.S. Nguyen-Van-Tama, A.W. Hampson. (2003). he epidemiology and clinical impact of pandemic influenza. *Vaccine*, Pages 1762-1768.
- McCloskey B, Zumla A. (2020). Mass gathering events and reducing further global spread of COVID-19: a political and public health dilemma. *Lancet (London, England)*, DOI:https://doi.org/10.1016/S0140-6736(20)30681-4.
- Alan J. Hay, 2. (2001). The evolution of human influenza viruses. *Royal Society*.
- Anderson M, Mckee M. (2020). Covid-19 exposes weaknesses in European response to outbreaks. *BMJ* , doi: https://doi.org/10.1136/bmj.m1075 (Published 18 March 2020).
- Bacaer, N. (2011). Daniel Bernoulli, d'Alembert and the inoculation of smallpox (1760). N. Bacaer içinde, A Short History of Mathematical Population Dynamics (s. 21-30). London: Springer. doi:10.1007/978-0-85729-115-8\_4
- Bilgen Kaymakamzadea and Evren Hincalb. (2018). Delay epidemic model with and without vaccine. *AIP Conference Proceedings*. online: AIP.
- Brown, G., & Ozanne, M. (2019). Statistical Models for Infectious Diseases: A Useful Tool for Practical Decision-Making. *The American journal of tropical medicine and hygiene*, *101*(1), 1-2.
- Brunson, E. K. (2008). *health and medicine*. medicine: https://www.britannica.com/science/vaccine adresinden alındı
- C.R. Simpson, N. Lone, J. McMenamin, R. Gunson, C. Robertson, L.D. Ritchie. (2015). Early estimation of pandemic influenza Antiviral and Vaccine Effectiveness use of a unique community and laboratory national data-linked cohort study. *Health Technology Assessment,*, DOI: 10.3310/hta19790.

Cassar, P. (1965). Medical History of Malta,. London: Welcome Historical Medical Library.

- CDC. (2020, Feb 1st). *Novel coronavirus,*. Wuhan, China: https://www.cdc.gov/coronavirus/2019nCoV/summary.html. adresinden alındı
- Cetin, E., Kiremitci, B., & Yurt, I. D. (2009). Matematiksel Epidemiyoloji: Pandemik A/H1N1 Gribi Vakası. Istanbul University Journal of the School of Business Administration, 38, 197-209.
- Chakraborty, I., & Maity, P. (2020). COVID-19 outbreak: Migration, effects on society, global environment and prevention. *Science of The Total Environment, 728*.
- Chen, N., Zhou, M., Dong, X., Qu, J., Gong, F., Han, Y., . . . Zhang, L. (2020). Epidemiological and clinical characteristics of 99 cases of 2019 novel coronavirus pneumonia in Wuhan, China: a descriptive study. *The Lancet, 395*(10223), 507-513.
- coddington, norman levinson. (1955). ordinary differential equations. new york: Tata Grow-hill.
- *COVID-19 Explorer*. (2020, December). November 30, 2020 tarihinde World Health Organization: https://worldhealthorg.shinyapps.io/covid/ adresinden alındı
- D, M. (2020). Covid-19 goes global. New Scientist, https://doi.org/10.1016/S0262-4079(20)30424-3.
- D.Coggon. (2003). Epidemiology for the uninitiated. London UK: the BMJ.
- Daniel Lawson and Glenn Marion. (2015). An Introduction to Mathematical Modelling. *semantic scholar*.
- Daniel Lawson and Glenn Marion. (2015). An Introduction to Mathematical Modelling. *semantic scholar*.
- Daniel, W. W. (2005). Biostatistics. USA: John Wiley & Sons.
- Diekmann, O., Heesterbeek, J. A., & Roberts, M. G. (2010). The construction of next-generation matrices for compartmental epidemic models. *Journal of the Royal Society Interface, 7*(47), 873-885. doi:10.1098/rsif.2009.0386
- Driessche, P. V., & Watmough, J. (2002). Reproduction numbers and sub-threshold endemic equilibria for compartmental models of disease transmission. *Mathematical Biosciences, 180*, 29-48.
- Edmundas, Zenonas, Titas. (2007). Sensitivity analysis of a simple additive weight method. *researchgate*, DOI: 10.1504/IJMDM.2007.013418.
- El Zowalaty ME, Järhult JD. (2020). From SARS to COVID-19: A previously unknown SARS-CoV-2 virus of pandemic potential infecting humans–Call for a One Health approach. *One Health*, 2020. February 24:100124 10.1016/j.onehlt.2020.100124.
- Expert reaction to comments made by Paul Tambyah (president-elect of the International Society of Infectious Diseases) about the SARS-CoV-2 virus, suggesting the D614G mutation may explain

*a reduced death rate from COVID-19 in some parts of the world*. (2020, August 18). September 7, 2020 tarihinde Science Media Centre:

https://www.sciencemediacentre.org/expert-reaction-to-comments-made-by-paul-tambyahpresident-elect-of-the-international-society-of-infectious-diseases-about-the-sars-cov-2-virussuggesting-the-d614g-mutation-may-explain-a-reduced-d/ adresinden alındı

- Flight, C. (2011, February 17). *Smallpox: Eradicating the Scourge*. July 6, 2020 tarihinde BBC: https://www.bbc.co.uk/history/british/empire\_seapower/smallpox\_01.shtml#:~:text=An%20 estimated%20300%20million%20people,beings%20for%20thousands%20of%20years. adresinden alındı
- Francesca, Keith, Jim. (2016). Sensitivity analysis of environmental models: A systematic review with practical workflow. *sciencedirect*, https://doi.org/10.1016/j.envsoft.2016.02.008.
- Francis Joseph Murray, Kenneth S. Miller . (1976). *Existence Theorems for Ordinary Differential Equations.* Krieger Pub Co.
- Freund, J. E. (1992). Mathematical Statistics. New Jersey: Prentice-Hall.
- Gajewski, M. (2020, August 11). Stop Trying To Make 'Herd Immunity' Happen: Sweden's Attempt At Covid-19 Herd Immunity Failed. August 16, 2020 tarihinde Forbes: https://www.forbes.com/sites/mishagajewski/2020/08/11/stop-trying-to-make-herdimmunity-happen-swedens-attempt-at-covid-19-herd-immunity-failed/#25b77039541c adresinden alındı
- *Gamma function*. (2017, December 12). October 7, 2020 tarihinde Britannica: https://www.britannica.com/science/gamma-function adresinden alındı
- Grassly, N. C., & Fraser, C. (2008). Mathematical models of infectious disease transmission. *Nat Rev Microbiol, 6*, 477-487.
- Guerra, F. M., Bolotin, S., Lim, G., Heffernan, J., Deeks, S. L., Li, Y., & Crowcroft, N. S. (2017, December 1). The basic reproduction number (R0) of measles: a systematic review. *The Lancet Infectious Diseases*, *17*(12), E420-E428. doi:10.1016/S1473-3099(17)30307-9
- H.S.rodrigues, monteiro,torres. (2013). sensitivity analysis in dengue epidemiological model . *Hindawi* , 3,http://dx.doi.org/10.1155/2013/721406.
- Henry, S. (1994). *Nonlinear dynamics and chaos : with applications to physics, biology, chemistry, and engineering.* Cambridge, MA : Westview Press.
- Hincal, E., Kaymakamzade, B., & Gokbulut, N. (2020). Basic reproduction number and effective reproduction number for North Cyprus for fighting Covid-19. *Bulletin of the Karaganda University*, 86-95. doi:10.31489/2020M3/86-95

- Hurford, A., Cownden, D., & Day, T. (2009). Next-generation tools for evolutionary invasion analyses. Journal of the Royal Society Inferface, 7, 561-571. doi:10.1098/rsif.2009.0448
- J.A.P. Heesterbeek, M.G. Roberts. (2015). How mathematical epidemiology became a field of biology: a commentary on Anderson and May (1981) 'The population dynamics of microparasites and their invertebrate hosts. *the royal socety*.
- J.F. Bishop, M.P. Murnane, R. Owen. (2009). Australia's Winter with the 2009 Pandemic Influenza A (H1N1) Virus. *The New England Journal of Medicine*, DOI: 10.1056/NEJMp0910445.
- Jack K. Hale, Hüseyin Kocak. (1991). Dynamics and Bifurcations. Springer Science & Business Media.
- Jones, J. H. (2007). Notes On RO. California: Department of Anthropological Sciences, 1-6.
- Kaplan, J., Frias, L., & McFall-Johnsen, M. (2020, September 23). Our ongoing list of how countries are reopening, and which ones remain under lockdown. October 7, 2020 tarihinde Business Insider: https://www.businessinsider.com/countries-on-lockdown-coronavirus-italy-2020-3 adresinden alındı
- Kaymakamzade, B., Hincal, E., Mustapha, U. T., & Gokbulut, N. (2020). Effective Reproduction Number for North Cyprus Fighting Covid-19. *Fifth International Conference on Analysis and Applied Mathematics(ICAAM)*. doi:AIPCP20-AR-ICAAM20-00031
- Kaymakamzade, B., Hincal, E., Suren, F. N., & Gokbulut, N. (2020). Estimating Covid-19 deaths by using binomial model. *Fifth International Conference on Analysis and Applied Mathematics(ICAAM)*. doi:AIPCP20-AR-ICAAM20-00050
- Keeling, M. (2009). L. Danon, Mathematical modelling of infectious diseases. *British Medical Bulletin*, DOI: 10.1093/bmb/ldp038.
- Keith, Jim f., Jim w. (2016). Sensitivity analysis of environmental models: A systematic review. *elsevier*, DOI: 10.1016/j.envsoft.2016.02.008.
- Kelly, H. (2011). The classical definition of a pandemic is not elusive. *Bull World Health Organ, 89*(7), 540-541. World Health Organization. adresinden alındı
- Kim, A. (2019, October 12). Gamma Distribution Intuition, Derivation, and Examples. October 7, 2020 tarihinde towards data science: https://towardsdatascience.com/gamma-distributionintuition-derivation-and-examples-55f407423840 adresinden alındı
- KUZEY KIBRIS COVID-19 GÜNLÜK TABLO. (2020, November 1). November 1, 2020 tarihinde Kuzey Kıbrıs Türk Cumhuriyeti Sağlık Bakanlığı: https://saglik.gov.ct.tr/COVID-19-GENEL-DURUM adresinden alındı

- L. Temime, G. Hejblum, M. Setbon, A.J. Valleron . (2008). The rising impact of mathematical modelling in epidemiology: antibiotic resistance research as a case study . *Epidemiology and Infection*, DOI: 10.1017/S0950268807009442.
- Lee, V. J., Chen, M. I., Chan, S.-P., Wong, C. S., Cutter, J., Goh, K. T., & Tambyah, P. (2007). Influenza Pandemics in Singapore, a Tropical, Globally Connected City. *Emerging infectious diseases*, 13(7), 1052-1057.
- Long, Q.-X., Tang, X.-J., Shi, Q.-L., Li, Q., Deng, H.-J., Yuan, J., . . . Huang, A.-L. (2020). Clinical and immunological assessment of asymptomatic SARS-CoV-2 infections. *Nature Medicine, 26*, 1200-1204. doi:10.1038/s41591-020-0965-6
- M. Teresa. Monteiro, Delfim . (2013). Sensitivity Analysis in a Dengue Epidemiological Model. *Hindawi*, 3.
- M.I. Meltzer, N.J. Cox, K. Fukuda, (1999). The economic impact of pandemic influenza in the United States: priorities for intervention. *Emerging Infectious Diseases*, 659–671.
- N L Michael, M Vahey, D S Burke, R R Redfield. (1992). Viral DNA and mRNA expression correlate with the stage of human immunodeficiency virus (HIV) type 1 infection in humans: evidence for viral replication in all stages of HIV disease. *ASM*.
- Næss-Schmidt, H. S., Jensen, J. B., Virtanen, L., & Nielsen, A. L. (2020, April). COVID-19 EXIT STRATEGIES. July 6, 2020 tarihinde Copenhagen Economics: https://www.copenhageneconomics.com/dyn/resources/Publication/publicationPDF/1/531/ 1588146513/copenhagen-economics\_2020\_covid-19-exit-strategies.pdf adresinden alındı
- O. Diekmann, P. Heesterbeek, M. G. Roberts. (2009). The construction of next-generation matrices for compartmental epidemic models. *the royal society*, doi: 10.1098/rsif.2009.0386.

organization, w. h. (2019).

- Orlowski, E. J., & Goldsmith, D. J. (2020). Four months into the COVID-19 pandemic, Sweden's prized herd immunity is nowhere in sight. *Journal of the Royal Society Medicine*, *113*(8), 292-298. doi:10.1177/0141076820945282
- P. Yan, H. Chen, D. Zeng. (2008). Syndromic Surveillance Systems. *Annual Review of Information Science and Technology*, 425-495.
- PARKS, P. C. (1992). A. M. Lyapunov's stability theory—100 years on. IMA Journal of Mathematical Control and Information.
- PARKS, P. C. (1992). A. M. Lyapunov's stability theory—100 years on. IMA Journal of Mathematical Control and Information.

Perko, L. (2012). differential equations and dynamical system. Springer Science & Business Media.

- Puga, J. L., Krzywinski, M., & Altman, N. (2015). Bayesian statistics. *Nature methods, 12*, 377-378. doi:10.1038/nmeth.3368
- Qun Li, M.Med., Xuhua Guan. (2020). Early Transmission Dynamics in Wuhan, China, of Novel Coronavirus–Infected Pneumonia. *New England Journal of Medicine*, https://scholar.google.com/scholar\_lookup?journal=New+England+Journal+of+Medicine&titl e=Early+transmission+dynamics+in+Wuhan,+China,+of+novel+coronavirus%E2%80%93infect ed+pneumonia&author=Q+Li&author=X+Guan&author=P+Wu&author=X+Wang&author=L+Z hou&publicat.
- R. Anderson, R. May R. (1991). *Infectious Diseases of Human,sfirst ed.* Oxford : Oxford University press.
- R. Anderson, R. May R. (1991). *Infectious Diseases of Humans, first ed.* Oxford: Oxford University press.
- Randolph, H. E., & Barreiro, L. B. (2020). Herd Immunity: Understanding COVID-19. *Immunity*, *52*(5), 737-741. doi:10.1016/j.immuni.2020.04.012
- RHilleman, M. (2002). Realities and enigmas of human viral influenza: pathogenesis, epidemiology and control. *sciencedirect*.
- Roberts, M. G., & Heesterbeek, J. A. (2012). Characterizing the next-generation matrix and basic reproduction number in ecological epidemiology. *Journal of Mathematical Biology, 66*(4-5), 1045-1064. doi:10.1007/s00285-012-0602-1
- Rodrigues, H. S. (2016). Application of SIR epidemiological model: new trends. ResearchGate, 2.
- S.Ghorai. (2013). *hogheavyweight*. existence\_and\_uniqueness\_theorems\_picards\_iteration\_iitk.ac.in: https://www.techylib.com/en/view/hogheavyweight/existence\_and\_uniqueness\_theorems\_ picards\_iteration\_iitk.ac.in adresinden alındı
- S.Ghorai. (2013). www.techylib.com. amarican chemistry society: https://www.techylib.com/en/view/hogheavyweight/existence\_and\_uniqueness\_theorems\_ picards\_iteration\_iitk.ac.in adresinden alındı
- Siettos, C. I., & Russo, L. (2013). Mathematical modeling of infectious disease dynamics. *Virulence*, 4(4), 295-306.
- stephanie. (2013, november 3). https://www.statisticshowto.com/stochastic-model/ adresinden alındı
- T. Jefferson, C. Di Pietrantonj, L.A. Al-Ansary, E. Ferroni, S. Thorning, R.E. Thomas. (2010). Vaccines for preventing influenza in the elderly. *Cochrane Database of Systematic Reviews*, CD004876. DOI: 10.1002/14651858.CD004876.pub3.
- esini, B. L. (2020, July). Coronaviruses and Acute Respiratory Syndromes (COVID-19, MERS, and SARS). July 6, 2020 tarihinde MSD MANUAL Proffessional Version: https://www.msdmanuals.com/professional/infectious-diseases/respiratoryviruses/coronaviruses-and-acute-respiratory-syndromes-covid-19-mers-and-sars adresinden alındı
- Tiirinki, H., Tynkkynen, L.-K., Sovala, M., Atkins, S., Koivusalo, M., Rautiainen, P., . . . Keskimaki, I.
  (2020). COVID-19 pandemic in Finland Preliminary analysis on health system response and economic consequences. *Health policy and technology*, 440. doi:10.1016/j.hlpt.2020.08.005
- Tisdell, D. C. (2011). Several variable / vector calculus. Semester 1, Year 2.: https://web.maths.unsw.edu.au/~cct/2011Notes/Jacobian2011-2011.pdf adresinden alındı
- Webster, R. G. (1992). Evolution and Ecology of Influenza A Viruses. *American Society for Microbiology*.
- White, P. J., & Enright, M. C. (2010). Mathematical models in infectious disease epidemiology. *Infectious Diseases*, 70-75. doi:10.1016/B978-0-323-04579-7.00005-8
- WHO. (2005). World Health Organization, Avian influenza: assessing the pandemic threat,: URL: http://www.who.int/iris/handle/10665/68985. adresinden alındı
- WHO. (2019). *health topic*. Vaccines and immunization: https://www.who.int/health-topics/vaccinesand-immunization. adresinden alındı
- WHO. (2019, December 5). *Measles*. July 6, 2020 tarihinde World Health Organization: https://www.who.int/news-room/fact-sheets/detail/measles adresinden alındı
- WHO. (2020, January 31). *Coronavirus*. July 6, 2020 tarihinde World Health Organization: https://www.who.int/health-topics/coronavirus#tab=tab\_1 adresinden alındı
- WHO. (2020, July 6). *HIV/AIDS*. July 6, 2020 tarihinde World Health Organization: https://www.who.int/news-room/fact-sheets/detail/hiv-aids adresinden alındı
- Wikipedia. (2020, October 9). *Black Death*. October 9, 2020 tarihinde Wikipedia: https://en.wikipedia.org/wiki/Black\_Death adresinden alındı
- Wikipedia. (2020, October 5). Middle East respiratory syndrome–related coronavirus. October 5, 2020 tarihinde Wikipedia: https://en.wikipedia.org/wiki/Middle\_East\_respiratory\_syndrome%E2%80%93related\_coron avirus adresinden alındı
- Wood, D. (2017). Scientific Models. Definition & Examples: https://study.com/academy/lesson/scientific-models-definition-examples.html adresinden alındı

- Woolhouse, M. (2011). How to make predictions about future infectious disease risks. *the royals society*, doi.org/10.1098/rstb.2010.0387.
- C.R. Simpson, N. Lone, J. McMenamin, R. Gunson, C. Robertson, L.D. Ritchie, A.Sheikh. (2015). Early estimation of pandemic influenza Antiviral and Vaccine Effectiveness (EAVE): use of a unique community and laboratory national data-linked cohort study. *Health Technology Assessment*, DOI: 10.3310/hta19790. .
- Fraser C, Riley S, Anderson RM, Ferguson NM. (2004). Factors that make an infectious disease outbreak controllable. *Proceedings of the National Academy of Sciences*, https://doi.org/10.1073/pnas.0307506101.
- J.A.P. Heesterbeek, M.G. Roberts. (2015). How mathematical epidemiology became a fied of biology: a commentary on Anderson and May (1981) 'The population dynamics of microparasites and their invertebrate hosts. *the royal socety*.
- J.S. Nguyen-Van-Tama, A.W. Hampson. (2003). he epidemiology and clinical impact of pandemic influenza. *Vaccine*, Pages 1762-1768.
- McCloskey B, Zumla A. (2020). Mass gathering events and reducing further global spread of COVID-19: a political and public health dilemma. *Lancet (London, England)*, DOI:https://doi.org/10.1016/S0140-6736(20)30681-4.
- Alan J. Hay, 2. (2001). The evolution of human influenza viruses. Royal Society.
- Anderson M, Mckee M. (2020). Covid-19 exposes weaknesses in European response to outbreaks. BMJ , doi: https://doi.org/10.1136/bmj.m1075 (Published 18 March 2020).
- Bacaer, N. (2011). Daniel Bernoulli, d'Alembert and the inoculation of smallpox (1760). In N. Bacaer, A Short History of Mathematical Population Dynamics (pp. 21-30). London: Springer. doi:10.1007/978-0-85729-115-8\_4
- Bilgen Kaymakamzadea and Evren Hincalb. (2018). Delay epidemic model with and without vaccine. *AIP Conference Proceedings* . online: AIP.
- Brown, G., & Ozanne, M. (2019). Statistical Models for Infectious Diseases: A Useful Tool for Practical Decision-Making. *The American journal of tropical medicine and hygiene*, *101*(1), 1-2.
- Brunson, E. K. (2008). *health and medicine*. Retrieved from medicine: https://www.britannica.com/science/vaccine
- C.R. Simpson, N. Lone, J. McMenamin, R. Gunson, C. Robertson, L.D. Ritchie. (2015). Early estimation of pandemic influenza Antiviral and Vaccine Effectiveness use of a unique community and

laboratory national data-linked cohort study. *Health Technology Assessment,*, DOI: 10.3310/hta19790.

- Cassar, P. (1965). Medical History of Malta,. London: Welcome Historical Medical Library.
- CDC. (2020, Feb 1st). *Novel coronavirus,*. Retrieved from Wuhan, China: https://www.cdc.gov/coronavirus/2019-nCoV/summary.html.
- Cetin, E., Kiremitci, B., & Yurt, I. D. (2009). Matematiksel Epidemiyoloji: Pandemik A/H1N1 Gribi Vakası. Istanbul University Journal of the School of Business Administration, 38, 197-209.
- Chakraborty, I., & Maity, P. (2020). COVID-19 outbreak: Migration, effects on society, global environment and prevention. *Science of The Total Environment*, 728.
- Chen, N., Zhou, M., Dong, X., Qu, J., Gong, F., Han, Y., . . . Zhang, L. (2020). Epidemiological and clinical characteristics of 99 cases of 2019 novel coronavirus pneumonia in Wuhan, China: a descriptive study. *The Lancet, 395*(10223), 507-513.
- coddington, norman levinson. (1955). ordinary differential equations. new york: Tata Grow-hill.
- *COVID-19 Explorer*. (2020, December). Retrieved November 30, 2020, from World Health Organization: https://worldhealthorg.shinyapps.io/covid/
- D, M. (2020). Covid-19 goes global. New Scientist, https://doi.org/10.1016/S0262-4079(20)30424-3.
- D.Coggon. (2003). Epidemiology for the uninitiated. London UK: the BMJ.
- Daniel Lawson and Glenn Marion. (2015). An Introduction to Mathematical Modelling. *semantic scholar*.
- Daniel Lawson and Glenn Marion. (2015). An Introduction to Mathematical Modelling. *semantic scholar*.
- Daniel, W. W. (2005). Biostatistics. USA: John Wiley & Sons.
- Diekmann, O., Heesterbeek, J. A., & Roberts, M. G. (2010). The construction of next-generation matrices for compartmental epidemic models. *Journal of the Royal Society Interface, 7*(47), 873-885. doi:10.1098/rsif.2009.0386
- Driessche, P. V., & Watmough, J. (2002). Reproduction numbers and sub-threshold endemic equilibria for compartmental models of disease transmission. *Mathematical Biosciences, 180*, 29-48.
- Edmundas, Zenonas, Titas. (2007). Sensitivity analysis of a simple additive weight method. *researchgate*, DOI: 10.1504/IJMDM.2007.013418.
- El Zowalaty ME, Järhult JD. (2020). From SARS to COVID-19: A previously unknown SARS-CoV-2 virus of pandemic potential infecting humans–Call for a One Health approach. *One Health*, 2020. February 24:100124 10.1016/j.onehlt.2020.100124.

Expert reaction to comments made by Paul Tambyah (president-elect of the International Society of Infectious Diseases) about the SARS-CoV-2 virus, suggesting the D614G mutation may explain a reduced death rate from COVID-19 in some parts of the world. (2020, August 18). Retrieved September 7, 2020, from Science Media Centre:

https://www.sciencemediacentre.org/expert-reaction-to-comments-made-by-paul-tambyahpresident-elect-of-the-international-society-of-infectious-diseases-about-the-sars-cov-2-virussuggesting-the-d614g-mutation-may-explain-a-reduced-d/

- Flight, C. (2011, February 17). *Smallpox: Eradicating the Scourge*. Retrieved July 6, 2020, from BBC: https://www.bbc.co.uk/history/british/empire\_seapower/smallpox\_01.shtml#:~:text=An%20 estimated%20300%20million%20people,beings%20for%20thousands%20of%20years.
- Francesca, Keith, Jim. (2016). Sensitivity analysis of environmental models: A systematic review with practical workflow. *sciencedirect*, https://doi.org/10.1016/j.envsoft.2016.02.008.
- Francis Joseph Murray, Kenneth S. Miller . (1976). *Existence Theorems for Ordinary Differential Equations.* Krieger Pub Co.
- Freund, J. E. (1992). Mathematical Statistics. New Jersey: Prentice-Hall.
- Gajewski, M. (2020, August 11). Stop Trying To Make 'Herd Immunity' Happen: Sweden's Attempt At Covid-19 Herd Immunity Failed. Retrieved August 16, 2020, from Forbes: https://www.forbes.com/sites/mishagajewski/2020/08/11/stop-trying-to-make-herdimmunity-happen-swedens-attempt-at-covid-19-herd-immunity-failed/#25b77039541c
- *Gamma function*. (2017, December 12). Retrieved October 7, 2020, from Britannica: https://www.britannica.com/science/gamma-function
- Grassly, N. C., & Fraser, C. (2008). Mathematical models of infectious disease transmission. *Nat Rev Microbiol, 6*, 477-487.
- Guerra, F. M., Bolotin, S., Lim, G., Heffernan, J., Deeks, S. L., Li, Y., & Crowcroft, N. S. (2017, December 1). The basic reproduction number (R0) of measles: a systematic review. *The Lancet Infectious Diseases*, *17*(12), E420-E428. doi:10.1016/S1473-3099(17)30307-9
- H.S.rodrigues, monteiro,torres. (2013). sensitivity analysis in dengue epidemiological model . *Hindawi* , 3,http://dx.doi.org/10.1155/2013/721406.
- Henry, S. (1994). *Nonlinear dynamics and chaos : with applications to physics, biology, chemistry, and engineering.* Cambridge, MA : Westview Press.
- Hincal, E., Kaymakamzade, B., & Gokbulut, N. (2020). Basic reproduction number and effective reproduction number for North Cyprus for fighting Covid-19. *Bulletin of the Karaganda University*, 86-95. doi:10.31489/2020M3/86-95

- Hurford, A., Cownden, D., & Day, T. (2009). Next-generation tools for evolutionary invasion analyses. *Journal of the Royal Society Inferface, 7*, 561-571. doi:10.1098/rsif.2009.0448
- J.A.P. Heesterbeek, M.G. Roberts. (2015). How mathematical epidemiology became a field of biology: a commentary on Anderson and May (1981) 'The population dynamics of microparasites and their invertebrate hosts. *the royal socety*.
- J.F. Bishop, M.P. Murnane, R. Owen. (2009). Australia's Winter with the 2009 Pandemic Influenza A (H1N1) Virus. *The New England Journal of Medicine*, DOI: 10.1056/NEJMp0910445.
- Jack K. Hale, Hüseyin Kocak. (1991). Dynamics and Bifurcations. Springer Science & Business Media.
- Jones, J. H. (2007). Notes On RO. California: Department of Anthropological Sciences, 1-6.
- Kaplan, J., Frias, L., & McFall-Johnsen, M. (2020, September 23). Our ongoing list of how countries are reopening, and which ones remain under lockdown. Retrieved October 7, 2020, from Business Insider: https://www.businessinsider.com/countries-on-lockdown-coronavirus-italy-2020-3
- Kaymakamzade, B., Hincal, E., Mustapha, U. T., & Gokbulut, N. (2020). Effective Reproduction Number for North Cyprus Fighting Covid-19. *Fifth International Conference on Analysis and Applied Mathematics(ICAAM)*. doi:AIPCP20-AR-ICAAM20-00031
- Kaymakamzade, B., Hincal, E., Suren, F. N., & Gokbulut, N. (2020). Estimating Covid-19 deaths by using binomial model. *Fifth International Conference on Analysis and Applied Mathematics(ICAAM)*. doi:AIPCP20-AR-ICAAM20-00050
- Keeling, M. (2009). L. Danon, Mathematical modelling of infectious diseases. *British Medical Bulletin*, DOI: 10.1093/bmb/ldp038. .
- Keith, Jim f., Jim w. (2016). Sensitivity analysis of environmental models: A systematic review. *elsevier*, DOI: 10.1016/j.envsoft.2016.02.008.
- Kelly, H. (2011). The classical definition of a pandemic is not elusive. *Bull World Health Organ, 89*(7), 540-541. Retrieved from World Health Organization.
- Kim, A. (2019, October 12). Gamma Distribution Intuition, Derivation, and Examples. Retrieved October 7, 2020, from towards data science: https://towardsdatascience.com/gammadistribution-intuition-derivation-and-examples-55f407423840
- KUZEY KIBRIS COVID-19 GÜNLÜK TABLO. (2020, November 1). Retrieved November 1, 2020, from Kuzey Kıbrıs Türk Cumhuriyeti Sağlık Bakanlığı: https://saglik.gov.ct.tr/COVID-19-GENEL-DURUM
- L. Temime, G. Hejblum, M. Setbon, A.J. Valleron . (2008). The rising impact of mathematical modelling in epidemiology: antibiotic resistance research as a case study . *Epidemiology and Infection*, DOI: 10.1017/S0950268807009442.

- Lee, V. J., Chen, M. I., Chan, S.-P., Wong, C. S., Cutter, J., Goh, K. T., & Tambyah, P. (2007). Influenza Pandemics in Singapore, a Tropical, Globally Connected City. *Emerging infectious diseases*, 13(7), 1052-1057.
- Long, Q.-X., Tang, X.-J., Shi, Q.-L., Li, Q., Deng, H.-J., Yuan, J., . . . Huang, A.-L. (2020). Clinical and immunological assessment of asymptomatic SARS-CoV-2 infections. *Nature Medicine, 26*, 1200-1204. doi:10.1038/s41591-020-0965-6
- M. Teresa. Monteiro, Delfim . (2013). Sensitivity Analysis in a Dengue Epidemiological Model. *Hindawi*, 3.
- M.I. Meltzer, N.J. Cox, K. Fukuda, (1999). The economic impact of pandemic influenza in the United States: priorities for intervention. *Emerging Infectious Diseases*, 659–671.
- N L Michael, M Vahey, D S Burke, R R Redfield. (1992). Viral DNA and mRNA expression correlate with the stage of human immunodeficiency virus (HIV) type 1 infection in humans: evidence for viral replication in all stages of HIV disease. *ASM*.
- Næss-Schmidt, H. S., Jensen, J. B., Virtanen, L., & Nielsen, A. L. (2020, April). COVID-19 EXIT STRATEGIES. Retrieved July 6, 2020, from Copenhagen Economics: https://www.copenhageneconomics.com/dyn/resources/Publication/publicationPDF/1/531/ 1588146513/copenhagen-economics\_2020\_covid-19-exit-strategies.pdf
- O. Diekmann, P. Heesterbeek, M. G. Roberts. (2009). The construction of next-generation matrices for compartmental epidemic models. *the royal society*, doi: 10.1098/rsif.2009.0386.

organization, w. h. (2019).

- Orlowski, E. J., & Goldsmith, D. J. (2020). Four months into the COVID-19 pandemic, Sweden's prized herd immunity is nowhere in sight. *Journal of the Royal Society Medicine*, *113*(8), 292-298. doi:10.1177/0141076820945282
- P. Yan, H. Chen, D. Zeng. (2008). Syndromic Surveillance Systems. *Annual Review of Information Science and Technology*, 425-495.
- PARKS, P. C. (1992). A. M. Lyapunov's stability theory—100 years on. IMA Journal of Mathematical Control and Information.
- PARKS, P. C. (1992). *A. M. Lyapunov's stability theory—100 years on.* IMA Journal of Mathematical Control and Information.
- Perko, L. (2012). differential equations and dynamical system. Springer Science & Business Media.
- Puga, J. L., Krzywinski, M., & Altman, N. (2015). Bayesian statistics. *Nature methods, 12*, 377-378. doi:10.1038/nmeth.3368

- Qun Li, M.Med., Xuhua Guan. (2020). Early Transmission Dynamics in Wuhan, China, of Novel Coronavirus–Infected Pneumonia. *New England Journal of Medicine*, https://scholar.google.com/scholar\_lookup?journal=New+England+Journal+of+Medicine&titl e=Early+transmission+dynamics+in+Wuhan,+China,+of+novel+coronavirus%E2%80%93infect ed+pneumonia&author=Q+Li&author=X+Guan&author=P+Wu&author=X+Wang&author=L+Z hou&publicat.
- R. Anderson, R. May R. (1991). *Infectious Diseases of Human,sfirst ed.* Oxford : Oxford University press.
- R. Anderson, R. May R. (1991). *Infectious Diseases of Humans, first ed.* Oxford: Oxford University press.
- Randolph, H. E., & Barreiro, L. B. (2020). Herd Immunity: Understanding COVID-19. *Immunity*, *52*(5), 737-741. doi:10.1016/j.immuni.2020.04.012
- RHilleman, M. (2002). Realities and enigmas of human viral influenza: pathogenesis, epidemiology and control. *sciencedirect*.
- Roberts, M. G., & Heesterbeek, J. A. (2012). Characterizing the next-generation matrix and basic reproduction number in ecological epidemiology. *Journal of Mathematical Biology, 66*(4-5), 1045-1064. doi:10.1007/s00285-012-0602-1
- Rodrigues, H. S. (2016). Application of SIR epidemiological model: new trends. *ResearchGate*, 2.
- S.Ghorai. (2013). *hogheavyweight*. Retrieved from existence\_and\_uniqueness\_theorems\_picards\_iteration\_iitk.ac.in: https://www.techylib.com/en/view/hogheavyweight/existence\_and\_uniqueness\_theorems\_ picards\_iteration\_iitk.ac.in
- S.Ghorai. (2013). www.techylib.com. Retrieved from amarican chemistry society: https://www.techylib.com/en/view/hogheavyweight/existence\_and\_uniqueness\_theorems\_ picards\_iteration\_iitk.ac.in
- Siettos, C. I., & Russo, L. (2013). Mathematical modeling of infectious disease dynamics. *Virulence*, 4(4), 295-306.
- stephanie. (2013, november 3). Retrieved from https://www.statisticshowto.com/stochastic-model/
- T. Jefferson, C. Di Pietrantonj, L.A. Al-Ansary, E. Ferroni, S. Thorning, R.E. Thomas. (2010). Vaccines for preventing influenza in the elderly. *Cochrane Database of Systematic Reviews*, CD004876. DOI: 10.1002/14651858.CD004876.pub3.
- Tesini, B. L. (2020, July). *Coronaviruses and Acute Respiratory Syndromes (COVID-19, MERS, and SARS)*. Retrieved July 6, 2020, from MSD MANUAL Proffessional Version:

https://www.msdmanuals.com/professional/infectious-diseases/respiratoryviruses/coronaviruses-and-acute-respiratory-syndromes-covid-19-mers-and-sars

- Tiirinki, H., Tynkkynen, L.-K., Sovala, M., Atkins, S., Koivusalo, M., Rautiainen, P., . . . Keskimaki, I.
  (2020). COVID-19 pandemic in Finland Preliminary analysis on health system response and economic consequences. *Health policy and technology*, 440. doi:10.1016/j.hlpt.2020.08.005
- Tisdell, D. C. (2011). *Several variable / vector calculus*. Retrieved from Semester 1, Year 2.: https://web.maths.unsw.edu.au/~cct/2011Notes/Jacobian2011-2011.pdf
- Webster, R. G. (1992). Evolution and Ecology of Influenza A Viruses. *American Society for Microbiology*.
- White, P. J., & Enright, M. C. (2010). Mathematical models in infectious disease epidemiology. *Infectious Diseases*, 70-75. doi:10.1016/B978-0-323-04579-7.00005-8
- WHO. (2005). World Health Organization,. Retrieved from Avian influenza: assessing the pandemic threat,: URL: http://www.who.int/iris/handle/10665/68985.
- WHO. (2019). *health topic*. Retrieved from Vaccines and immunization: https://www.who.int/health-topics/vaccines-and-immunization.
- WHO. (2019, December 5). *Measles*. Retrieved July 6, 2020, from World Health Organization: https://www.who.int/news-room/fact-sheets/detail/measles
- WHO. (2020, January 31). *Coronavirus*. Retrieved July 6, 2020, from World Health Organization: https://www.who.int/health-topics/coronavirus#tab=tab\_1
- WHO. (2020, July 6). *HIV/AIDS*. Retrieved July 6, 2020, from World Health Organization: https://www.who.int/news-room/fact-sheets/detail/hiv-aids
- Wikipedia. (2020, October 9). *Black Death*. Retrieved October 9, 2020, from Wikipedia: https://en.wikipedia.org/wiki/Black\_Death
- Wikipedia. (2020, October 5). Middle East respiratory syndrome–related coronavirus. Retrieved October 5, 2020, from Wikipedia: https://en.wikipedia.org/wiki/Middle\_East\_respiratory\_syndrome%E2%80%93related\_coron avirus
- Wood, D. (2017). *Scientific Models*. Retrieved from Definition & Examples: https://study.com/academy/lesson/scientific-models-definition-examples.html
- Woolhouse, M. (2011). How to make predictions about future infectious disease risks. *the royals society*, doi.org/10.1098/rstb.2010.0387.

**APPENDICES** 

# YAKIN DOĞU ÜNİVERSİTESİ

### APPENDIX 1

## ETHICAL APROVAL DOCUMENT

Date: 04/02/2021

#### To the Graduate School of Applied Sciences

The research project titled "Sensitivity Analysis in Covid-19 Epidemic Model" has been evaluated. Since the researcher(s) will not collect primary data from humans, animals, plants or earth, this project does not need to go through the ethics committee.

Title: Assist.Prof.Dr.

Name Surname: Bilgen Kaymakamzade

Signature:

estate

Role in the Research Project: Supervisor

# APPENDIX 2

turnitin

Assignment	ls Students	Grade Book	Libranes	Calendar	Discussion	Preferences					
NOW VIEWING	HOME - SHARKEL	> SHARKEL THE SIS									
About this This is your as	page signment inbox. To v	iew a paper, select t	the paper's title.	To view a Simila	srity Report, selec	t the paper's Sir	milarity Report icon in the sir	nilarity column. A g	hosted icon indicates that t	he Similarity Report has not	yet been generated.
Sharkel innov	Thesis	APERS •				*					
Submit File						·			Online Grading F	Report   Edit assignment :	settings   Email non-submitters
	UTHOR		IIILE		5	MILLATY	GRADE	RESPONSE	2	PAPERID	DATE
s o	harkel Mahmood		Abstract		0,	26	1	1	0	1481664325	28-Dec-2020
S	harkel Mahmood		Conclusio	ц.	05		L	ı	D	1482045967	30-Dec-2020
	harkel Mahmood		Chapter3		6		1	,	D	1481664717	28-Dec-2020
St.	narkel Mahmood		Chapter2		79		ı	ı		1481664617	28-Dec-2020
L St	larkel Mahmood		thesis		=	<b>9</b> 6	1	ı		1482045238	30-Dec-2020
C St	arkel Mahmood		chapter1		12		1	ı		1482043873	30-Dec-2020

22.01,2021 Pssist.Ard. Dr. Bilgen Komekonzede

71