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Complex contagion and negative influence in the adoption of malaria preventive measures: An empirical agent-based model

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Malaria prevention in hard-to-reach populations

- WHO goal: eradicating malaria by 2030
- Hard-to-reach populations still face a high risk of infection —> policy needs to be designed in cooperation with local population
- 10 villages in Meghalaya, North-Eastern India (mountainous area with patches of tropical forest)
- Hard-to-reach tribal population (Garo and Khasi-Jaintia): geographical marginalization, low socio-economic status, poor access to health care, resistance to instituzionaled health practices because of cultural/religious beliefs





Preventive measures

- Measures of indoor biting prevention are highly adopted
- Low adoption of outdoor biting prevention measures (spray, body cream, boots, special clothing)





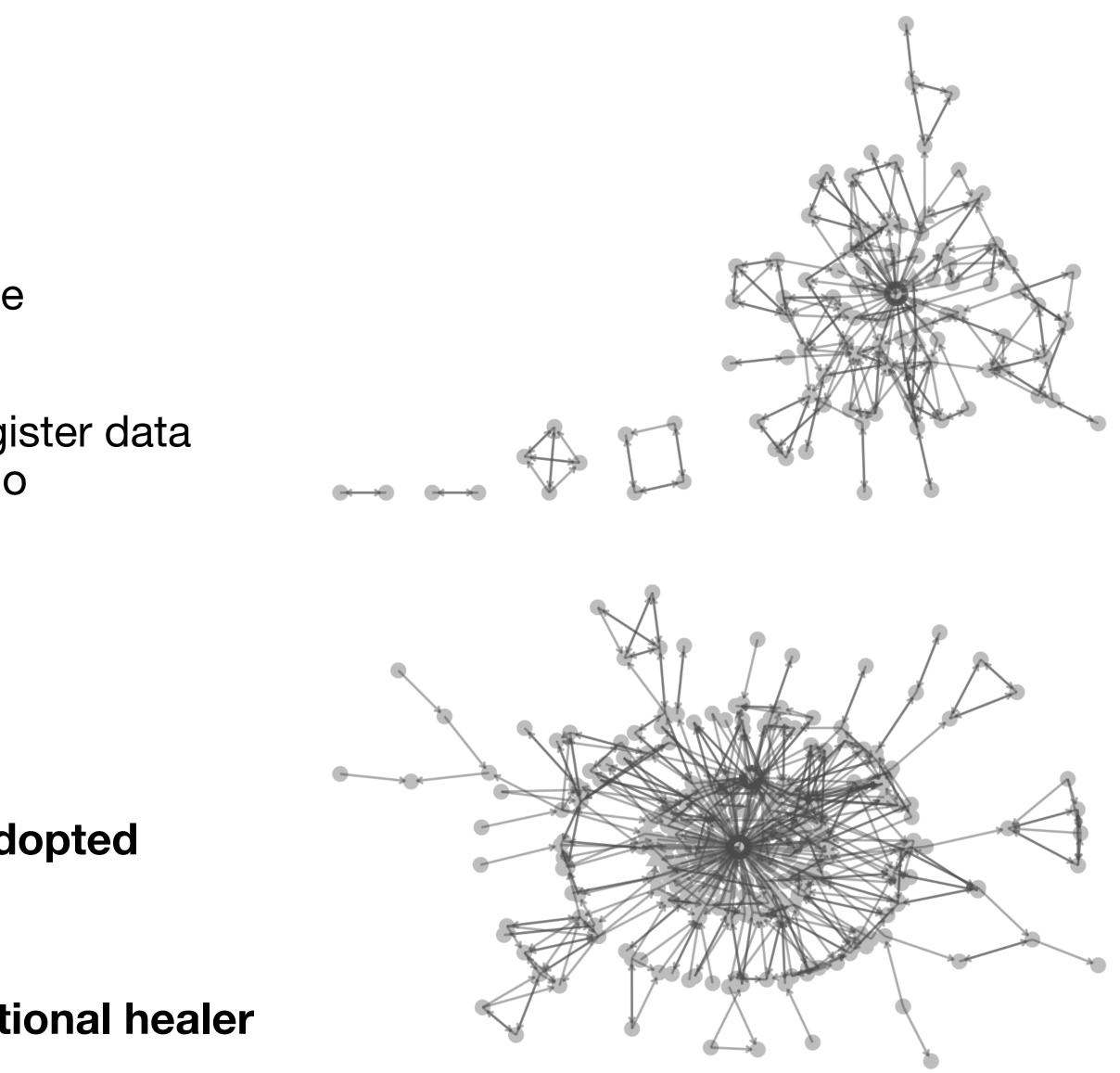






Data

- Full-network design cross-sectional data
- Data collection: 2020 2021 through face-to-face questionnaire administration
- 10 villages selected because of availability of register data and small enough to ensure high respondent ratio
- Networks:
 - Whom they talk to about health
 - Whom they avoid to talk to about health
- Behaviour: which prevention measures they adopted
- Socio-demographic characteristics
- ASHA (Accredited Social Health Activist) + traditional healer

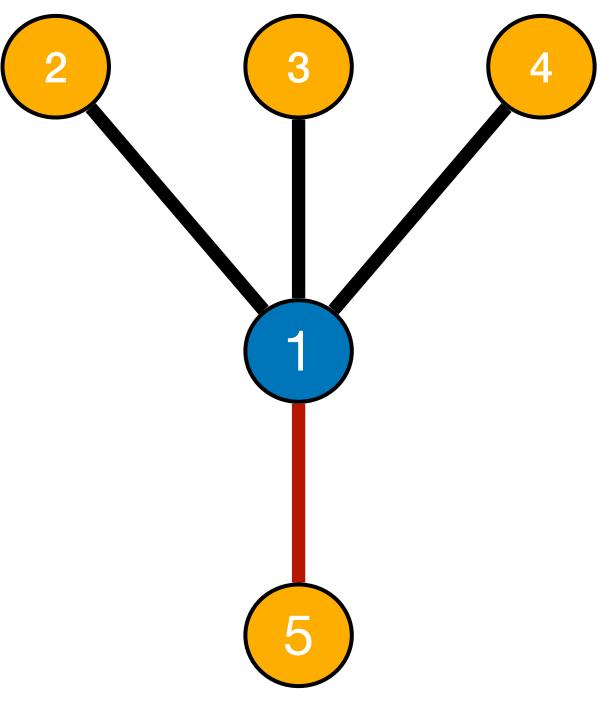


Complex contagion and negative influence

- Adopting outdoor preventive measures (cream) environmental obstacles:
 - stigmatized
 - easily observable behaviour
 - small, tight community
- **Enabling mechanism:** strong **reinforcement** by **positive ties** (threshold-based contagion)
- Counteracting mechanism: adoption by negative contacts
- Idiosyncratic case characteristics: 'stubborn' and 'zealot' (Mobilia, 2003) agents
 - ASHA (Accredited Social Health Activist): promotes adoption
 - Traditional healer: discourages adoption

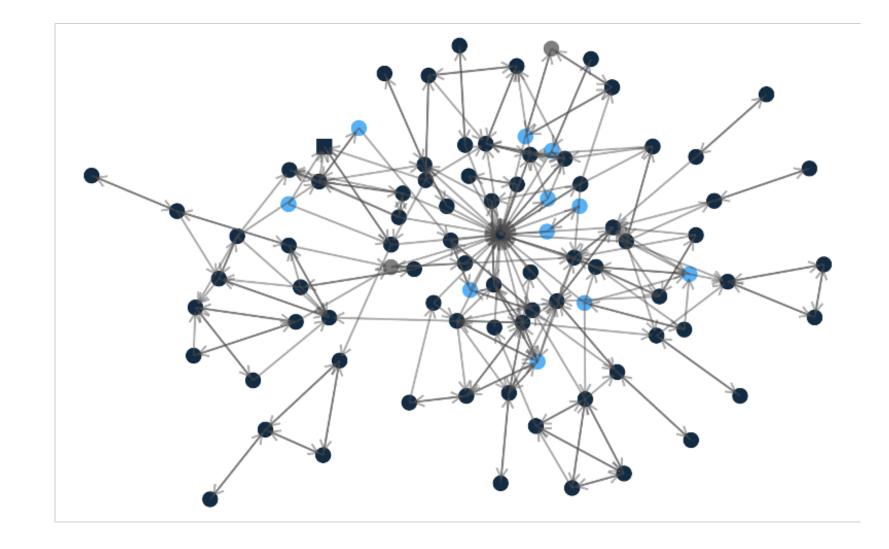


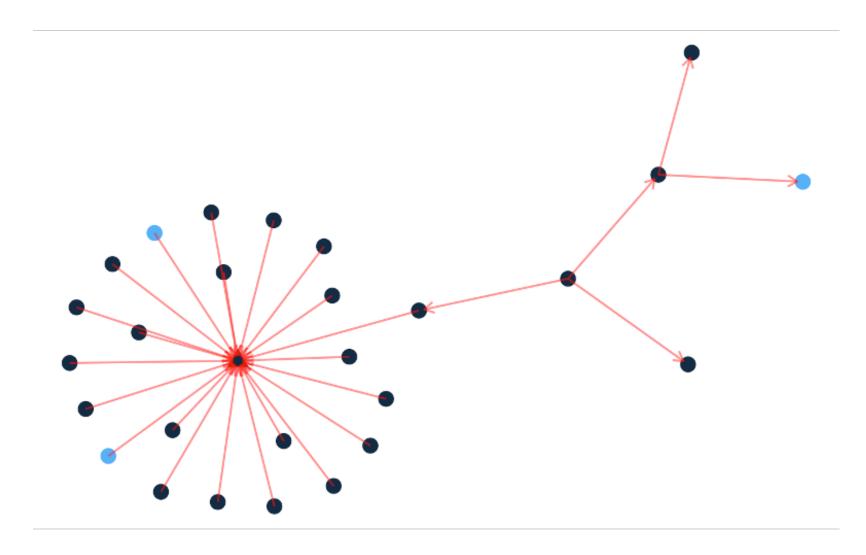




Village

- Network main component
- # individuals (nodes) = 98
- # positive ties = 272
- avg. degree (positive ties) = 2.78
- # negative ties = 27
- avg. degree (negative ties) = 0.28
- adoption rate bednets = 95.10%
- adoption rate cream = 12.75%



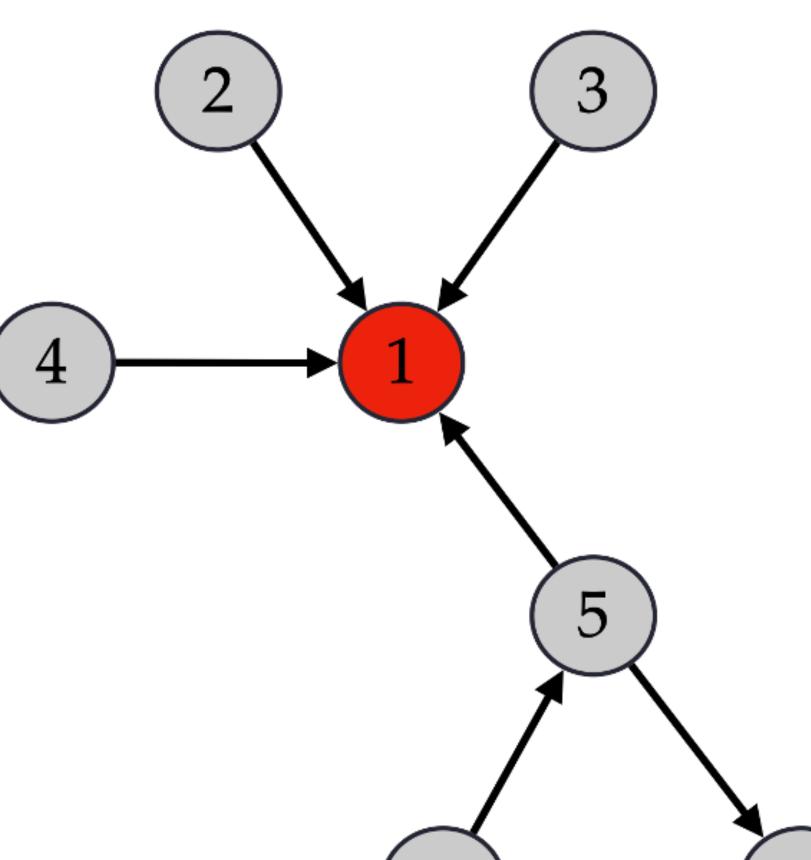


Agent-based model estimating unobserved behaviour

- Agent-based model (Gilbert, 2008; Squazzoni, 2012; Hedström & Manzo, 2015): computational dynamic model of the diffusion process in the empirically-observed networks (Bianchi & Renzini, *forthcoming*)
- Individuals' adoption of preventive measure as a discrete-choice (binary) model (Mc Fadden, 1978): stochastic logistic objective function of personal networks' composition
- **Estimating**:
 - threshold levels for adoption contagion
 - impact of negative influence (= adoption by negative contacts)
- Assuming:
 - positive impact of within-household adoption (fixed effect)
 - Positive tie with ASHA increases adoption
 - Positive tie with the traditional healer decreases adoption



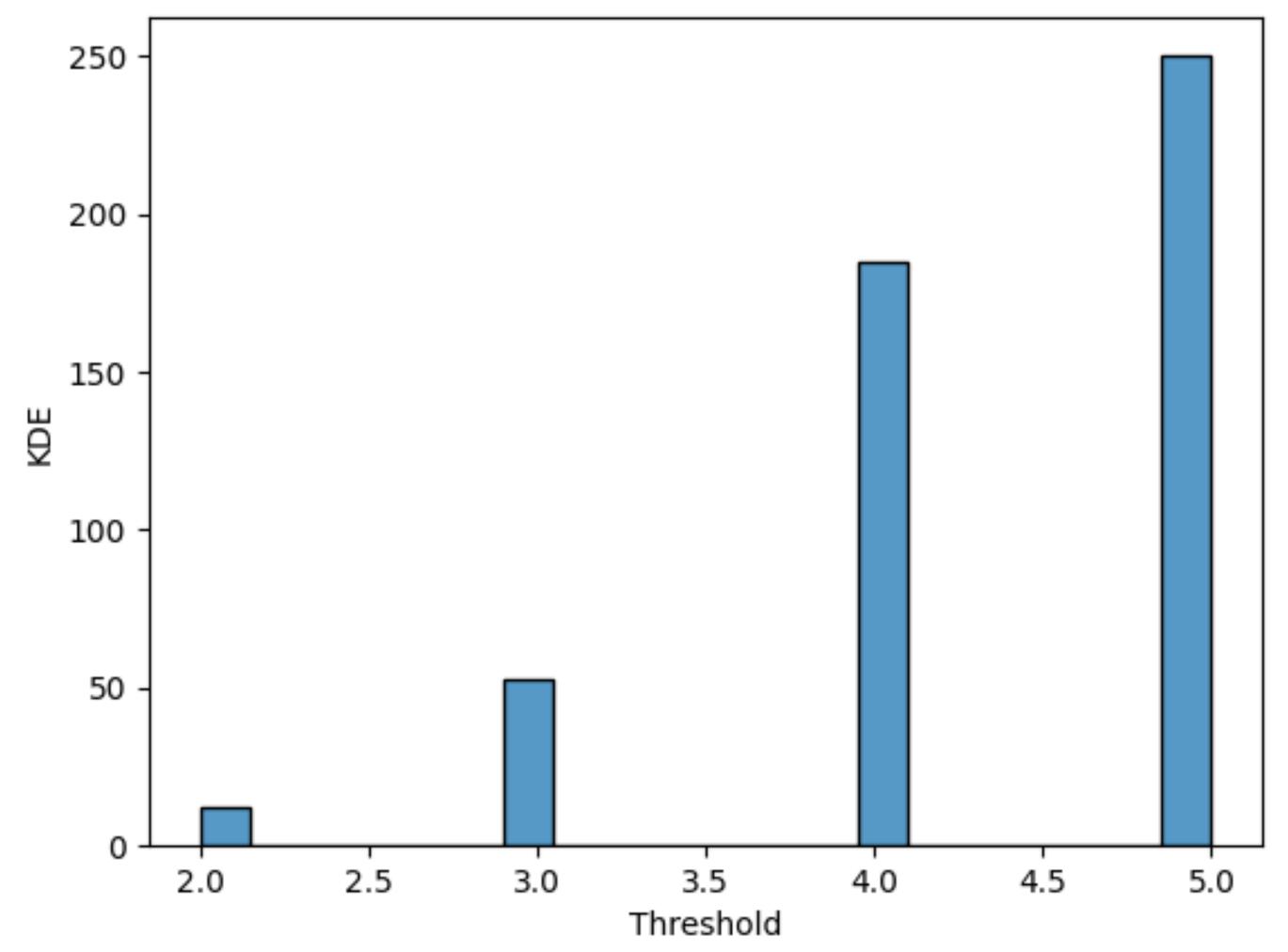








Estimated threshold



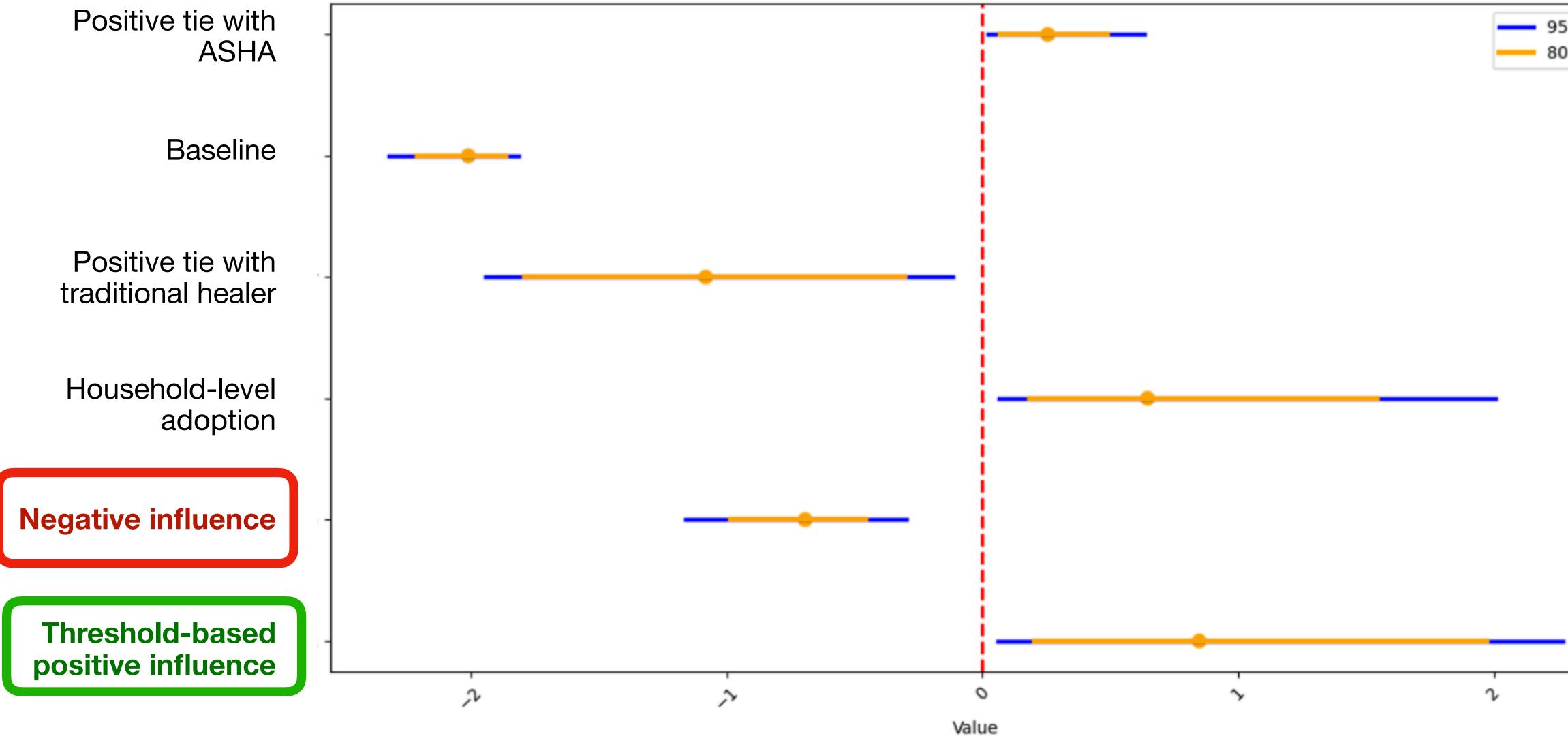




Posterior of Threshold

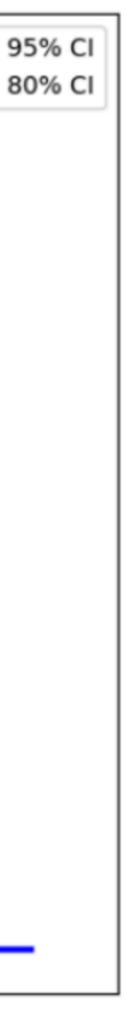
Impact of positive vs. negative influence

Median and 95%/80% CI of Posterior Distribution of Parameters







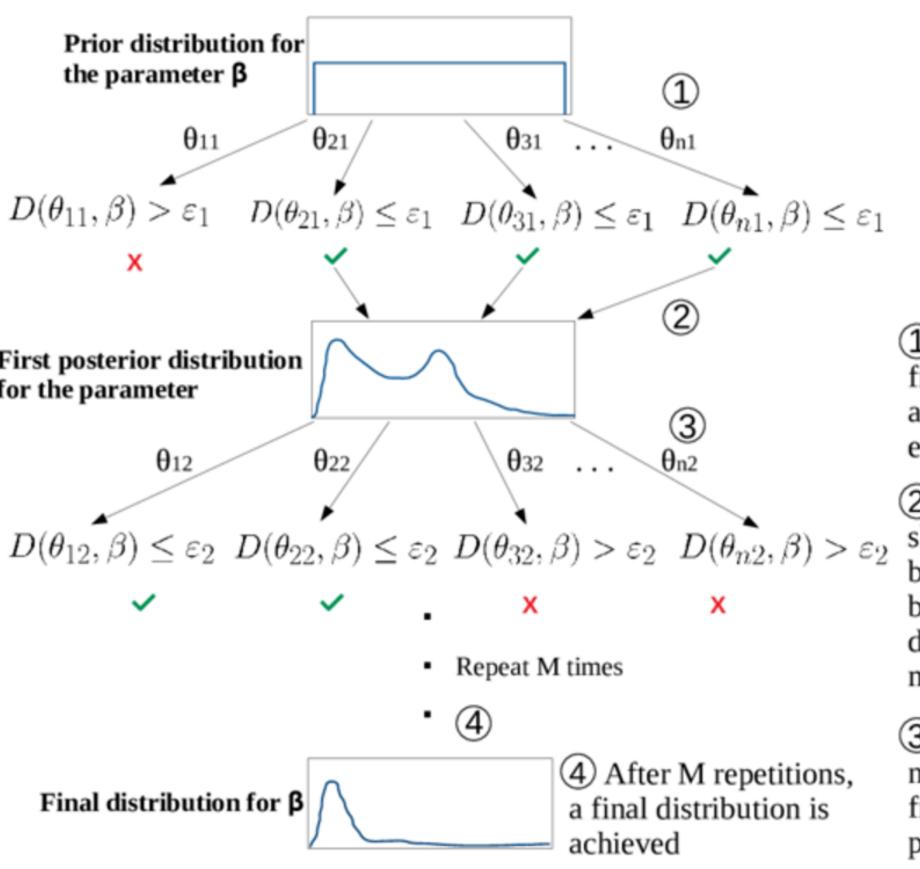


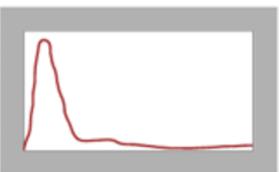
Estimation method

Approximate Bayesian Computation $D(\theta_{11},\beta) > \varepsilon_1$ Weakly informative priors (tested with predictive checks) х First posterior distribution Baseline: uniform [-3, 0] for the parameter • Threshold: {2, 3, 4, 5} Positive influence: uniform [0, 2.5]

Negative influence: uniform [-2, 0]





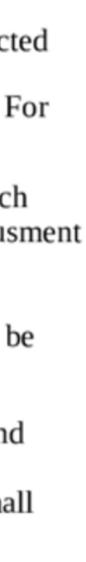


True distribution for the parameter β

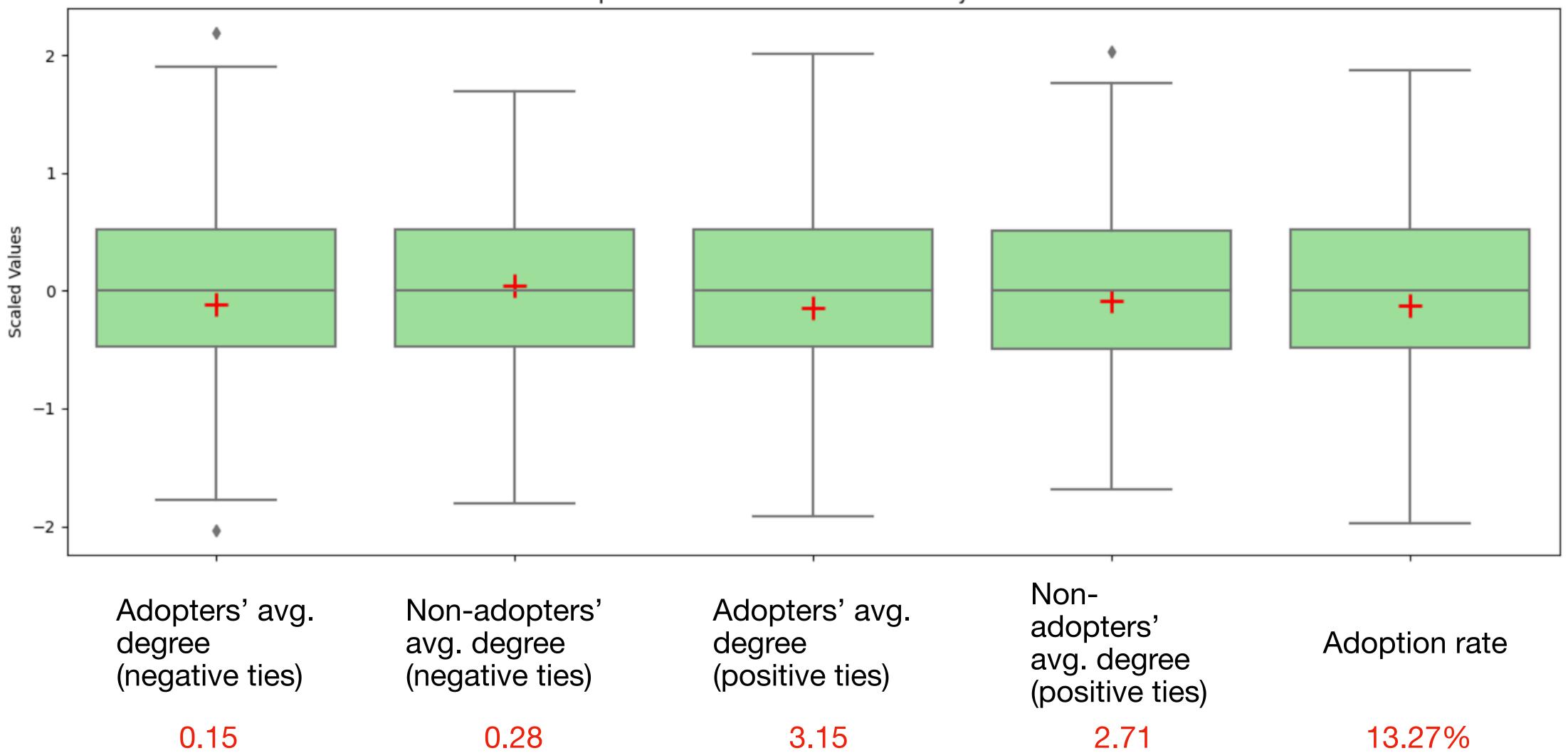
(1) n samples θ are randomly selected from the prior distribution and assumed as possible values for β . For each θ , a simulation is performed

(2) From the n samples, those which show an error $D(\theta_{i1}, \beta)$ in the adjusment below or equal to the tolerance ε_1 become part of the posterior distribution, which is expected to be more accurate than the prior

(3) A new tolerance ε_2 is placed and n samples are randomly selected from the first posterior, with a small perturbation kernel



Model fit





Boxplot of Centered and Scaled Summary Statistics

3.15

2.71

13.27%



Conclusions

- Diffusion of collectively beneficial, yet stigmatized behaviour might suffer from two pulling forces in one's personal network:
 - **Strong reinforcement** (high threshold levels)
 - High sensitivity to negative influence
- **Empirical agent-based models** can reliably estimate unobserved behaviour
- Never give up on fine-grained mechanisms if data is coarser than desired!



A large, interdisciplinary team: Sandra Albert Jane M. Carlton Anne Kessler Charishma Khongwir **Carinthia Balabet Nengnong Quinnie Doreen Nongrum** Mattimi Passah **Rajiv Sarkar** Anna Maria van Eijk Andras Vörös







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