# **Optimal control design of the COVID-19 model based on Lyapunov function and genetic algorithm**

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# **1. INTRODUCTION**

World Health Organization (WHO) announced a global pandemic caused by coronavirus disease 2019 (COVID-19) in March 2020. COVID-19, caused by a novel human coronavirus, severe-acuterespiratory-syndrome-related coronavirus-2 (SARS-CoV-2), first appeared in Wuhan, China, at the end of December 2019. The disease causes several symptoms, including difficulty breathing, cough, runny nose, odynophagia, headache, fever or chills, muscle or body aches, vomiting or diarrhea, shortness of breath, and a new loss of taste or smell [1]. The primary target of this virus is the respiratory system, and COVID-19's respiratory symptoms can range widely from mild symptoms to severe hypoxia and acute respiratory distress syndrome (ARDS) [2]. Several researchers have conducted in-depth research regarding the SARS-CoV-2 virus to create effective and safe drugs and vaccines to treat this disease. It is essential to do this, considering that COVID-19 has caused millions of deaths globally [3]–[5].

Mathematical models can be an alternative to preliminary research before conducting clinical trials of vaccination and treatment scenarios for patients. In [6], a mathematical model of high-risk parasitic worm clonorchiasis was used to conduct an analytical and numerical examination of vaccine recommendations. While a vaccine to cure this condition has not yet been developed, this mathematical model is the first reference point. A mathematical model of dengue fever transmission was constructed in [7], [8] to determine the efficacy of Wolbachia release as a biological control in stopping the spread of the Aedes aegypti mosquito, which serves as a vector for the dengue fever virus. The analysis of dynamics of the COVID-19 dissemination were described by the susceptible-exposed-infected-recovery (SEIR) model in [9]–[11]. In [11], this model separates the symptomatic and asymptomatic infected compartments into two groups.

Control variables such as treatment and vaccination have been discussed in the SEIRCOVID-19 model in several studies [12]–[16]. Applying these control variables aims to reduce the spread of COVID-19 in the population by reducing the number of infected and exposed humans. However, the control method used does not contain the uncertainty and robustness factors of the model, and the parameter values are not estimated based on real data. Model parameter values need to be estimated based on real data to obtain more precise simulation results based on real conditions in the population [17]–[19]. Different approaches have been taken to improve modeling concerning the new coronavirus using genetic algorithms. genetic algorithms (GA) were developed in the mid-1960s by Holland by using the natural selection process to inspire fresh, improved, and varied approaches to optimization challenges [20].

Lyapunov control is usually used in the field of mechanical models [21], [22]. In this research, a Lyapunov function-based control method will be constructed that can stabilize the SEIR model while achieving control objectives. Then, a new approach is used, using a genetic algorithm to estimate optimal control parameter values to replace the parameter tuning process that has been carried out so far. The model parameter values will be estimated based on actual data using a genetic algorithm. A genetic algorithm is a search algorithm that mimics the process of natural selection to find the optimal solution to a problem. In this study, the optimal solution is when the model satisfies the control objective and Lyapunov stability criteria [23], [24]. Next, the model will be analyzed for stability, and numerical simulations will be carried out based on the proposed Lyapunov control design. Three control scenarios will be carried out, namely vaccination control only, treatment control only, and vaccination and treatment control simultaneously.

This research is structured as follows: section 1 contains the introduction and formulation of the problem. Section 2 provides an explanation of the mathematical model formulation of the spread of COVID-19, analysis of the dynamics of the COVID-19 model including the model equilibrium point, the basic reproduction number, stability analysis of the equilibrium point. Section 3 presents the results, which involve the estimation of parameters for the COVID-19 model, the development of a control design using a quadratic Lyapunov function, and the numerical simulation of the control design's application and interpretation. Finally, section 4 provides a conclusion from the entire research.

# **2. RESEARCH METHOD**

The research flow in this work consists of four main stages, namely model formulation, model dynamic analysis, controller design determination, and numerical simulation and result analysis. The main topic discussed in this research is determining optimal control in minimizing the spread of COVID-19. This research uses parameter values sourced from previous research obtained from the parameter estimation process. The brief research methodology of this work is shown in Figure 1.



Figure 1. Research methodology

#### **2.1. Formulate a model**

In this stage, a SEIR mathematical model will be prepared that describes the dynamics of the spread of COVID-19 in a population. The model was built based on [17], [18] using several assumptions as problem constraints to facilitate model formulation. The assumptions used in this research are that the birth rate and the death rate are the same; the population is closed; there is no movement (migration, mobility) from or to the observed area; every human being is born into a susceptible population; types of death are natural, deaths from COVID-19 are ignored; and immunity is not immune, meaning that individuals who already have immunity can lose immunity and re-enter the susceptible population [11], [25].

## **2.2. Analysis the model**

At this stage, an analysis of the model's dynamics is carried out, consisting of determining the basic reproduction number  $(R_0)$  and analyzing the stability of the model's equilibrium point. This aims to determine the important conditions of the model as knowledge in constructing controllers and implementing numerical simulations. The amount of  $R_0$  is calculated using the next generation matrix by determining the largest absolute eigenvalue by first determining the Jacobian matrix around the non-endemic equilibrium point. Local stability analysis is determined by linearizing the model around the equilibrium point using the Jacobian matrix.

#### **2.3. Optimal control**

At this stage, optimal control is constructed based on the Lyapunov function and genetic algorithm optimization. The objective function of the controller is to achieve a stable condition and reduce the number of individuals infected with COVID-19. First, the COVID-19 model that has been prepared will be called the actual nonlinear system. Then, a reference model was formed as a tracking system that will describe ideal conditions, namely non-endemic conditions with no spread of the COVID-19 disease. Next, a controller based on the Lyapunov function is designed to estimate the control parameter values using a genetic algorithm with a fitness function that minimizes the error between the actual model output and the reference model and reaches the condition. When the error between the actual model output and the reference model reaches a minimum, the actual model has succeeded in moving along with the reference model toward nonendemic conditions.

#### **2.4. Numerical simulation**

In this stage, a numerical simulation of the control design is carried out. Three control scenarios will be reviewed to see the different effect of every control variable, namely control vaccination  $(u_1)$  only, control treatment  $(u_2)$  only, and control  $u_1$  and  $u_2$  simultaneously. Numerical simulations were carried out using the 4<sup>th</sup> order Runge-Kutta method. The model parameter values use reference values from previous research, while the initial values used refer to conditions at a certain time. The numerical simulation also aims to determine the effectiveness of the control design that has been prepared by calculating the percentage reduction in the number of cases with and without control.

## **3. RESULTS AND DISCUSSION**

#### **3.1. Results of model formulation**

The proposed of a mathematical model for the spread of COVID-19 based on [10], [26] requires basic assumptions, defining compartments and parameters, and explaining disease transmission between compartments. The proposed model was divided the total population N into four subpopulations, namely susceptible  $(S)$ , exposed  $(E)$ , infected  $(I)$ , and immune  $(R)$ . In this model, the immune individuals are individuals who already have immunity to COVID-19, both natural immunity and immunity from vaccines. There are two control variables, namely vaccination  $(u_1)$  and treatment  $(u_2)$ . The definition of the model parameters is presented in Table 1.



*Optimal control design of the COVID-19 model based on Lyapunov function … (Aminatus Sa'adah)*

Each compartment of the model can increase or decrease in number at any time  $t$ . Control of vaccination  $u_1$  was given to susceptible and exposed individuals at rates of  $u_1 pS$  and  $u_1 pE$ , respectively. Susceptible and exposed individuals who have been vaccinated will move into immune individuals. Susceptible individuals increase because the recruitment rate  $bN$ . Unvaccinated susceptible individuals  $(1 - u_1 p)$ S can become exposed individuals if they interact with infected individuals with a transmission rate of  $(1 - u_1 p)\beta SI/N$ . The exposed individuals move into infected individuals after passing the incubation period at a rate of  $\alpha$ . The parameter  $\alpha$  can be interpreted as the inverse of the length of the incubation period. Infected individuals can recover through treatment control  $u<sub>2</sub>$  and switch to immune individuals at a rate of  $(1 + u_2)\varepsilon I$ . Based on the assumption that immunity is temporary, immune individuals can lose their immunity and return to susceptible individuals at a rate of  $\phi R$ . Each compartment can be reduced by natural death at a rate of  $\mu$  [26]. A transmission diagram illustrating the interactions of each compartment is given in Figure 2. According to the above explanation, we obtain the mathematical model of COVID-19 with control as in system (1):

$$
\dot{S} = b + \phi R - (1 - u_1 p)\beta SI - u_1 pS - \mu S,\n\dot{E} = (1 - u_1 p)\beta SI - (\alpha + \mu)E - u_1 pE,\n\dot{I} = \alpha E - (1 + u_2)\varepsilon I - \mu I,\n\dot{R} = (1 + u_2)\varepsilon I + u_1 pS + u_1 pE - (\phi + \mu)R,
$$
\n(1)

where  $S + E + I + R = 1$  and initial condition  $S(0), E(0), I(0), R(0) \ge 0$ .



Figure 2. Transmission diagram of the COVID-19 model

#### **3.2. Results of analysis of the model's dynamics**

This section examines the dynamics of the mathematical model that describes the spread of COVID-19 in the absence of any control measures ( $u_1 = u_2 = 0$ ). It includes an examination of the equilibrium point, basic reproduction number, and the stability analysis of the equilibrium point. The following system (2) is a mathematical model of COVID-19 without control:

$$
\dot{S} = b + \phi R - \beta SI - u_1 pS - \mu S,\n\dot{E} = \beta SI - (\alpha + \mu)E - u_1 pE,\n\dot{I} = \alpha E - \varepsilon I - \mu I,\n\dot{R} = \varepsilon I + u_1 pS + u_1 pE - (\phi + \mu)R,
$$
\n(2)

The equilibrium points of the model in system (2) is obtained when the rate of change of a subpopulation over time is zero, namely when  $\dot{S} = \dot{E} = \dot{I} = \dot{R} = 0$  [27]. The mathematical model describes in system (2) possesses two equilibrium points, namely the disease-free equilibrium  $E_0$  and the endemic equilibrium point  $E_1$ . The disease-free equilibrium point is a condition when there is no spread of disease in the population, namely  $E = 0$  and  $I = 0$  [28]. Based on the calculations, the non-endemic equilibrium point is  $E_0 = (S_0, E_0, I_0, R_0) = (b/\mu, 0, 0, 0)$ . Based on the assumption of positivity of all parameters, the equilibrium points  $E_0$  always exists. The endemic equilibrium point is a condition where the disease spreads in the population, namely  $E \neq 0$  and  $I \neq 0$ . The endemic equilibrium points of the system (2) is  $E_1 = (S^*, E^*, I^*, R^*)$  where

$$
S^* = (\alpha + \mu)(\varepsilon + \mu)/\alpha\beta,
$$
  
\n
$$
E^* = ((\mu +)(\mu + \varepsilon)^2(\alpha + \mu)(R_0 - 1))/\alpha\beta((\alpha + \mu)(\phi + \varepsilon + \mu) + \phi\varepsilon),
$$

 $I^* = (\alpha + \mu)(\mu + \phi)(\mu + \varepsilon)(R_0 - 1)/\beta((\alpha + \mu)(\phi + \varepsilon + \mu) + \phi \varepsilon)$ , and  $R^* = (\varepsilon(\alpha + \mu)(\mu + \varepsilon)(R_0 - 1))/\beta((\alpha + \mu)(\phi + \varepsilon + \mu) + \phi \varepsilon).$ 

Therefore, the endemic equilibrium point  $E_1$  exists if  $R_0 > 1$ .

## **3.2.1. Basic reproduction number**  $(R_0)$

The basic reproduction number  $R_0$  is one of the important parameters in the epidemic model. In a population that is fully susceptible, the basic reproduction number indicates the number of secondary infection cases that were passed on by a single primary infection case [29]. The basic reproduction number is a threshold quantity that indicates whether an epidemic will occur or not. If the basic reproduction number  $(R_0)$  is less than 1, the infection will become extinct. Conversely, if  $R_0$  is more than 1, an epidemic will occur. The value of  $R_0$  will be computed using the next generation matrix (NGM) as described in reference [5]. Based on system (2) defined vector  $x = (E, I)^T$  then decompose x into  $F - V$  form as follows:

$$
F = \begin{pmatrix} \beta SI \\ 0 \end{pmatrix}
$$
 and 
$$
V = \begin{pmatrix} (\alpha + \mu)E \\ -\alpha E + (\varepsilon + \mu)I \end{pmatrix}
$$
,

where matrix  $F$  represents disease transmission and matrix  $V$  represents disease transition. Next, the NGM matrix is obtained from the formula  $NGM = \mathbb{FZ}^{-1}$  with  $\mathbb{F} = \frac{\partial F}{\partial x}$  $\frac{\partial F}{\partial x}\Big|_{E_0}$  and  $\mathbb{Z} = \frac{\partial V}{\partial x}$  $\left.\frac{\partial V}{\partial x}\right|_{E_0}$  [30]. The NGM matrix corresponding to the disease-free equilibrium point  $E_0$  is as (3):

$$
NGM = \begin{pmatrix} \frac{\beta \alpha S}{(\alpha + \mu)(\varepsilon + \mu)} & \frac{\beta S}{(\varepsilon + \mu)} \\ 0 & 0 \end{pmatrix}.
$$

So that the basic reproduction number obtained from system (2) is:

$$
R_0 = \frac{\alpha \beta b}{\mu(\alpha + \mu)(\mu + \varepsilon)}\tag{3}
$$

Disease-free conditions will occur if the disease is not epidemic or infection has not occurred, namely when  $R_0 < 1$ . Note that the term *b* represents the parameters for the occurrence of infection in the population. Meanwhile, the term  $(\alpha + \mu)(\mu + \varepsilon)$  represents the parameters related to the reduction of infection in the population. Thus, the condition that describes the disease is not endemic or infection has not occurred if the infection rate is less than the cure and death rate.

#### **3.2.2. The stability analysis of equilibrium point**

The mathematical model of COVID-19 describes in system (2) takes the form of a system of nonlinear differential equations. Therefore, the stability analysis is carried out by linearization around the equilibrium point using the Jacobian matrix [29]. The Jacobian matrix of system (2) is obtained by partially deriving the four equations  $f_1$  to  $f_4$  with respect to compartments S, E, I, and R, respectively, as:

$$
J = \begin{pmatrix} \frac{\partial f_1}{\partial S} & \frac{\partial f_1}{\partial E} & \frac{\partial f_1}{\partial I} & \frac{\partial f_1}{\partial R} \\ \frac{\partial f_2}{\partial S} & \frac{\partial f_2}{\partial E} & \frac{\partial f_2}{\partial I} & \frac{\partial f_2}{\partial R} \\ \frac{\partial f_3}{\partial S} & \frac{\partial f_3}{\partial E} & \frac{\partial f_3}{\partial I} & \frac{\partial f_3}{\partial R} \\ \frac{\partial f_4}{\partial S} & \frac{\partial f_4}{\partial E} & \frac{\partial f_4}{\partial I} & \frac{\partial f_4}{\partial R} \end{pmatrix}
$$

where

 $f_1 = \dot{S} = b + \phi R - \beta SI - \mu S$  $f_2 = \dot{E} = \beta SI - (\alpha + \mu)E$  $f_3 = \dot{I} = \alpha E - (\varepsilon + \mu)I$  $f_4 = \dot{R} = \varepsilon I - (\phi + \mu)R$ 

We obtained the Jacobian of the system  $(2)$  is:

$$
J = \begin{pmatrix} -\beta I - \mu & 0 & -\beta S & \phi \\ \beta I & -(\alpha + \mu) & \beta S & 0 \\ 0 & \alpha & -(\varepsilon + \mu) & 0 \\ 0 & 0 & \varepsilon & -(\phi + \mu) \end{pmatrix} \tag{4}
$$

The stability analysis of the disease-free equilibrium (DFE) point  $E_0$  and endemic equilibrium point  $E_1$  of system (2) is given by the following theorems:

*Theorem* 1. The non-endemic equilibrium (DFE) point  $E_0$  is asymptotically stable if  $R_0 < 1$ .

*Proof.* The Jacobian matrix (4) evaluated at the non-endemic equilibrium point  $E_0$  of system (2) is as (5):

$$
J_0 = \begin{pmatrix} -\mu & 0 & -\frac{\beta b}{\mu} & \phi \\ 0 & -(\alpha + \mu) & \frac{\beta b}{\mu} & 0 \\ 0 & \alpha & -(\varepsilon + \mu) & 0 \\ 0 & 0 & \varepsilon & -(\phi + \mu) \end{pmatrix}.
$$
 (5)

The eigen values of the Jacobian matrix  $J_0$  are  $\lambda_1 = -\mu$ ,  $\lambda_2 = -(\mu + \phi)$ , and  $\lambda_{3,4}$  are the root of the equation

$$
\lambda^2 + \lambda(\alpha + 2\mu + \varepsilon) + ((\alpha + \mu)(\mu + \varepsilon)(1 - R_0)) = 0. \tag{6}
$$

The eigen values  $\lambda_{3,4}$  will be negative if  $((\alpha + \mu)(\mu + \varepsilon)(1 - R_0)) > 0$ , it means when  $R_0 < 1$ . The equilibrium point  $E_0$  will asymptotically stable if all of the eigen values are negative. Therefore, the nonendemic equilibrium point  $E_0$  is asymptotically stable if  $R_0 < 1$ .

*Theorem* 2. The endemic equilibrium point  $E_1$  is asymptotically stable if  $R_0 > 1$ ,  $\left(\frac{c_1}{\sigma R_0}\right)$  $\left(\frac{c_1}{\alpha\beta s^*}\right) > 1, \left(\frac{c_2}{\alpha\beta s^*(t)}\right)$  $\frac{c_2}{\alpha\beta S^*(\mu+\phi)}$ ) > 1, and  $\frac{a_1c_1 + \alpha\beta^2(\mu+\phi)}{a_1\alpha^2\beta^2 + \beta^2} > 1$ , where

$$
a_1 \alpha \beta s^* + c_2
$$
  
and  

$$
a_1 = \beta I^* + \alpha + 3\mu + \phi + \varepsilon,
$$

 $c_1 = (\beta I^* + \mu)(\alpha + 2\mu + \phi + \varepsilon) + \alpha(\mu + \varepsilon) + \phi(\alpha + \varepsilon)$ , and  $c_2 = \beta I^*[(\mu + \phi + \varepsilon)(\alpha + \mu) + \phi \varepsilon] + (\mu + \alpha)[\mu(\mu + \phi + \varepsilon) + \phi \varepsilon].$ 

*Proof.* The Jacobian matrix (4) evaluated at the endemic equilibrium point  $E_1$  of system (2) is as (7):

$$
J_1 = \begin{pmatrix} -\beta I^* - \mu & 0 & -\beta S^* & \phi \\ \beta I^* & -(\alpha + \mu) & \beta S^* & 0 \\ 0 & \alpha & -(\varepsilon + \mu) & 0 \\ 0 & 0 & \varepsilon & -(\phi + \mu) \end{pmatrix}.
$$
 (7)

The eigen values of Jacobian matrix  $J_1$  are  $\lambda_1 = -\mu$  and  $\lambda_{2,3,4}$  are the root of the qubic (8):

$$
\lambda^3 + a_1 \lambda^2 + a_2 \lambda + a_3 = 0,\tag{8}
$$

where  $a_1 = \beta I^* + \alpha + 3\mu + \phi + \varepsilon$ ,  $a_2 = c_1 - \alpha \beta S^*$ ,  $a_3 = c_2 - \alpha \beta S^* (\mu + \phi)$ ,  $c_1 = (\beta I^* + \mu)(\alpha + 2\mu + \phi)$  $\phi + \varepsilon$  +  $\alpha(\mu + \varepsilon) + \phi(\alpha + \varepsilon)$ , and  $c_2 = \beta I^*[(\mu + \phi + \varepsilon)(\alpha + \mu) + \phi \varepsilon] + (\mu + \alpha)[\mu(\mu + \phi + \varepsilon) + \phi \varepsilon]$ .

Based on Routh-Hurwitz criteria, the roots of (8) will have negative real part if  $a_1, a_2, a_3 > 0$  and  $a_1 a_2 - a_3 > 0$ . Therefore, we obtained as follows:

− Because of all the parameter is positive and  $I^* \geq 0$ , then  $a_1 > 0$ .

- The coefficient  $a_2 > 0$  if  $\left(\frac{c_1}{\alpha R^2}\right)$  $\frac{c_1}{\alpha\beta s^*}$  > 1.
- $\frac{c_2}{\sqrt{aRs^2}}$  The coefficient  $a_3 > 0$  if  $\left(\frac{c_2}{aRs^2}$  $\frac{c_2}{\alpha\beta S^*(\mu+\phi)}$  > 1.
- The term  $a_1 a_2 a_3 > 0$  will satisfied if  $\frac{a_1 c_1 + a \beta^2 (\mu + \phi)}{a_1 \alpha \beta S^* + c_2}$  $\frac{c_1 + a_p (\mu + \varphi)}{a_1 \alpha \beta S^* + c_2} > 1.$

The endemic equilibrium point  $E_1$  will be asymptotically stable if all of the eigenvalues are negative. Hence, the endemic equilibrium point  $E_1$  will be asymptotically stable if  $R_0 > 1$ ,  $\left(\frac{c_1}{\sigma R_0}\right)$  $\left(\frac{c_1}{\alpha\beta s^*}\right) > 1, \left(\frac{c_2}{\alpha\beta s^*(t)}\right)$  $\frac{c_2}{\alpha\beta S^*(\mu+\phi)}$  > 1, and  $a_1c_1+a\beta^2(\mu+\phi)$  $\frac{c_1 + a_p (\mu + \varphi)}{a_1 \alpha \beta S^* + c_2} > 1.$ 

## **3.3. Results of optimal control construction**

In this section, we discuss the design of Lyapunov's control for the COVID-19 model with vaccine and treatment control [2], [26], [31]. The control design aims to overcome the nonlinearity and instability in the mathematical model of COVID-19 in the system (1). System (1) can be written in the following form:

$$
x = f(x, u, t), \tag{9}
$$

where  $x = (S, E, I, R)$ ,  $u = (u_1, u_2)$ . The system (1) is referred to as the actual system. Furthermore, the Lyapunov Quadratic Function (LQF) will be used to analyze the system (1) and develop appropriate control designs to stabilize and control the spread of COVID-19. First, a reference system (10) is established as:

$$
x_d = Fx_d, \begin{pmatrix} S \\ E \\ I \\ R \end{pmatrix} = \begin{pmatrix} -\mu & 0 & -\beta_1 & 0 \\ 0 & -(\alpha + \mu) & \beta_1 & 0 \\ 0 & \alpha & -(\varepsilon + \mu) & 0 \\ 0 & 0 & \varepsilon & -\mu \end{pmatrix} \begin{pmatrix} S \\ E \\ I \\ R \end{pmatrix}.
$$
 (10)

The parameter  $\beta_1$  is the infection rate selected so that the reference model on the system (10) meets the disease-free condition. The magnitude of the error between the reference model (10) and the actual system (1) is defined as (11):

$$
e = x_d - x
$$
  
\n
$$
\dot{e} = \dot{x_d} - \dot{x}
$$
\n(11)

Substitute the system (1) and system (10) into (11) will obtained.

$$
\dot{e} = Fx_d - f(x, u, t) \n\dot{e} = Fx_d - Fx + Fx - f(x, u, t) \n\dot{e} = Fe + Fx - f(x, u, t)
$$
\n(12)

Lyapunov quadratic function (LQF) defined as (13):

$$
V(e) = e^T P e, \tag{13}
$$

where  $P$  is real symmetry and positive definite matrix. Differentiate  $(13)$  over  $t$  will gives:

$$
\dot{V}(e) = \dot{e}^T Pe + e^T P \dot{e}
$$
\n
$$
\dot{V}(e) = e^T (F^T P + PF) e + 2e^T P [Fx - f(x, z, u, t)]
$$

where

$$
F^T P + P F + Q = 0, \text{ and} \tag{15}
$$

 $\dot{V}(e) = -e^{T}Qe + 2M$  (14)

$$
M = e^T P[F x - f(x, u, t)].
$$
\n(16)

Then, substitute the system (1) and (10) into (16) will obtain:

$$
M = e^{T} P[Fx - f(x, u, t)]
$$
  
=  $(e_1 \quad e_2 \quad e_3 \quad e_4)$ 
$$
\begin{pmatrix} p_{11} & p_{12} & p_{13} & p_{14} \\ p_{12} & p_{22} & p_{23} & p_{24} \\ p_{13} & p_{23} & p_{33} & p_{34} \\ p_{14} & p_{24} & p_{34} & p_{44} \end{pmatrix}
$$

$$
\begin{bmatrix} -\beta_1 I - \mu S \\ \beta_1 I - (\alpha + \mu) E \\ \alpha E - (\varepsilon + \mu) I \\ \varepsilon I - \mu R \end{bmatrix} - \begin{pmatrix} b + \phi R - (1 - u_1 p) \beta S I - u_1 p S - \mu S \\ (1 - u_1 p) \beta S I - (\alpha + \mu) E - u_1 p E \\ \alpha E - (1 + u_2) \varepsilon I - \mu I \\ \alpha E - (1 + u_2) \varepsilon I + u_1 p S + u_1 p E - (\phi + \mu) R \end{pmatrix}
$$

$$
= (r_1 \t r_2 \t r_3 \t r_4) \begin{pmatrix} -\beta_1 I - b - \phi R + (1 - u_1 p)\beta SI + u_1 pS \\ \beta_1 I - (1 - u_1 p)\beta SI + u_1 pE \\ u_2 \varepsilon I \\ -u_2 \varepsilon I - u_1 pS - u_1 pE + \phi R \end{pmatrix}
$$
  
=  $r_1(-\beta_1 I - b - \phi R + \beta SI) + r_2(\beta_1 I - \beta SI) + r_4 \phi R + u_1 p((r_2 - r_1)\beta SI + (r_1 - r_4)S + (r_2 - r_4)E) + u_2 \varepsilon I(r_3 - r_4),$  (17)

where  $r_1 = e_1p_{11} + e_2p_{12} + e_3p_{13} + e_4p_{14}$ ,  $r_2 = e_1p_{12} + e_2p_{22} + e_3p_{23} + e_4p_{24}$ ,  $r_3 = e_1p_{13} + e_2p_{23} + e_3p_{23} + e_4p_{24}$  $e_3p_{33} + e_4p_{34}, r_4 = e_1p_{14} + e_2p_{24} + e_3p_{34} + e_4p_{44},$  $I$  et

$$
u_1 = \frac{-r_1(-\beta_1 I - b - \phi R + \beta SI) - c_1 S^2 - c_2 E^2 + c_3 S^2 sign(r_1) + c_4 E^2 sign(r_3)}{p((r_2 - r_1)\beta SI + (r_1 - r_4)S + (r_2 - r_4)E)}\tag{18}
$$

$$
u_2 = \frac{-r_2(\beta_1 I - \beta SI) - r_4 \phi R - c_5 I^2 + c_6 I^2 sign(r_2)}{\varepsilon I(r_3 - r_4)}.
$$
\n(19)

Substitute (18) and (19) into (17) then we obtained

$$
M = -c_1S^2 - c_2E^2 + c_2S^2sign(r_1) + c_4E^2sign(r_3) - c_5I^2 + c_6I^2sign(r_2).
$$
 (20)

Therefore, (14) become

$$
\dot{V}(e) = -e^{T}Qe + 2(-c_{1}S^{2} - c_{2}E^{2} + c_{3}S^{2}sign(r_{1}) + c_{4}E^{2}sign(r_{3}) - c_{5}I^{2} + c_{6}I^{2}sign(r_{2})).(21)
$$

Next, the matrix  $P$  will be solved from (15). In general, the parameter values in the controller design are determined by tuning. However, in this study, optimization was carried out using a genetic algorithm to obtain the parameter values  $c_i$ ,  $i = 1, ..., 6$ , of the control designs (18) and (19) that met  $\dot{V}(e) < 0$  so that the system was stable.

#### **3.4. Results of numerical simulation**

In this section, a numerical simulation of the control design obtained from (20). The overview of the control strategy is given in Figure 1. Three control scenarios will be reviewed, namely control  $u_1$  only, control  $u_2$  only, and control  $u_1 \& u_2$  simultaneously. The initial value used in this simulation is  $(S, E, I, R)$ (0.980047, 8.6596 × 10−4 , 0.001740, 0.017347) with a simulation time of 100 days. The parameter values of the COVID-19 mathematical model use the values in Table 1.

#### **3.4.1. Scenario 1 (control**  $u_1$  **only)**

Simulations were carried out by applying only vaccination controls, namely  $u_1 \neq 0$  and  $u_2 = 0$ . The value of the control design parameter estimates for scenario 1 is shown in Table 2. The graph of the control effort  $u_1$  for implementing scenario 1 is given in Figure 3. The dynamics of each population based on the application of control  $u_1$  is given in Figure 4. Based on Figure 3, the amount of control  $u_1$  is given quite high at the beginning of the observation period then it decreases slowly until the end. Figure 4 shows that by giving control of vaccination to susceptible and exposed populations causes a decrease in both populations while increasing the immune population. Figure 4(a) shows that the number of susceptible humans decreased drastically and relatively quickly due to the implementation of vaccination control. The susceptible population will change phase to become an immune population, resulting in a drastic increase in the immune population, as seen in Figure 4(b). Figures 4(c) and 4(d) show that the exposed and infected individual populations have not been able to follow the reference curve well. However, in general, vaccination control reduced the exposed and infected population.

Table 2. Controller's parameter value of scenario 1, 2, and 3

Scenario 1		Scenario 2		Scenario 3	
Parameter	Value	Parameter	Value	Parameter	Value
$c_{1}$	0.89336	$c_{1}$	0.91366	$c_{1}$	0.91366
c <sub>2</sub>	0.55222	c <sub>2</sub>	0.29210	c <sub>2</sub>	0.29210
$c_{3}$	0.89274	$c_{3}$	0.75015	$c_{3}$	0.75015
$C_4$	0.90952	c <sub>4</sub>	0.26440	$C_4$	0.26440
$c_{5}$	0.96515	$c_{5}$	0.96002	$c_{5}$	0.96002
$c_{\kappa}$	0.31483	$c_{\kappa}$	0.93945	$c_{\kappa}$	0.93945



Figure 3. Optimal control  $u_1$  of scenario 1



Figure 4. The dynamics of (a)  $S$ , (b)  $E$ , (c)  $I$ , and (d)  $R$  for scenario 1

#### **3.4.2. Scenario 2 (control**  $u_2$  **only)**

The simulation was carried out by applying only treatment controls, namely  $u_2 \neq 0$  and  $u_1 = 0$ . The value of the control design parameter estimation results for scenario 2 is shown in Table 2. The graph of the optimal control  $u_2$  for implementing scenario 2 is given in Figure 5. The dynamics of each population based on the application of control  $u_2$  is given in Figure 6. Based on Figure 5, the amount of control effort is given 5126

with a high portion at the beginning of the observation period, and then it decreases slowly until it reaches zero on the 65<sup>th</sup> day and ends. Figure 6 shows that administration of control treatment succeeded in significantly reducing the number of exposed and infected individual populations. While Figure 6(a) shows that the susceptible population experienced an increase, Figure 6(b) shows a significant decrease in the exposed individual. Figure 6(c) shows that the curve of infected individuals is able to follow the reference curve quite well. In addition, in Figure 6(d), the population of immune individuals decreased. This happens because of the assumption that immunity is temporary so that immune individuals return to being susceptible individuals.



Figure 5. Optimal control value  $u_2$  of scenario 2



Figure 6. The dynamics of (a)  $S$ , (b)  $E$ , (c)  $I$ , and (d)  $R$  for scenario 2

## **3.4.3. Scenario 3 (control**  $u_1$  **and**  $u_2$  **simultaneously)**

Simulations were carried out by applying only treatment controls, namely  $u_2 \neq 0$  and  $u_1 \neq 0$ . The estimated control design parameter values for scenario 3 are shown in Table 2. The graphs of the control effort  $u_1$  and  $u_2$  for the implementation of scenario 3 are given in Figure 7. The dynamics of each population are given in Figure 8. Based on Figure 7, the amount of control effort  $u_1$  is given is relatively low during the observation time. The amount of control effort  $u_1$  is given is quite high at the beginning of the observation period and then decreases slowly until the end of the observation period. While the amount of control effort  $u_2$  is given with a high portion at the beginning of the observation period. Then it decreased slowly until it reached zero on the 65<sup>th</sup> day until the end of the observation time.

Figure 8 shows the dynamics of each population based on the application of control scenario 3. The administration of control of vaccination and treatment simultaneously succeeded in reducing the number of exposed and infected individual populations significantly. In Figure 8(a) the population of susceptible individuals has significantly decreased. In Figure 8(b), the population of exposed individuals decreases significantly following the reference model. In addition, Figure 8(c) shows that the curve of infected individuals is able to follow the reference curve quite well, while in Figure 8(d) the immune population has increased. This happened because of the implementation of vaccination control in susceptible individuals.



Figure 7. Optimal control value of  $u_1$  and  $u_2$  for scenario 3

Table 3 compares the number of individuals exposed and infected at the end of the observation period for each scenario. Table 3 shows that implementing the three scenarios may decrease the exposed and infected populations by the end of the observation period (day 100). The application of scenario 1 (vaccination) was able to lower the number of people exposed to the disease by 72.21% and the number of people who were infected by 70.53% over the observation period. By implementing scenario 2 (vaccination), it was possible to lower the number of people exposed to human disease by 93.80% and the number of people infected by 93.81%. The most significant reduction was achieved by implementing scenario 3 (vaccination and concurrent treatment), which led to a 98.29% decrease in the population of exposed humans and a 98.18% decrease in infected humans.





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Figure 8. The dynamics of (a)  $S$ , (b)  $E$ , (c)  $I$ , and (d)  $R$  for scenario 3

## **4. CONCLUSION**

A mathematical model of the spread of COVID-19 with control variables of vaccination and treatment has been studied. Parameter values in the model have been obtained using parameter estimation with genetic algorithms. An analysis of the stability of the equilibrium points and the basic reproduction number of the COVID-19 model has been carried out. Then, a control design based on the Lyapunov function was developed to stabilize the system and reduce the population of exposed and infected individuals. Furthermore, numerical simulations were carried out with three control scenarios, namely control vaccination only, control treatment only, and both controls simultaneously. The controller parameter values have been estimated using a genetic algorithm. Based on the results of numerical simulations, scenario 3 (vaccination and concurrent treatment) gave the most significant decrease, namely the average decrease in the exposed human population by 98.29% and the infected human population by 98.18%.

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