Community Enforcement beyond the Prisoner's Dilemma*

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Abstract

We study two-player games played by two communities in an infinitely repeated anonymous random matching setting. It is well-known that despite the informational restrictions of this setting, for the prisoner's dilemma, cooperation can be sustained in equilibrium through grim trigger strategies also called "contagion" or "community enforcement" in this context. But, little is known beyond the prisoner's dilemma when information transmission is minimal. In this paper we show that the ideas of community enforcement can indeed be applied far more generally.

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1 Introduction

We study infinitely repeated matching games where, in every period, players from two communities are randomly and anonymously matched to each other to play a two-player game. A common interpretation of such a setting is a large market where people are matched with strangers to engage in bilateral trades in which they may act in good faith or cheat. An interesting question is whether players can achieve cooperative outcomes in anonymous transactions. What payoffs of the stage-game can be achieved in equilibrium in the repeated random matching game?

The seminal papers by Kandori (1992) and Ellison (1994) showed that in this setting, for the Prisoner's Dilemma (PD), cooperation can be sustained by grim trigger strategies, also known as "community enforcement" or "contagion". In the PD, if a player ever faces a defection, she punishes all future rivals by switching to defection forever. By starting to defect, she spreads the information that someone has defected. The defection action spreads throughout the population, and cooperation eventually breaks down completely. The credible threat of such a breakdown of cooperation can deter players from defecting in the first place. However, these arguments rely critically on properties of the PD, in particular on the existence of a Nash equilibrium in strictly dominant strategies. The argument does not work in general. In an arbitrary game, on facing a deviation for the first time, players may not have the incentive to punish, because punishing can both lower future continuation payoffs and entail a short-term loss in that period. In the PD, the punishment action is dominant and so gives a current gain even if it lowers continuation payoffs.

A natural question is whether cooperation can be sustained in this setting for games other than the PD, with minimal transmission of information. This is the central question of this paper. In particular, we investigate whether the idea of community enforcement can still be used. As trigger strategies are simple, we think that community enforcement is a plausible description of behavior in large communities. We show that it is indeed possible to sustain cooperation in the random matching setting in a wide range of games beyond the PD using the idea of community enforcement, provided the communities are large enough and all players are sufficiently patient.

To the best of our knowledge, this is the first paper to sustain cooperation in a non-PD random matching game, without adding any extra information. Some papers that go beyond the PD introduce verifiable information about past play to sustain cooperation. For instance, Kandori (1992) assumes the existence of a mechanism that assigns labels to players based on their history of play. Players who have deviated or have seen a deviation can be distinguished from those who have not, by their labels. This naturally enables transmission of information and cooperation can be sustained in a specific class of games.¹ More recently, Deb (2008) obtains a general folk theorem for any game by just adding unverifiable information (cheap talk).

For ease of exposition, for most of the paper, we restrict attention to a particular stagegame, called the product-choice game. This game has a unique pure strategy Nash equilibrium that is inefficient. Unlike in the PD, the Nash equilibrium is not in dominant strategies. We show that the efficient outcome can still be approximated in equilibrium, using community enforcement. More generally, we provide sufficient conditions to describe the class of games and the set of achievable payoffs that our construction applies to.

An important feature of our construction is that our strategies are quite simple. Unlike the recent literature in repeated games with imperfect private monitoring (Ely and Välimäki, 2002; Piccione, 2002; Ely et al., 2005; Hörner and Olszewski, 2006) and, more specifically, in repeated random matching games (Takahashi, 2007; Deb, 2008), our equilibrium does not rely on belief-free ideas. In particular, players have strict incentives on and off the equilibrium path. It is also important to note that, unlike most of the existing literature, our strategies are robust to changes in the discount factor.

Further, our methodological contribution lies in that we work explicitly with players' beliefs. We hope that the methods we use to study the evolution of beliefs will be of independent interest, and can be applied elsewhere.

The rest of the paper is organized as follows. In the next section, we describe the model. In Section 3, we present the main result, and the intuition behind the proof. Section 4 contains the formal equilibrium construction and proof. In section 5, we discuss the generality of the result, limitations and potential extensions.

2 Model

We have 2M players, divided in two communities, each with M players. We use $J^S := \{1, \ldots, M\}$ and $J^B := \{1, \ldots, M\}$ to denote the communities of (male) sellers and (female) buyers respectively. In each period $t \in \{1, 2, \ldots\}$, the players are randomly matched into pairs with each seller facing a buyer. The matching is independent and uniform over

¹For related approaches see Okuno-Fujiwara and Postlewaite (1995), Takahashi (2007), Dal Bó (2007), and Hasker (2007).

time.² After being matched, each pair of players plays the product-choice game below (see Figure 1), where g > 0, c > 0, and l > 0.³

		Buyer	
		B_H	B_L
Seller	Q_H	1, 1	-l, 1-c
	Q_L	1 + g, -l	0, 0

Figure 1: The product-choice game.

The seller can exert either high effort (Q_H) or low effort (Q_L) in the production of his output. The buyer, without observing the choice of the seller, can either buy a high-priced product (B_H) or a low-price product (B_L) . The buyer prefers the high-priced product if the seller has exerted high effort and prefers the low-priced product if the seller has not. For the seller, exerting low effort is a dominant action. The efficient outcome of this game is the seller exerting high effort and the buyer buying the high-priced product, while the Nash equilibrium is (Q_L, B_L) . We denote a product-choice game by $\Gamma(g, l, c)$. We choose this as the benchmark game as it represents a minimal departure from the PD. Indeed, if we replace the payoff 1 - c with 1 + g we get the standard PD. For most of the paper we restrict attention to this game. Section 5 discusses how our results generalize to other two-player games.

Players can observe only the transactions they are personally engaged in, *i.e.*, each player knows the history of action profiles played in each of her/his past stage-games. A player gets no information about how other players have been matched or about the actions chosen by any other pair of players. All players have discount factor $\delta \in (0, 1)$ and their payoffs are the normalized sum of the discounted payoffs from the stage-games. The infinitely repeated random matching game associated with the product-choice game $\Gamma(g, l, c)$, with discount parameter δ and communities of size M is denoted by $\Gamma_{\delta}^{M}(g, l, c)$. No public randomization device is assumed (refer to Section 5 for a discussion of what can be gained if such a device is available).

We ask whether some degree of cooperation can be sustained in equilibrium.

²Although the assumption of uniform matching greatly simplifies the calculations, we expect our results to hold for all other matching technologies sufficiently close to the uniform one.

³A more detailed discussion of this game within the context of repeated games can be found in Mailath and Samuelson (2006).

2.1 A negative result

The main difficulty in sustaining cooperation in the product-choice game through standard community enforcement is that it is hard to provide buyers with the incentives to punish deviations. Indeed, the next result shows that a straightforward adaptation of the strategies used in Ellison (1994) to support cooperation in the PD does not work in our setting.

Proposition 1. Let $\Gamma(g, l, c)$ be a product-choice game with $c \leq 1$. Then, there is $M \in \mathbb{N}$ such that, for each $M \geq M$, regardless of the discount factor δ , the repeated random matching game $\Gamma^M_{\delta}(g, l, c)$ has no sequential equilibrium in which (Q_H, B_H) is played in every period on the equilibrium path, and in which players play the Nash action off the equilibrium path.

Proof. Suppose a seller decides to deviate in period 1. We argue below that for a buyer who observes this deviation, it will not be optimal to switch to the Nash action permanently from period 2. In particular, we show that playing B_H in period 2 followed by switching to B_L from period 3 onwards gives the buyer a higher payoff. The buyer who observes the deviation knows that, in period 2, with probability $\frac{M-1}{M}$ she will face a different seller who will play Q_H . Consider the short-run and long-run incentives of this buyer:

- **Short-run:** The buyer's payoff in period 2 from playing B_H is $\frac{1}{M}(-l) + \frac{M-1}{M}$. Her payoff if she switches to B_L is $\frac{M-1}{M}(1-c)$. Hence, if M is large enough, she has no short-run incentive to switch to the Nash action.
- **Long-run:** With probability $\frac{1}{M}$, the buyer will meet the deviant seller (who is already playing Q_L) in period 2. In this case, her action will not affect this seller's future behavior, and therefore her continuation payoff will be the same regardless of her action.

With probability $\frac{M-1}{M}$, the buyer will meet a different seller. Note that, since $1 - c \ge 0$, a buyer always prefers to face a seller playing Q_H . So, regardless of the buyer's strategy, the larger is the number of sellers who have already switched to Q_L , the lower is her continuation payoff. Hence, playing B_L in period 2 will give her a lower continuation payoff than playing B_H , because action B_L will make a new seller switch permanently to Q_L .

3 The Main Result

The main result of this paper says that in a product-choice game, it is indeed possible for players to achieve payoffs arbitrarily close to the efficient payoff, if the communities are large enough and players are sufficiently patient.

Theorem 1. Let $\Gamma(g, l, c)$ be a product-choice game. Then, there is $M \in \mathbb{N}$ such that, given $\varepsilon > 0$, there is $\underline{\delta} \in (0, 1)$ such that, for each $M \ge \underline{M}$, there exists a strategy profile in the repeated random matching game $\Gamma_{\delta}^{M}(g, l, c)$ that, for each $\delta \in [\underline{\delta}, 1)$, constitutes a sequential equilibrium with payoff within ε of (1, 1).

A noteworthy feature of our strategies is that they are robust to changes in the discount factor. In other words, if our strategies constitute an equilibrium for a given discount factor, they do so for any higher discount factor as well. This is in contrast with existing literature. In games with private monitoring, strategies have to be fine-tuned based on the discount factor. In Ellison (1994), the severity of punishments depends on the discount factor. Moreover, unlike Ellison (1994), we do not need a common discount factor. We just need all players to be sufficiently patient.

Another feature of our equilibrium strategies is that the continuation payoff is within ε of (1, 1) not just in the initial period, but throughout the game on the equilibrium path; in this sense, we sustain cooperation as a durable phenomenon, which constrasts with the results for reputation models where, for every δ , there exists a time after which cooperation collapses (see Cripps et al. (2004)).

It is worthwhile to explain the role of the community sizes in Theorem 1. Contrary to the existing literature, having a large population is helpful in our construction. However, the result should not be viewed as a limiting result in M; it turns out that in most games, fairly small community sizes suffice to sustain cooperation.

We present now the strategies that enable cooperation in equilibrium. We divide the game into three phases (see Figure 2). Phases I and II are *trust-building* phases and phase III is the *target payoff* phase.

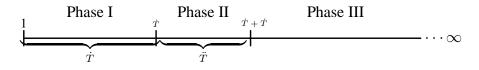


Figure 2: Different phases of the strategy profiles.

- Equilibrium play: Phase I: During the first \dot{T} periods, the players play (Q_H, B_H) . In every period in this phase, sellers have a short-run incentive to deviate, but buyers do not. Phase II: During the next \ddot{T} periods, the players play (Q_L, B_H) . In every period in this phase, buyers have a short-run incentive to deviate while sellers do not. Phase III: For the rest of the game, the players play the efficient action profile (Q_H, B_H) .
- **Off Equilibrium play:** A player can be in one of two moods: *uninfected* and *infected*, with the latter mood being irreversible. At the beginning of the game all players are uninfected. We classify off equilibrium play into two types of actions. Action B_L in Phase I and action Q_H in Phase II are *non-triggering* actions. Any other action that is off equilibrium is a *triggering* action. A player who has observed a triggering action is in the infected mood. Now, we specify off-path behavior. An uninfected player continues to play as if on-path. An infected player acts as follows.
 - A player who gets infected after facing a triggering action switches to his Nash action forever either from the end of Phase I or immediately from the next period, whichever is later. In other words, a buyer who faces a triggering action in Phase I switches to her Nash action forever at the end of Phase I, playing as if on-path in the meantime. A player facing a triggering action at any other stage of the game will immediately switch to the Nash action forever.
 - A player who gets infected by playing a triggering action himself henceforth best responds to the strategies of the other players (this will imply that, for large enough \dot{T} , a seller who deviates in the first period by playing Q_L will continue to play Q_L forever).

Note that a profitable deviation by a player is punished (ultimately) by the whole community of players, with the punishment action spreading like an epidemic. We refer to the spread of punishments as contagion.

The difference between the our strategies and standard contagion (*e.g.*, Ellison (1994) and Kandori (1992)) is that here, the game starts with two trust-building phases. In Phase I, sellers build credibility by not deviating even though they have a short-run incentive to do so. The situation is reversed in Phase II, where buyers build credibility (and reward sellers for not deviating in Phase I), by not playing B_L even though they have a short-run

incentive to do so. A deviation by a seller in Phase I is not punished in the seller's trustbuilding phase, but is punished as soon as the phase is over. Similarly, if a buyer deviates in her trust-building phase, she effectively faces punishment once the trust-building phase is over. Unlike the results for the PD, where the equilibria are based on trigger strategies, here we have delayed trigger strategies. In Phase III, deviations immediately trigger Nash reversion.

Clearly, the payoff from the strategy profile described above will be arbitrarily close to the efficient payoff (1, 1) for δ large enough. We now need to establish that the strategy profile constitutes a sequential equilibrium of the repeated random matching game $\Gamma_{\delta}^{M}(g, l, c)$ when M is large enough, \dot{T} and \ddot{T} are appropriately chosen, and δ is close enough to 1. Below, we provide some intuition for the result by examining the incentives of players after key histories. We present the formal proof in Section 4.

3.1 Intuition for the Main Result

The incentives on-path are quite straightforward. Any short-run profitable deviation will eventually trigger Nash reversion that will spread and reduce continuation payoffs. Hence, given M, \dot{T} , and \ddot{T} , for sufficiently patient players, the future loss in continuation payoff will outweigh any current gain from deviation.

Establishing sequential rationality of the strategies off-path is the main challenge. Below, we consider some histories that may arise and argue why the strategies are optimal after these histories. We start with two observations.

First, a seller who deviates to make a short-term gain at the beginning of the game will find it optimal to revert to the Nash action immediately. A seller who deviates in period 1, knows that, regardless of his choice of actions, from period \dot{T} on, at least one buyer will start playing Nash and then, from period $\dot{T} + \ddot{T}$ on, contagion will spread exponentially fast. Thus, his continuation payoff after $\dot{T} + \ddot{T}$ will be quite low regardless of what he does in the remainder of Phase I. Therefore, if \dot{T} is large enough, no matter how patient this seller is, the best thing he can do after deviating in period 1 is to play the Nash action forever.⁴

Second, the optimal action of a player after he observes a triggering action depends on the beliefs that he has about how the contagion has spread already. To see why, think of a buyer who observes a triggering action during, say, Phase III. Is Nash reversion optimal for

⁴Clearly, the best thing he can do in Phase II is to play the Nash action, as he was supposed to do on-path.

her? If she believes that there are few people infected, then playing the Nash action may not be optimal. With high probability she will face a seller playing Q_H and playing the Nash action will entail a loss in that period. Moreover, she is likely to infect her opponent, hastening the contagion and lowering her own continuation payoff. The situation is different if she believes that almost everybody is infected (so, already playing Nash). Then, there is a short-run gain by playing the Nash action in this period. Moreover, the effect on the contagion process and the continuation payoff will be negligible. Since the optimal action for a player after observing a triggering action depends on the beliefs he has about "how spread the contagion is", we need to define a system of beliefs and check if Nash reversion is optimal after getting infected, given these beliefs.

We define beliefs as follows. If a player observes a triggering action, he thinks that some seller deviated in period 1 and contagion has been spreading since then (if an uninfected player observes a non-triggering action, then he just thinks that the opponent made a mistake and that no one is infected).

These beliefs, along with the fact that a deviant seller will play the Nash action forever, imply that any player who observes a triggering action thinks that, since contagion has been spreading from the start of the game, almost everybody must have got infected by the end of Phase I. This makes Nash reversion optimal for him after the end of Phase I. To gain some insight, consider the following histories.

• Suppose I am a buyer who gets infected in Phase I. I think that a seller deviated in the first period and that he will continue infecting buyers throughout Phase I. If Mis large, in each of the remaining periods of Phase I, the probability of meeting the same seller again is low; so I prefer to play Q_H during Phase I (since other sellers are playing Q_H). Yet, if \dot{T} is large enough, once Phase I is over I will think that, with high probability, every buyer is already infected. Nash reversion thereafter is optimal.

It may be the case that after I get infected, I observe Q_L in most (possibly all) periods of Phase I. Then, I will think that I met the deviant seller repeatedly, and so not all buyers are infected. However, it turns out that if \ddot{T} is large enough I will still revert to Nash play. Since I expect my continuation payoff to drop after $\dot{T} + \ddot{T}$ anyway, for \ddot{T} large enough I prefer to play the myopic best response during Phase II, to make some short-term gains (similar to the argument made for the best reply of a seller who deviates in period 1).

- Suppose I am a buyer who faces Q_H in Phase II or a seller who faces B_L in Phase I. (Non-triggering actions) Since such actions are never profitable (on-path or off-path), after observing such an action I will think it was a mistake and that no one is infected. Then, it is optimal to ignore it. The deviating player knows this, and so it is also optimal for him to ignore it.
- Suppose I am a player who gets infected shortly after period *T* + *T* or a seller who gets infected in Phase II. I know that contagion has been spreading since the first period. However, the fact that I was uninfected so far indicates that possibly not so many people were infected. We show that if *T* is large enough and *T* ≫ *T*, I will still think that, with very high probability, I was just lucky not to have been infected so far, but that everybody is infected now. This makes Nash reversion optimal.
- Suppose I get infected late in the game, at period t
 → T
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 , we can not rely any more on how large T
 is to characterize my beliefs. I can no longer assign high probability to the event that everybody is infected now, and yet I was uninfected so far. However, for this and other related histories late in the game, it turns out that I still believe that "enough" people are infected and already playing the Nash action, so that playing the Nash action is also optimal for me.

3.2 Choosing M, \ddot{T}, \dot{T} , and $\underline{\delta}$

It is useful to clarify how the different parameters are chosen to construct the equilibrium. First, given a game, we find \underline{M} so that i) a buyer who is infected in Phase I does not revert to the Nash action before Phase II and ii) players who are infected very late in the game believe that almost everybody is infected. Then, we choose \ddot{T} so that, in Phase II, any infected buyer will find it optimal to revert the Nash action (even if she observed Q_L in all periods of Phase I). Then, we pick \dot{T} , with $\dot{T} \gg \ddot{T}$, so that the players infected in Phase II or early in Phase III believe that almost everybody is infected. Further \dot{T} must be large enough so that a seller who deviates in period 1 plays the Nash action ever after. Finally, we pick $\underline{\delta}$ large enough so that players do not deviate on the equilibrium path⁵.

The role of the discount factor δ requires further explanation. Clearly, a high δ deters players from deviating from cooperation. However, a high δ also makes players want to slow down the contagion. Then why is it that even extremely patient players are willing to

⁵Note that $\underline{\delta}$ must also be large enough so that the payoff achieved in equilibrium is close enough to (1, 1).

spread the contagion after getting infected? A key observation is the following. Suppose M is fixed and consider a perfectly patient player ($\delta = 1$). Once this player gets infected he knows that, at some point, the contagion will start spreading exponentially and the expected payoffs in future stages will converge to 0 exponentially fast; *i.e.*, because of the contagion process this player acts as if he were indeed impatient. Put differently, the undiscounted sum of future payoffs is bounded and so is the gain any player can make by slowing down the contagion once it has started. Think of an infected player who is thinking whether to revert to the Nash action or not when the strategy asks to do so. In our construction, two things can happen. First, this player believes that so many people are already infected that, regardless of his action, his continuation payoff is already guaranteed to be very low. In this case, he is willing to play the Nash action and at least avoid a short-run loss. Second, if this player does not believe that many people are infected, then he still knows that in Phase III his continuation payoff will drop exponentially fast and, in our construction, there will be enough periods in the immediate future when playing the Nash action will give him a short-run gain. In this case, he is willing to play the Nash, as the immediate short-run gain outweighs the future loss in continuation payoff.

In the next section, we formalize the intuition just presented. Some readers may prefer to skip the formal proof and go to Section 5, where we discuss the generality and robustness of our main result.

4 Optimality of the Equilibrium Strategies

4.1 Incentives on-path

The incentives on-path are relatively straightforward, and so we omit the formal proof. The main idea is that if players are sufficiently patient, on-path deviations can be deterred by the threat of eventual Nash reversion. It is easy to see that, if \dot{T} is large enough, the most "profitable" on-path deviation is that of a seller in period 1. Given M, \dot{T} and \ddot{T} , the discount factor δ can be chosen close enough to 1 to deter sellers from such deviations.

4.2 System of beliefs

We make the following assumptions on the system of beliefs of players. Beliefs are updated as usual using Bayes rule.

i) **Assumption 1:** If a player observes a triggering action, then this player believes that some seller deviated in the first period of the game, and after that, play has proceeded as prescribed by the strategies.

This requirement on beliefs may seem too extreme. However, the essential assumption is that players regard earlier deviations as more likely. Please refer to Section 5.4 for a detailed discussion on this point.

- ii) **Assumption 2:** If a player observes a history that is not consistent with the above beliefs (*erroneous history*), he will think that some player in the other community has made a mistake in a match where they faced each other; indeed, this player will think that there have been as many mistakes by the players in the other community as needed to explain the history at hand.⁶ Erroneous histories include the following:
 - A player (infected or not) who observes a non-triggering action.
 - A player who, after being certain that all the players in the other community are infected, faces an opponent who does not play the Nash action (this can only happen in Phase III).

We refer the reader to the Appendix for the proof of the consistency of these beliefs.

4.2.1 Modeling Beliefs with Contagion Matrices

So far, we have not formally described the structure of a player's beliefs. The payoff relevant feature of a player's beliefs is the number of people he believes is currently infected. Accordingly, we let a vector $x^t \in \mathbb{R}^M$ denote the beliefs of player *i* about the number of infected people in the other community at the end of period *t*, where x_k^t denotes the probability he assigns to exactly *k* people being infected in the other community. To illustrate, when player *i* observes the first triggering action, Assumption 1 implies $x^1 = (1, 0, \ldots, 0)$. In some abuse of notation, when it is known that a player assigns 0 probability to more than *k* opponents being infected, we work with $x^t \in \mathbb{R}^k$. We say a belief $x^t \in \mathbb{R}^k$ first-order stochastically dominates a belief y^t if x^t assigns higher probability to more people being infected; *i.e.*, for each $l \in \{1, \ldots, k\}, \sum_{i=l}^k x_i^t \ge \sum_{i=l}^k y_i^t$. Let \mathcal{I}^t denote the random

⁶For the formation of a player's beliefs after erroneous histories, we assume that mistakes are infinitely less likely than and independent from the event that a seller deviated in period 1. Hence, if a player observes an erroneous history, he will still think that a seller deviated in period 1 and moreover other players have made mistakes.

variable representing the number of infected people in the other community at the end of period t. Let k^t denote the event "k people in the other community are infected by the end of period t", *i.e.*, k^t and $\mathcal{I}^t = k$ denote the same event.

As we will see below, the beliefs of players after different histories evolve according to simple Markov processes, and so can be studied using an appropriate transition matrix and an initial belief. We define below a useful class of matrices: *contagion matrices*. Given a population size M, a contagion matrix C is an $M \times M$ matrix that represents the transitions between beliefs after a given history. The element c_{ij} of a contagion matrix C denotes the probability that the state "*i* rivals infected" transitions to the state "*j* rivals infected". Formally, if we let \mathcal{M}_k denote the set of $k \times k$ matrices with real entries, we say that a matrix $C \in \mathcal{M}_k$ is a contagion matrix if it has the following properties:

- i) All the entries of C belong to [0, 1] (represent probabilities).
- ii) C is upper triangular (being infected is irreversible).
- iii) All diagonal entries are strictly positive (with some probability, infected people meet other infected people and contagion does not spread in the current period).
- iv) For each i > 1, $c_{i-1,i}$ is strictly positive (unless everybody is already infected, with some probability, exactly one person gets infected in the given community in the current period).

A useful technical property is that, since contagion matrices are upper triangular, their eigenvalues correspond to the diagonal entries. Given $x \in \mathbb{R}^k$, let $||x|| := \sum_{i \in \{1,...,k\}} x_i$. We will often be interested in the limit behavior of $\frac{xC^t}{||xC^t||}$, where C is a contagion matrix and x is a probability vector. Given a matrix C, let C_{l} denote the matrix derived by removing the last l rows and columns from C. Similarly, C_{lk} is the matrix derived by removing the first k rows and columns and $C_{[k,l]}$ by doing both operations simultaneously.

4.3 Incentives off-path

In order to prove sequential rationality we need to examine incentives of players after all possible off-path histories, given the beliefs. This is the heart of the proof and the exposition proceeds as follows. We classify all possible off-path histories of a player i based on when player i observed off-path behavior for the first time.

- Given the beliefs described above, it will be important to first characterize the best response of a seller who deviates in the first period of the game.
- Next, we consider histories where player *i* observes a triggering action (gets infected) for the first time in the Target Play Phase (Phase III).
- We then consider histories where player *i* observes a triggering action for the first time during one of the two Trust-Building Phases.
- Finally, we discuss non-triggering actions.

We need some extra notation. Denote a *t*-period private history for a player *i* by h^t . At any time period, we denote by *g* (good) the action an uninfected player would choose and by *b* (bad) the action an infected player would choose. For example, if player *i* observes a *t*-period history h^t followed by three periods of good behavior and then one period of bad behavior, we represent this by $h^t gggb$. In an abuse of notation, the history of a player is written omitting his own actions. In most of the paper, we discuss beliefs from the point of view of a fixed player *i*, and so often refer to player *i* in the first person. For example, from *i*'s point of view, g_t denotes the event "I observed *g* in period *t*". Similarly, for player *i*, *U*^t denotes the event "I am uninfected at the end of period *t*".

4.3.1 Computing off-path beliefs

Since we work with off-path beliefs of players, it is useful to clarify at the outset, our approach to computing beliefs. As an example, consider the following history. I am onpath until period $\bar{t} \gg \dot{T} + \ddot{T}$, when I observe a triggering action followed by on-path behavior at period $\bar{t} + 1$, *i.e.*, $h^{\bar{t}} = gg \dots gbg$. It is easy to see that, after period $\dot{T} + \ddot{T} + 2$, the number of infected people will be the same in both communities. So it suffices to compute beliefs about the number of people infected in the rival community. These beliefs are represented by $x^{\bar{t}+1} \in \mathbb{R}^M$, where $x_k^{\bar{t}+1}$ is the probability of exactly k people being infected after period $\bar{t} + 1$, and must be computed using Baye's rule and conditioning on my private history. What is the information I have after history $h^{\bar{t}}$? I know a seller deviated at period 1, so $x^1 = (1, 0, \dots, 0)$. I also know that, after any period $t < \bar{t}$, I was not infected (U^t) . Moreover, since I got infected at period \bar{t} , at least one player in the rival community got infected in the same period. Finally, since I faced an uninfected player at $\bar{t} + 1$, at most M - 2 people were infected after any period $t < \bar{t} (\mathcal{I}^t \leq M - 2)$.

To compute $x^{\bar{t}+1}$ we compute a series of intermediate beliefs x^t , for $t < \bar{t} + 1$. We compute x^2 from x^1 by conditioning on U^2 and $\mathcal{I}^2 \leq M - 2$, then we compute x^3 from x^2 and so on. Note that, to compute x^2 , we do not use the information that "I did not get infected at any period $2 < t < \bar{t}$ ". So, at each $t < \bar{t}$, x^t represents my beliefs when I condition on the fact that the contagion started at period 1 and that no matching that leads to more than M - 2 people being infected could have been realized.⁷ Put differently, at each period, I compute my beliefs by eliminating (assigning zero probability to) the matchings I know could not have taken place. As we said above, at a given period $\tau < \bar{t}$, the information is added period by period, *i.e.*, only at period t we add the information coming from the fact that "I was not infected at period t". In Section A.2 in the Appendix we show that this method of computing $x^{\bar{t}+1}$ generates the required beliefs *i.e.*, my beliefs at period $\bar{t} + 1$ conditioning on the entire history I have observed. Now we are equipped to check the optimality of the equilibrium strategies.

4.3.2 A seller deviates at beginning of the game

The strategies specify that a player who gets infected by deviating to a triggering action himself will henceforth play his best response to the strategies of the other players. As we argued in Section 3.1, it is easy to show that for a given M, if \dot{T} is large enough, a seller who deviates in period 1 will find it optimal to play the Nash action (dominant action) for the rest of the game. In particular, a seller who deviates at t = 1 will play Q_L forever.

4.3.3 A player gets infected in Phase III

Case 1: Infection at the start of Phase III. Let $h^{\dot{T}+\ddot{T}+1}$ denote a history in which I am a player who gets infected in period $\dot{T} + \ddot{T} + 1$. The equilibrium strategies prescribe that I switch to the Nash action forever. For this to be optimal, I must believe that enough players in the other community are already infected.

In order to compute my beliefs, I need to know how the contagion spreads during Phase I after a seller deviates in period 1. In Phase I, only one deviant seller is infecting buyers. The contagion in this phase is a simple Markov process with state space $\{1, \ldots, M\}$, where a state represents the number of infected buyers. The corresponding transition ma-

⁷The updating after period \bar{t} is different, since I know that I was infected at \bar{t} and that no more than M-1 people could possibly be infected in the other community at the end of period \bar{t} .

trix is $S_M \in \mathcal{M}_M$, where a state k transits to k+1 if the deviant seller meets an uninfected buyer, which has probability $\frac{M-k}{M}$. With the remaining probability, *i.e.*, $\frac{k}{M}$, state k remains at state k. To save notation, we may omit the subscript M in matrix S_M when no confusion arises. Let s_{kl} denote the probability that state i transitions to state j. We present matrix S_M below.

$$S_M = \begin{pmatrix} \frac{1}{M} & \frac{M-1}{M} & 0 & 0 & \dots & 0\\ 0 & \frac{2}{M} & \frac{M-2}{M} & 0 & \dots & 0\\ \vdots & \vdots & \ddots & \ddots & & \vdots\\ 0 & 0 & 0 & \frac{M-2}{M} & \frac{2}{M} & 0\\ 0 & 0 & 0 & 0 & \frac{M-1}{M} & \frac{1}{M}\\ 0 & 0 & 0 & 0 & 0 & 1 \end{pmatrix}$$

The above transitions represent how the contagion was originally expected to spread. To compute my current beliefs, I must also condition on the information I have about how it has really spread. Consider any period $t < \dot{T}$. After observing history $h^{\dot{T}+\ddot{T}+1} = g \dots gb$, I know that at the end of period t + 1 at most M - 1 buyers were infected and I was not infected. Therefore, to compute x^{t+1} , my intermediate beliefs about the number of buyers infected at the end of period t + 1 (*i.e.*, about \mathcal{I}^{t+1}), I need to condition on the following:

- i) My beliefs about \mathcal{I}^t : x^t .
- ii) I was uninfected at the end of t + 1: the event U^{t+1} (this is irrelevant if I am a seller, since no seller can get infected in Phase I).
- iii) At most M 1 buyers were infected by the end of period t + 1: $\mathcal{I}^{t+1} \leq M 1$ (otherwise I could not have been uninfected at the start of Phase III).

Therefore, given l < M, if I am a buyer, the probability that exactly l buyers are infected after period t + 1, conditional on the above information, is given by:

$$P(l^{t+1} | x^t \cap U^{t+1} \cap \mathcal{I}^{t+1} \le M - 1) = \frac{P(l^{t+1} \cap U^{t+1} \cap \mathcal{I}^{t+1} \le M - 1 | x^t)}{P(U^{t+1} \cap \mathcal{I}^{t+1} \le M - 1 | x^t)} = \frac{x_{l-1}^t s_{l-1,l} \frac{M-l}{M-l+1} + x_l^t s_{l,l}}{\sum_{l=1}^{M-1} \left(x_{l-1}^t s_{l-1,l} \frac{M-l}{M-l+1} + x_l^t s_{l,l} \right)}.$$

The expression for a seller would be analogous, but without the $\frac{M-l}{M-l+1}$ factors. Notice that we can express the transition from x^t to x^{t+1} using what we call the *conditional transition matrix*. Since we already know that $x_M^t = x_M^{t+1} = 0$, we can just work in \mathbb{R}^{M-1} .

Let $C \in \mathcal{M}_M$ be defined, for each pair $k, l \in \{1, \ldots, M-1\}$, by $c_{kl} := s_{kl} \frac{M-l}{M-k}$; with the remaining entries being 0.

Recall that C_{1j} and S_{1j} denote the matrices obtained from C and S by removing the last row and the last column of each. So, the truncated matrix of conditional transitional probabilities C_{1j} is as follows:

$$C_{1j} = \begin{pmatrix} \frac{1}{M} & \frac{M-1}{M} \frac{M-2}{M-1} & 0 & 0 & \dots & 0\\ 0 & \frac{2}{M} & \frac{M-2}{M} \frac{M-3}{M-2} & 0 & \dots & 0\\ \vdots & \vdots & \ddots & \ddots & & \vdots\\ 0 & 0 & 0 & 0 & \frac{M-2}{M} & \frac{2}{M} \frac{1}{2}\\ 0 & 0 & 0 & 0 & 0 & \frac{M-1}{M} \end{pmatrix}$$

Recall that my beliefs are such that $x^1 = (1, ..., 0)$, since the deviant seller infected one buyer at period 1. Then, if I am a buyer, x^{t+1} can be computed as

$$x^{t+1} = \frac{x^t C_{1j}}{\|x^t C_{1j}\|} = \frac{x^1 C_{1j}^t}{\|x^1 C_{1j}^t\|}$$

The expression for a seller would be analogous, with S_{1j} instead of C_{1j} . Hence, I can compute my beliefs about the situation at the end of Phase I by

$$x^{\dot{T}} = \begin{cases} \frac{x^{1}C_{1]}^{\dot{T}-1}}{\|x^{1}C_{1]}^{\dot{T}-1}\|} & \text{if I am a buyer,} \\ \\ \frac{x^{1}S_{1]}^{\dot{T}-1}}{\|x^{1}S_{1]}^{\dot{T}-1}\|} & \text{if I am a seller.} \end{cases}$$

Lemma 1. Fix *M*. Then, $\lim_{\dot{T}\to\infty} x^{\dot{T}} = (0, ..., 0, 1)$.

The intuition for the above lemma is as follows. Note that the largest diagonal entry in the matrix C_{1j} (or S_{1j}) is the last one. This means that the state M - 1 is more stable than any other state. Consequently, as more periods of contagion elapse in Phase I, state M - 1 becomes more and more likely. The formal proof is a straightforward consequence of some of the properties of contagion matrices (see Proposition A.1 in the Appendix).

Proposition 2. Fix \ddot{T} and M. If I observe history $h^{\dot{T}+\ddot{T}+1} = g \dots gb$ and \dot{T} is large enough, then it is sequentially rational for me to play the Nash action at period $\dot{T} + \ddot{T} + 2$.

Proof. Suppose I am a buyer. Since sellers always play the Nash action in Phase II, I cannot learn anything from play in Phase II. By Lemma 1, if \dot{T} is large enough, I assign very high probability to M - 1 buyers being infected at the end of Phase I. Then, at least as many sellers were infected during Phase II. If exactly M - 1 sellers were infected by the end of Phase II, then the only uninfected seller must have got infected in period $\dot{T} + \ddot{T} + 1$, since in this period I was the only uninfected buyer and I met an infected seller. So I assign arbitrarily high probability to all sellers being infected by the end of $\dot{T} + \ddot{T} + 1$, and hence it is optimal to play B_L .

Next, suppose I am a seller. In this case, the fact that no buyer infected me in Phase II will make me update my beliefs about how contagion has spread. However, if \dot{T} is large enough relative to \ddot{T} , even if I factor in the information that I was not infected in Phase II, the probability I assign to M - 1 buyers being infected by the end of Phase I is arbitrarily higher than the probability I assign to k buyers being infected for any k < M - 1. By the same argument as above, playing Nash is optimal.

Next, we consider those $(\dot{T} + \ddot{T} + 1 + \alpha)$ -period histories of the form $h^{\dot{T} + \ddot{T} + 1 + \alpha} = g \dots gbg$. α . g, with $1 \le \alpha \le M - 2$, *i.e.*, these are histories where I was infected at period $\dot{T} + \ddot{T} + 1$ and then I observed α periods of good behavior while I was playing the Nash action. For the sake of exposition, assume that I am a buyer (the arguments for a seller are analogous). Why are these histories significant? Notice that if I get infected in period $\dot{T} + \ddot{T} + 1$, I can believe that all other buyers are infected. However, if after that, I observe Q_H , I have to revise my beliefs, since it is not possible that all the buyers were infected after period $\dot{T} + \ddot{T} + 1$. Can this alter my incentives to play the Nash action?

Suppose $\alpha = 1$. After history $h^{\dot{T}+\dot{T}+2} = g \dots gbg$, I know that at most M-2 buyers were infected by the end of Phase I. Therefore, for each $t \leq \dot{T}$, $x_M^t = x_{M-1}^t = 0$. My beliefs are no longer computed using C_{1} , but rather with C_{2} . By a similar argument as Lemma 1, we can show that now $x^{\dot{T}} \in \mathbb{R}^{M-2}$ converges to $(0, 0, \dots, 1)$. In other words, the state M-2 is the most stable and, for \dot{T} large enough, I assign very high probability to M-2 buyers being infected at the end of Phase I. Consequently, at least as many sellers were infected during Phase II. This in turn implies (just as in Proposition 2) that I believe that, with high probability, all players are infected by now (at $t = \dot{T} + \ddot{T} + 2$). To see why, note that in the worst case, exactly M - 2 sellers were infected during Phase II. In that case, one of the uninfected sellers met an infected buyer at period $\dot{T} + \ddot{T} + 1$ and I infected the last one in the last period. Therefore, I assign very high probability to everyone being infected by now, and it is optimal for me to play the Nash action. An analogous argument holds for $(\dot{T} + \ddot{T} + 1 + \alpha)$ -period histories with $\alpha \in \{1, \ldots, M - 1\}$.

We need not check incentives for Nash reversion after histories where I observe more than M - 2 periods of g after being infected. These are erroneous histories and cannot be explained by a single deviation in period 1. Here, I will believe that there have been as many mistakes by players as needed to be consistent with the observed history.

Finally, consider histories such that, after getting infected, I observe a sequence of actions that includes both g and b, *i.e.*, histories starting with $h^{\dot{T}+\ddot{T}+1} = g \dots gb$ and in which I have observed b in one of more periods after getting infected. After such histories, I will assign higher probability to more people being infected compared to histories where I only observed g after getting infected. Intuitively speaking, observing b reconfirms my belief that the contagion is widely spread. It is again optimal for me to play the Nash action after any such history.

We have thus shown that a player who observes a triggering action for the first time at the start of Phase III will find it optimal to revert permanently to the Nash action.

Case 2: Infection late in Phase III. Next, suppose I get infected after observing history $h^{\bar{t}+1} = g \dots gb$, with $\bar{t} \gg \dot{T} + \ddot{T}$. Now we need to study how the contagion spreads during Phase III. As we noted earlier, from period $\dot{T} + \ddot{T} + 2$ on, the same number of people is infected in both communities. The contagion can again be studied as a Markov process with state space $\{1, \dots, M\}$. In contrast to Phase I, all infected players spread the contagion in Phase III. The new transition matrix is $\hat{S} \in \mathcal{M}_M$. For each pair $k, l \in \{1, \dots, M\}$, if k > l or l > 2k, $\hat{s}_{kl} = 0$; otherwise, *i.e.*, if $k \leq l \leq 2k$, (see Figure 3)

$$\hat{s}_{kl} = \frac{\left(\binom{k}{l-k}\binom{M-k}{l-k}(l-k)!\right)^2 (2k-l)!(M-l)!}{M!} = \frac{(k!)^2 ((M-k)!)^2}{((l-k)!)^2 (2k-l)!(M-l)!M!}.$$

Consider any t such that $\dot{T} + \ddot{T} < t < \bar{t}$. If I observe history $h^{\bar{t}+1} = g \dots gb$, I know that "at most M-1 people could have been infected in the rival community at the end of period t" ($\mathcal{I}^{t+1} \leq M-1$) and "I was not infected" (U^t). As before, let \hat{x}^t be my intermediate beliefs after period t. We are interested in the belief $\hat{x}^{\bar{t}+1}$, but first we study $\hat{x}^{\bar{t}}$ as $\bar{t} \to \infty$. Our limit results will not depend on the specific beliefs at the end of Phase II (as long as $\hat{x}_1^{\bar{T}+\bar{T}+1} > 0$, which is always true). Since, for each $t \leq \bar{t}$, $\hat{x}_M^t = 0$, we can just work with $\hat{x}^t \in \mathbb{R}^{M-1}$. As before, we want to compute $P(l^{t+1} | \hat{x}^t \cap U^{t+1} \cap \mathcal{I}^{t+1} \leq M-1)$ for

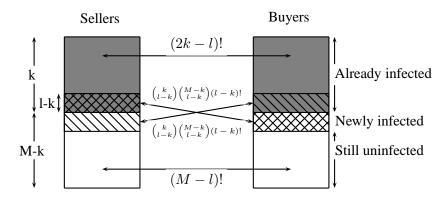


Figure 3: Spread of Contagion in Phase III. There are M! possible matchings. For state k to transit to state l, exactly (l-k) infected people from each community must meet (l-k) uninfected people from the other community. The number of ways of choosing exactly (l-k) buyers from k infected ones who will spread the contagion is $\binom{k}{l-k}$. The number of ways of choosing the corresponding (l-k) uninfected sellers who will get infected is $\binom{M-k}{l-k}$, and the number of ways in which these sets of (l-k) people can be matched is the total number of permutations of l-k people, *i.e.*, (l-k)!. Analogously, we choose the (l-k) infected sellers who will be matched to (l-k) uninfected buyers. The number of ways in which the remaining infected buyers and sellers get matched to each other is (2k-l)!, and the uninfected ones is is (M-l)!.

$$l \in \{1, \dots, M-1\}.$$

$$P(l^{t+1} | \hat{x}^t \cap U^{t+1} \cap \mathcal{I}^{t+1} \le M-1) = \frac{P(l^{t+1} \cap U^{t+1} \cap \mathcal{I}^{t+1} \le M-1) | \hat{x}^t)}{P(U^{t+1} \cap \mathcal{I}^{t+1} \le M-1) | \hat{x}^t)}$$

$$= \frac{\sum_{k \in \{1, \dots, M\}} x_k^t \hat{s}_{kl} \frac{M-l}{M-k}}{\sum_{l \in \{1, \dots, M-2\}} \left(\sum_{k \in \{1, \dots, M\}} x_k^t \hat{s}_{kl} \frac{M-l}{M-k}\right)}.$$

These conditional transition probabilities can be expressed in matrix form. Let $\hat{C} \in \mathcal{M}_M$ be defined, for each pair $k, l \in \{1, \ldots, M-1\}$, by $\hat{c}_{kl} := \hat{s}_{kl} \frac{M-l}{M-k}$; with the remaining entries being 0. Then, my intermediate beliefs at t + 1 are given by

$$\hat{x}^{t+1} = \frac{\hat{x}^t \ \hat{C}_{1]}}{\|\hat{x}^t \ \hat{C}_{1\|}\|}.$$

We show next that a result similar to Lemma 1 holds.

Lemma 2. Fix $\dot{T} \in \mathbb{N}$, $\ddot{T} \in \mathbb{N}$, and $M \in \mathbb{N}$. Then, $\lim_{\bar{t}\to\infty} \hat{x}^{\bar{t}} = (0, 0, \dots, 0, 1) \in \mathbb{R}^{M-1}$.

The above lemma follows from properties of contagion matrices (see Proposition A.1 in the Appendix). We present now an informal argument. Note that the largest diagonal

entries of the matrix \hat{C}_{1j} are the first and last ones $(\hat{c}_{11} \text{ and } \hat{c}_{M-1,M-1})$, which are equal. Unlike in the Phase I transition matrix, state M-1 is not the unique most stable state. Here, states 1 and M-1 are equally stable, and more stable than any other state. Why do beliefs then converge to $(0, 0, \dots, 0, 1)$? In each period, many states transit to M-1 with positive probability, while no state transits to state 1, and so the ratio $\frac{\hat{x}_{M-1}^t}{\hat{x}_1^t}$ goes to ∞ as tincreases. So, late in the game, I assign arbitrarily high probability to state M-1.

Proposition 3. Fix $\dot{T} \in \mathbb{N}$, $\ddot{T} \in \mathbb{N}$, and $M \in \mathbb{N}$. If I observe history $h^{\bar{t}+1} = g \dots gb$ and \bar{t} is large enough, then it is sequentially rational for me to play the Nash action at period $\bar{t} + 2$.

Proof. By Lemma 2, if \bar{t} is large enough, $\hat{x}^{\bar{t}}$ is such that I assign very high probability to M - 1 players in the other community being infected by the end of period \bar{t} . Now, to compute $\hat{x}^{\bar{t}+1}$ from $\hat{x}^{\bar{t}}$, I add the information that I got infected at $\bar{t} + 1$ and hence, the only uninfected person in the other community got infected too. So, now I assign very high probability to everyone being infected. Then, Nash reversion is optimal.

Suppose now that I observe $h^{\bar{t}+2} = g \dots gbg$ and that I played the Nash action at period $\bar{t} + 2$. Then, I will know that less than (M - 1) people were infected at the end of period \bar{t} since, otherwise, I could not have faced g in period $\bar{t} + 2$. In other words, I have to recompute my beliefs using the information that, for each $t \leq \bar{t}$, $\mathcal{I}^t \leq M - 2$. I should now use the truncated transition matrix \hat{C}_{2} . Since, for each any $t \leq \bar{t}$, $\hat{x}_M^t = \hat{x}_{M-1}^t = 0$, to obtain $\hat{x}^{\bar{t}}$ we just work with $\hat{x}^t \in \mathbb{R}^{M-2}$. Now we have

$$\hat{x}^{t+1} = \frac{\hat{x}^t \ \hat{C}_{2]}}{\|\hat{x}^t \ \hat{C}_{2]}\|}.$$

As before, we will study the limit behavior of $\hat{x}^{\bar{t}}$ as \bar{t} goes to ∞ , and then use $\hat{x}^{\bar{t}}$ to compute my beliefs at $\bar{t} + 2$. First, we establish that $\hat{x}^{\bar{t}}$ indeed converges (again, see Proposition A.1 in the Appendix).

Lemma 3. For each $\dot{T} \in \mathbb{N}$, each $\ddot{T} \in \mathbb{N}$, and each $M \in \mathbb{N}$, $\lim_{\bar{t}\to\infty} \hat{x}^{\bar{t}} = \bar{x}$, where \bar{x} is the unique left eigenvector associated with the largest eigenvalue of \hat{C}_{2} such that $\|\bar{x}\| = 1$. That is, $\bar{x}\hat{C}_{2} = \frac{\bar{x}}{M}$.

Note that in matrix \hat{C}_{2} , the largest diagonal entry is the first one. This implies that a result similar to Lemma 1 does not hold any more, *i.e.*, $\bar{x} \neq (0, \dots, 0, 1)$. However, we

show below that I will still believe that "enough" people are infected with "high enough probability".

Lemma 4. Let $\bar{x} = \lim_{\bar{t}\to\infty} \hat{x}^{\bar{t}}$, where $\hat{x}^{\bar{t}}$ denotes a player's beliefs at the end of period \bar{t} after he observes history $h^{\bar{t}+2} = g \dots gbg$. Let $r \in (0,1)$. Then, for each $\varepsilon > 0$, there is $\underline{M} \in \mathbb{N}$ such that, for each $M \geq \underline{M}$,

$$\sum_{j=\lceil rM\rceil}^{M-2} \bar{x}_j > 1 - \varepsilon,$$

where $\lceil z \rceil$ is the ceiling function and is defined as the smallest integer not smaller than z. Indeed, for each $m \in \mathbb{N}$, there is $\underline{M} \in \mathbb{N}$ such that, for each $M \ge \underline{M}$,

$$\sum_{j=\lceil rM\rceil}^{M-2} \bar{x}_j > 1 - \frac{1}{M^m}.$$

This result can be interpreted as follows. Think of r as a proportion of people, say 0.9. Provided the population size is large enough, after observing history $h^{\bar{t}+2} = g \dots gbg$, my limiting belief \bar{x} will be such that I will assign probability at least $(1 - \varepsilon)$ to at least 90% of the population being already infected. Now we can choose r close enough to 1 and ε small enough and then find an $M \in \mathbb{N}$ large enough so that I believe that the contagion is spread enough that playing Nash action is optimal.

Figure 4 below represents the probabilities $\sum_{j=\lceil rM\rceil}^{M-2} \bar{x}_i$ for different values of r and M. In particular, it shows that they go to one very fast with M. From the rest of the results in this section it will follow that, after any history in which I have been infected late in Phase III, my beliefs will be that the contagion is at least as spread as \bar{x} indicates. Then, take for instance M = 20. Now \bar{x} is such that at least 90% of the people are infected with probability at least 0.75; which should be enough to induce the right incentives for most games. So, quite generally, the incentives will hold even for fairly small population sizes.⁸

In order to prove Lemma 4, we need to study more carefully the transitions between states and their probabilities. The main idea of the proof is as follows. There are two opposing forces that affect how my beliefs evolve after I observe $g \dots gbg$. First, each observation of g is a signal that not too many people are infected, making me step back

⁸The non-monotonicity in the graphs in Figure 4 may be surprising. To the best of our understanding, this can be essentially attributed to the fact that the states that are powers of 2 tend to be more likely and their distribution within the top $M - \lceil rM \rceil$ states varies in a non-monotone way.

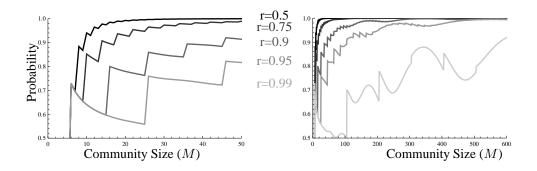


Figure 4: Illustration of Lemma 4.

in my beliefs and assign higher weight to lower states. On the other hand, since I believe that the contagion started at t = 1 and that it has been spreading exponentially during Phase III, every elapsed period makes me assign more weight to higher states (believe that more people are infected). What we need to do is to compare the magnitudes of these two effects. Two main observations drive the proof. First, each time I observe g, my beliefs get updated with more weight assigned to lower states and, roughly speaking, this step back in beliefs turns out to be of the order of M. Second, we identify the the most likely transition from any given state k, say k', and it turns out that the state k' is about \sqrt{M} times as likely as the state k. Similarly, if we consider the most likely transition from k', say k'', we get that k'' is \sqrt{M} times as likely as the state k'. Hence, given a proportion of people $r \in (0, 1)$, it is easy to see that, if M is large enough, for each state k < rM, we can find another state \overline{k} that is at least M^2 times more likely than state k. So the second effect on the beliefs is of an order of M^2 , which dominates the first one.

We need some preliminaries before we prove Lemma 4. Recall that

$$(\hat{c}_{2j})_{k,k+j} = \hat{s}_{k,k+j} \frac{M-k}{M-k-j} = \frac{(k!)^2 ((M-k)!)^2}{(j!)^2 (k-j)! (M-k-j)! M!} \frac{M-k-j}{M-k}$$

Given a state $k \in \{1, \ldots, M - 2\}$, consider the transition from k to state $tr(k) := k + \lfloor \frac{k(M-k)}{M} \rfloor$, where $\lfloor z \rfloor$ is the floor function; defined as the largest integer not larger than z. It turns out that, for large M, this is a good approximation of the most likely transition from state k.

For analytical ease, we temporarily assume that there is a continuum of states, *i.e.*, we let the set of states be the interval [0, M]. We analyze the transitions between states in this environment and then show that the results also hold in the finite setting. In the

continuous setting, a state $z \in [0, M]$, can be represented z as rM; where r = z/M can be interpreted as the proportion of infected people at state z. Let $\alpha \in \mathbb{R}$. We define the function $f_{\alpha}: [0, 1] \to \mathbb{R}$ as

$$f_{\alpha}(r) := \frac{rM(M - rM)}{M} + \alpha = (r - r^2)M + \alpha.$$

Note that f_{α} is continuous and further that $rM + f_0(r)$ would just be the extension of the function tr(k) to the continuous case; we want to know how likely it is the transition from state r to $r + f_0(r)$. Also, we define the function $g: [0, 1] \rightarrow [0, 1]$ as

$$g(r) := 2r - r^2.$$

The function g is continuous and strictly increasing. Note that, given $r \in [0, 1]$, g(r) represents the proportion of infected people if, at state rM, $f_0(r)$ people get infected; just note that $rM + f_0(r) = rM + (r - r^2)M = (2r - r^2)M$. Let $g^2(r) := g(g(r))$ and define analogously any other power of g. Hence, for each $r \in [0, 1]$, $g^n(r)$ represents the fraction of people infected after n steps starting at rM when transitions are made according to $f_0(\cdot)$.

Claim 1. Let $M \in \mathbb{N}$ and $a, b \in [0, 1]$, with a > b > 0. Then, $aM + f_0(a) > bM + f_0(b)$. Proof. Note that $aM + f_0(a) - bM - f_0(b) = aM + \frac{aM(M-aM)}{M} - bM - \frac{bM(M-bM)}{M} = 2aM - a^2M - 2bM + b^2M = (g(a) - g(b))M$. Since $g(\cdot)$ is strictly increasing in (0, 1), the result follows.

Now we define one last function function $h^M_\alpha \colon (0,1) \to (0,\infty)$ as

$$h_{\alpha}^{M}(r) := \frac{(rM!)^{2}((M-rM)!)^{2}}{(f_{\alpha}(r)!)^{2}(rM - f_{\alpha}(r))!(M - rM - f_{\alpha}(r))!M!} \frac{M - rM - f_{\alpha}(r)}{M - rM}$$

The above function represents the continuous version of the transitions given by the matrix \hat{C}_{2} . In particular, given $\alpha \in \mathbb{R}$ and $r \in [0, 1]$ the function $h_{\alpha}^{M}(r)$ represents the conditional probability of transition from state rM to state $rM + f_{\alpha}(r)$. Note that, in some abuse of notation, we apply the factorial function to non-integer real numbers. In such cases, the factorial can be interpreted as the corresponding Gamma function, *i.e.*, $a! = \Gamma(a + 1)$.

Claim 2. Let $\alpha \in \mathbb{R}$ and $r \in (0, 1)$. Then, $\lim_{M \to \infty} Mh^M_{\alpha}(r) = \infty$. More precisely,

$$\lim_{M \to \infty} \frac{M h_{\alpha}^M(r)}{\sqrt{M}} = \frac{1}{r\sqrt{2\pi}}$$

Proof. We prove the above claim in two steps. **Step 1:** $\alpha = 0$. We know from Stirling's formula that $\lim_{n\to\infty} (e^{-n}n^{n+\frac{1}{2}}\sqrt{2\pi})/n! = 1$. Hence, given $r \in (0,1)$, to study $h_{\alpha}^{M}(r)$ in the limit, we can use the approximation that $n! = e^{-n}n^{n+\frac{1}{2}}\sqrt{2\pi}$. Making the appropriate substitution and simplifying, we get the following:

$$\begin{split} Mh_0^M(r) &= M \frac{((rM)!)^2 (((1-r)M)!)^2}{M! (r^2 M)! (((r-r^2)M)!)^2 ((1-r)^2 M)!} (1-r) \\ &= \frac{M(rM)^{1+2rM} ((1-r)M)^{1+2(1-r)M} (1-r)}{\sqrt{2\pi} M^{\frac{1}{2}+M} ((1-r)^2 M)^{1+2(1-r)^2 M} ((r-r^2)M)^{\frac{1}{2}+(r-r^2)M} (r^2 M)^{\frac{1}{2}+r^2 M}} \\ &= \frac{\sqrt{M}}{r\sqrt{2\pi}}. \end{split}$$

Step 2: Let $\alpha \in \mathbb{R}$ and $r \in (0, 1)$. Now,

$$\frac{h_0^M(r)}{h_\alpha^M(r)} = \frac{(r^2M - \alpha)!(((r - r^2)M + \alpha)!)^2((1 - r)^2M - \alpha)!}{(r^2M)!(((r - r^2)M)!)^2((1 - r)^2M)!} \frac{(1 - r)^2M}{(1 - r)^2M - \alpha}$$

Applying again Stirling's formula we get

$$\frac{(r^2 M - \alpha)^{\frac{1}{2} + r^2 M - \alpha}}{(r^2 M)^{\frac{1}{2} + r^2 M}} \frac{((r - r^2) M + \alpha)^{1 + 2(r - r^2) M + 2\alpha}}{((r - r^2) M)^{1 + 2(r - r^2) M}} \frac{((1 - r)^2 M - \alpha)^{\frac{1}{2} + (1 - r)^2 M - \alpha}}{((1 - r)^2 M)^{\frac{1}{2} + (1 - r)^2 M}} \frac{(1 - r)^2 M}{(1 - r)^2 M - \alpha}.$$
 (1)

To compute the limit of the above expression as $M \to \infty$, we analyze the four fractions above separately. Clearly, $((1-r)^2 M)/((1-r)^2 M - \alpha) \to 1$ as $M \to \infty$. So, we restrict attention to the first three fractions. Take the first one:

$$\frac{(r^2M-\alpha)^{\frac{1}{2}+r^2M-\alpha}}{(r^2M)^{\frac{1}{2}+r^2M}} = (1-\frac{\alpha}{r^2M})^{\frac{1}{2}} \cdot (1-\frac{\alpha}{r^2M})^{r^2M} \cdot (r^2M-\alpha)^{-\alpha} = A_1 \cdot A_2 \cdot A_3,$$

where $\lim_{M\to\infty} A_1 = 1$ and $\lim_{M\to\infty} A_2 = e^{-\alpha}$. Similarly, the second fraction decomposes as $B_1 \cdot B_2 \cdot B_3$, where $\lim_{M\to\infty} B_1 = 1$, $\lim_{M\to\infty} B_2 = e^{2\alpha}$ and $B_3 = ((r-r^2)M + \alpha)^{2\alpha}$. Finally, the third fraction can be decomposed as $C_1 \cdot C_2 \cdot C_3$, where $\lim_{M\to\infty} C_1 = 1$, $\lim_{M\to\infty} C_2 = e^{-\alpha}$ and $C_3 = ((1-r)^2M - \alpha)^{-\alpha}$. Therefore, the limit of the above expression reduces to

$$\lim_{M \to \infty} (1) = \lim_{M \to \infty} \left(\frac{((r-r^2)M + \alpha)^2}{(r^2M - \alpha)((1-r)^2M - \alpha)} \right)^{\alpha} = 1.$$

We are now ready to prove Lemma 4.

Proof of Lemma 4. Fix $r \in (0, 1)$ and $\varepsilon > 0$. We show that there is M such that, for each $M \geq \underline{M}$ and each state $k < \lceil rM \rceil$, there is a state $\overline{k} \in \{\lceil rM \rceil, \dots, M-2\}$ such that $\bar{x}_{\bar{k}} > M^2 \bar{x}_k$. We show this first for state $k_0 = \lceil rM \rceil - 1$. Consider the state rM and let $\bar{r} := g^5(r)$. Recall that \bar{r} is the state reached (proportion of people that are infected) from initial state rM after 5 steps according to the function f_0 . Recall that functions f_0 and g are such that, $r < \bar{r} < 1$. Moreover, suppose M is large so that $\bar{r}M \leq M - 2$. Consider now the state k_0 and let \bar{k} be the number of infected people after giving 5 steps according to function tr(·). Clearly, for each of these steps, there is $\alpha_i \in (-1,0]$, with $j \in \{1, \ldots, 5\}$, such that the step corresponds with that of function f_{α_i} . By Claim 1, since $k_0 < rM$, $\bar{k} < M - 2$. Moreover, it is trivial to see that $\bar{k} > \lceil rM \rceil$. Let k_1 be the state that is reached after the first step from k_0 according to function tr(·). By Lemma 3, $\bar{x} = M\bar{x}\hat{C}_{2}$. Then, $\bar{x}_{k_1} = M\sum_{k=1}^{M-2} \bar{x}_k(\hat{C}_{2})_{kk_1} > M\bar{x}_{k_0}(\hat{C}_{2})_{k_0k_1} = \bar{x}_{k_0}Mh^M_{\alpha_1}(r)$, which, if M is large enough, can be approximated by $\bar{x}_{k_0} \frac{\sqrt{M}}{r\sqrt{2\pi}}$. Repeating the same argument for the other intermediate states that are reached in each of the five steps, we get that, if M is large enough, $\bar{x}_{\bar{k}} > M^2 \bar{x}_{k_0}$. The proof for an arbitrary state $k < \lceil rM \rceil - 1$ is very similar, with the only difference that more steps might be needed to get to a state $\bar{k} \in \{[rM], \ldots, M-2\}$; yet, the extra number of steps makes the difference between \bar{x}_k and $\bar{x}_{\bar{k}}$ even bigger.⁹

Let $\bar{k} \in \{\lceil rM \rceil, \ldots, M-2\}$ be a state such that $\bar{x}_{\bar{k}} > M^2 \max\{\bar{x}_k : k \in \{1, \ldots, \lceil rM \rceil - 1\}$. Then, $\sum_{k=1}^{\lceil rM \rceil - 1} \bar{x}_k < rM \frac{\bar{x}_{\bar{k}}}{M^2} < \frac{1}{M}$. Therefore, if M is big enough, $\frac{1}{M} < \varepsilon$ and we get that $\sum_{i=\lceil rM \rceil}^{M-2} x_i > 1 - \varepsilon$.

The second part of the statement is now straightforward. Just take $\bar{r} := g^{2m+3}(r)$ and repeat the argument above.

Proposition 4. Fix a game $\Gamma(g, l, c)$. Fix $\dot{T} \in \mathbb{N}$ and $\ddot{T} \in \mathbb{N}$ and let $\bar{t} \gg \ddot{T} + \dot{T}$. Suppose that I observe history $h^{\bar{t}+2} = g \dots gbg$. Then, if M is large enough, it is sequentially rational for me to play the Nash action at period $\bar{t} + 3$.

Proof. First, consider my beliefs $\hat{x}^{\bar{t}}$ computed conditioning only the information that at most M-2 people were infected after period \bar{t} and that I was uninfected until period $\bar{t}+1$. From Lemma 3, if \bar{t} is large enough, $\hat{x}^{\bar{t}}$ is very close to \bar{x} . In particular, I believe that, with probability at least $1-\varepsilon$, at least rM people are infected. We can use $\hat{x}^{\bar{t}}$ to compute my beliefs at period $\bar{t}+2$.

⁹It is worth noting that we can do this argument uniformly for the different states and the corresponding α 's because we know that all of them lie inside [-1, 0], a bounded interval; that is, we can take one M big enough so as to ensure that we can use the approximation given by Lemma 2 for any α in [-1, 0].

- After period \$\bar{t}\$ + 1: I compute \$\bar{x}^{\bar{t}+1}\$ by updating \$\bar{x}^{\bar{t}}\$, conditioning on \$i\$) I observed \$b\$ in period \$\bar{t}\$ + 1 and \$i\$) at most \$M 1\$ people were infected after \$\bar{t}\$ + 1 (I observed \$g\$ at \$\bar{t}\$ + 2). Now, compare \$\bar{x}^{\bar{t}+1}\$ with \$\bar{x}^{\bar{t}+1}\$, computed from \$\bar{x}^{\bar{t}\$}\$ by conditioning instead on i) I observed \$g\$ and ii) at most \$M 2\$ people are infected. Clearly, \$\bar{x}^{\bar{t}+1}\$ first order stochastically dominates \$\bar{x}^{\bar{t}+1}\$, in the sense of placing higher probability on more people being infected. Now, recall that the beliefs \$\bar{x}^{\bar{t}\$}\$ are very close to \$\bar{x}\$ and, by definition, the beliefs \$\bar{x}^{\bar{t}+2}\$ are even closer to \$\bar{x}\$.
- After period t

 After period t

 + 2: I compute x

 <sup>t
 +2</sup> based on x

 <sup>t
 +1</sup> and conditioning on i) I observed g, ii) I infected my current opponent (I played the Nash action at t

 + 2), and iii) at most M have been infected after t

 + 2. Again, this updating leads to beliefs that first order stochastically dominate beliefs we would obtain if we instead conditioned on i) I observed g and ii) at most M 2 people were infected after t

 + 2. Again, the beliefs x

 <sup>t
 +2</sup> would be very close to x

Hence, if it is optimal for me to play the Nash action when my beliefs are given by \bar{x} , it is also optimal to do so after observing the history $h^{\bar{t}+2} = g \dots gbg$ (provided that \bar{t} is large enough). But Lemma 4 ensures that, if M is large enough, the beliefs \bar{x} can be made as extreme as desired (in the sense of many people being infected), ensuring that the players have the right incentives.

As we did in Case 1, histories of the form $h^{\bar{t}+1+\alpha} = g \dots gbg \ \mathcal{A}$. g also have to be accounted for. The key idea for the incentives after these histories is the following. If α is small, then I will still think that a lot of players were already infected when I got infected; the argument being similar to the one in Proposition 4. On the other hand, if α is large, I may learn that there were not so many players infected when I got infected. However, the number of players I my have infected since then, together with the exponential spread of the contagion, will be enough to convince me that, at the present period, contagion is widely spread anyway.

To formalize the above intuition, we need the following strengthening of Lemma 4. We omit the proof, as it involves a minor elaboration of the arguments in Lemma 4.

Lemma 5. Let $r \in (0, 1)$. Then, for each $\varepsilon > 0$, there are $\hat{r} \in (r, 1)$ and $\underline{M} \in \mathbb{N}$ such that, for each M > M,

$$\frac{\sum_{j=\lceil rM\rceil}^{\lfloor M-\hat{r}M\rfloor} x_j}{1-\sum_{j=\lfloor M-\hat{r}M\rfloor+1}^M x_j} > 1-\varepsilon$$

Indeed, for each $m \in \mathbb{N}$, there is $\underline{M} \in \mathbb{N}$ such that, for each $M \geq \underline{M}$,

$$\frac{\sum_{j=\lceil rM\rceil}^{\lfloor M-\hat{r}M\rfloor} x_j}{1-\sum_{j=\lfloor M-\hat{r}M\rfloor+1}^M x_j} > 1-\frac{1}{M^m}.$$

Proposition 5. Fix a game $\Gamma(g, l, c)$. Fix $\dot{T} \in \mathbb{N}$ and $\ddot{T} \in \mathbb{N}$ and let $\bar{t} \gg \ddot{T} + \dot{T}$. Let $\alpha \ge 1$. Suppose that I observe history $h^{\bar{t}+1+\alpha} = g \dots gbg \stackrel{\alpha}{\dots} g$. Then, if M is large enough, it is sequentially rational for me to play the Nash action at period $\bar{t} + 2 + \alpha$.

Proof. The idea of the proof is similar to that of Proposition 4. First, I know that at most $M - \alpha - 1$ people were infected after period \bar{t} . Hence, the new limit vector $\tilde{x} \in \mathbb{R}^{M-\alpha-1}$ must be computed using matrix $\hat{C}_{(\alpha+1)}$. However, if we define $y := (\bar{x}_1, \ldots, \bar{x}_{M-\alpha-1})$, it is easy to see that $\tilde{x} = \frac{y}{\|y\|}$.

Second, consider the following scenario. Suppose that, late in Phase III, an infected player believes that exactly two people were infected in each community, and then he played the Nash action for a series of periods while observing only g. In each period he infected a new person and he knows that the contagion was spreading exponentially. Clearly, once the number of periods during which this player has been infecting people is large enough, Nash reversion would be the best reply, irrespective of what this player observes in the meantime (because the player would have infected enough people himself). Let $\phi(M)$ denote this number of periods. Since the contagion spreads exponentially, the threshold $\phi(M)$ is some logarithmic function of M. Hence, for each $\hat{r} \in (0, 1)$, there is \hat{M} such that for $M > \hat{M}$, $\hat{r}M > \phi(M)$. Now, given $\varepsilon > 0$, we can find \hat{r} and M such that Lemma 5 holds. For the rest of the proof we work with $M > \max\{\hat{M}, M\}$. There are two cases.

 $\alpha < \phi(M)$: In this case, we can repeat the arguments in the proof of Proposition 4 to show that my beliefs $\hat{x}^{\bar{t}+1+\alpha}$ first order stochastically dominate those given by \tilde{x} . Since $\hat{r}M > \phi(M)$, $\lfloor M - \hat{r}M \rfloor < M - \phi(M)$ and we can rely on Lemma 5 to get the desired result.

 $\alpha \ge \phi(M)$: In this case I played the Nash action for α periods. By definition of $\phi(M)$, playing Nash is the unique best reply after observing $h^{\bar{t}+1+\alpha}$.

Finally, we consider histories in which after getting infected, I observe actions that include both g and b, *i.e.*, histories starting with $h^{\bar{t}+1} = g \dots gb$ and in which I have observed b in one or more periods after getting infected. The reasoning is the same as Case 1. After

such histories, I will assign higher probability to more people being infected compared to histories where I only observed *g* after getting infected.

Case 3: Infection in other periods of Phase III ("Monotonicity" of Beliefs). We already know that when a player is infected early in Phase III, he thinks that he was the last player in being infected and that everybody is infected. Also, although a player infected late in Phase III may not think that he was the last one, he will still think that enough players are already infected (for him to be sequentially rational to play the Nash action), with this limit belief being given by \bar{x} . In the result below we show that the belief of a player infected not very late in Phase III will be somewhere in between. The earlier a player gets infected in Phase III, the closer his belief will be to $(0, \ldots, 0, 1)$ and, the later he gets infected, the closer his belief will be to \bar{x} .

Proposition 6. Fix a game $\Gamma(g, l, c)$. Fix $\ddot{T} \in \mathbb{N}$. There is $\underline{M} \in \mathbb{N}$ such that, for each $M > \underline{M}$, if \dot{T} is large enough, then it is sequentially rational for me to play the Nash action after any history in which I get infected in Phase III.

Proof. In Cases 1 and 2 we showed that if I get infected at the start of Phase III (at $\dot{T} + \ddot{T} + 1$) or late in Phase III (at $\bar{t} \gg \dot{T} + \ddot{T}$), I will switch to the Nash action. What remains to be shown is that the same is true if I get infected at some intermediate period in Phase III. We prove this for histories in Phase III of the form $h^{\tilde{t}+2} = g \dots gbg$. The proof can be extended to include other histories just as in Cases 1 and 2. Recall that \bar{x} denotes the limit belief when \tilde{t} goes to infinity.

We want to compute my belief $\hat{x}^{\tilde{t}+2}$ after history $h^{\tilde{t}+2} = g \dots gbg$. We first compute intermediate belief \hat{x}^t , for $t \leq \tilde{t}$. Take \underline{M} such that Proposition 4 holds for all $M > \underline{M}$.

During Phase I, beliefs are computed using matrix $C_{2]}$, and from Phase III on, matrix $\hat{C}_{2]}$ is used. We know (from Case 1) that for \dot{T} large enough, $\hat{x}^{\dot{T}+\ddot{T}} \in \mathbb{R}^{M-1}$ is close to $(0, \ldots, 0, 1)$. Moreover, by taking \dot{T} large enough, we also get that $\hat{x}_{k}^{\dot{T}+\ddot{T}+1} \gg \hat{x}_{k-1}^{\dot{T}+\ddot{T}+1} \gg \ldots \gg \hat{x}_{1}^{\dot{T}+\ddot{T}+1} > 0$ and, for each i > j, $\hat{x}_{i}^{\dot{T}+\ddot{T}+1}/\hat{x}_{j}^{\dot{T}+\ddot{T}+1} > \bar{x}_{i}/\bar{x}_{j}$. Using the properties of the contagion matrix $\hat{C}_{2]}$, we can show that if we start Phase III with such a belief $\hat{x}^{\dot{T}+\ddot{T}+1}$ we also get that, for each i > j, $\hat{x}_{i}^{\tilde{t}}/\hat{x}_{j}^{\tilde{t}} > \bar{x}_{i}/\bar{x}_{j}$ (see Proposition A.2 in the Appendix). This means also that $\hat{x}^{\tilde{t}}$ first order stochastically dominates \bar{x} , in the sense of placing higher probability on more people being infected. Now, my beliefs need to be updated from $\hat{x}^{\tilde{t}}$ to $\hat{x}^{\tilde{t}+1}$ and then from $\hat{x}^{\tilde{t}+1}$ to $\hat{x}^{\tilde{t}+2}$. We can use similar arguments as in Proposition 4 to show that $\hat{x}^{\tilde{t}+2}$ first order stochastically dominates \bar{x} . In other words, $\hat{x}^{\tilde{t}+2}$ assigns higher probability to more people being infected than \bar{x} . Hence, if it is sequentially rational for

me to play the Nash action when my beliefs are \bar{x} , it is also sequentially rational to do so when my belief is $\hat{x}^{\tilde{t}+2}$.

Hence, we have established that if a player observes a triggering action any time during Phase III, it is sequentially rational for him to revert to the Nash action.

4.3.4 A player observes a triggering action in Phases I or II

It remains to check the incentives for a player who is infected during the initial Trust-Building Phases. We argued informally in Section 3.1 why players would find it optimal to switch to the Nash action. We omit the formal proofs, as the arguments are very similar to those used for Case 1 above.

4.3.5 A player observes a non-triggering action

An uninfected player who observes a non-triggering action knows that his opponent will not get infected, and will continue to play as if on-path. Since he knows that contagion will not start, clearly, the best thing to do is also to ignore this off-path behavior.

4.4 Choosing M, \ddot{T}, \dot{T} , and $\underline{\delta}$

We have shown that if M, \ddot{T} , \dot{T} , and δ are chosen appropriately, the prescribed strategies are sequentially rational. We show now that, given any product-choice game $\Gamma(g, l, c)$, it is possible to choose these parameters to satisfy all incentive constraints simultaneously.

Fix a game $\Gamma(g, l, c)$. The first step is to choose M large enough so that the incentive constraints in Phase III are satisfied, *i.e.*, a player who observes a triggering action late in Phase III believes that enough people are already infected so that Nash reversion is optimal.

Here there is one subtle issue. Once M, \ddot{T} , and \dot{T} are chosen, we need players to be patient enough (δ large) to prevent deviations on-path. Then, we need to check that, once the contagion has started, not even an extremely patient player wants to slow it down. We do this below. The essence of the argument is in observing that, for a fixed population size, once the contagion has started the expected stage payoffs in the future go to 0 exponentially fast. That is, even the undiscounted sum of future payoffs is bounded. Thus, even a perfectly patient player becomes effectively impatient.

Let \bar{m} be the maximum possible gain any player can make from a unilateral deviation from any action profile of the stage-game. Suppose that we are in Phase III and take a player who knows that the contagion has started. Then, let v(M) denote his (expected) undiscounted sum of future payoffs. Similarly, define, for each $r \in (0, 1]$, v(r, M) to be the (expected) undiscounted sum of future payoffs of a player who in Phase III knows that at least rM people are infected in each community.

It is easy to see that v(M) is finite. The player knows that contagion is spreading exponentially and, hence, payoffs will drop to zero in the long run. In fact, although v(M)increases with M, since contagion spreads exponentially fast, v(M) grows at a slower rate than M. Moreover, we show below that $\lim_{r\to 1} v(r, M)$ is uniformly bounded on M.

Lemma 6. Fix a product-choice game $\Gamma(g, l, c)$. Let $r \ge \frac{1}{2}$ and $M \in \mathbb{N}$. Then, $v(r, M) \le 1 + g$.

Proof. Let $r = \frac{1}{2}$. If k people are infected in each community at period t, the expected number of additional people who will get infected during period t + 1 is given by

$$\sum_{j=0}^{k} \frac{[k!(M-k)!]^2}{(j!)^2(k-j)!(M-k-j)!M!} j^{j}$$

In particular, if $r = \frac{1}{2}$ (*i.e.*, $k = \frac{M}{2}$), the above expression simplifies to $\frac{M-k}{2} = \frac{M}{4}$. This implies that, if at least half of the population is infected today, the expected number of people to get infected during the next period is, at least, half of the remaining uninfected people. Therefore, given $\Gamma(g, l, c)$,

$$v(\frac{1}{2}, M) \le \frac{1}{2}(1+g) + \frac{1}{4}(1+g) + \frac{1}{8}(1+g) + \ldots = \sum_{t=1}^{\infty} \frac{1}{2^t}(1+g) = 1+g.$$

Clearly, for $r > \frac{1}{2}$, $v(r, M) \le v(\frac{1}{2}, M)$. Hence, for each $r \ge \frac{1}{2}$ and each $M \in \mathbb{N}$, $v(r, M) \le 1 + g$.

Proposition 7. Fix a product-choice game $\Gamma(g, l, c)$. Then, there are $\bar{r} \in (0, 1)$ and $\underline{M} \in \mathbb{N}$ such that, for each $r \geq \bar{r}$ and each $M \geq \underline{M}$, a player who gets infected very late in the game will not slow down the contagion, irrespective of how patient he is.

Proof. By Proposition 4, if M is big enough, a player who gets infected late in Phase III believes that "with probability at least $1 - \frac{1}{M^2}$ at least rM people in each community are infected". Suppose he deviates and does not play the Nash action. Then:

- i) With probability $1 \frac{1}{M^2}$ at least rM people are infected. So, with probability at least r he meets an infected player, makes a loss of l by not playing Nash, and does not slow down the contagion. With probability 1 r he gains, at most, \bar{m} in the current period and v(M, r) in the future.
- ii) With probability $\frac{1}{M^2}$, less than rM people are infected, and the player's continuation payoff is, at most, v(M).

Hence, the gain from not playing the Nash action instead of doing so is bounded above by:

$$\frac{v(M)}{M^2} + (1 - \frac{1}{M^2}) \left(-rl + (1 - r)(\bar{m} + v(M, r)) < \frac{M}{M^2} + (1 - \frac{1}{M^2}) \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right) = \frac{1}{M^2} \left(-rl + (1 - r)(\bar{m} + 1 + g) \right)$$

The inequality follows from the facts that v(M) increases slower than the rate of M and that 1 + g is a uniform bound for v(r, M). Now, if M is large enough and r is close to 1, the above expression becomes negative. So there is no incentive to slow down the contagion.

Once \underline{M} is chosen, we pick \ddot{T} . \ddot{T} is chosen large enough so that a buyer who is infected in Phase I and knows that not all buyers were infected by the end of Phase I still has an incentive to play B_L in Phase II. This buyer knows that contagion will spread from Phase III anyway, and playing B_L gives him a short-term gain in Phase II. So, if \ddot{T} is long enough, she will want to play B_L in Phase II. Because of the finiteness of v(M), we can pick \ddot{T} such that the incentive constraint holds even for a perfectly patient buyer.

Next, we choose \hat{T} . \hat{T} must be chosen large enough so that i) a buyer infected in Phase I who has observed Q_H in most periods of Phase I believes that with high probability all buyers were infected during Phase I, ii) a seller infected in Phase II believes that with high probability at least M - 1 buyers were infected during Phase I, iii) a seller who deviates in Phase I believes that, with high probability, he met all the buyers in Phase I, and iv) players infected in Phase III believe with high probability that "enough" people were infected by the end of Phases I and II.

Finally, once \underline{M} , \ddot{T} , and \dot{T} have been chosen, we find the threshold $\underline{\delta}$ such that for discount factors $\delta > \underline{\delta}$, players will not deviate on-path.

5 Discussion and Extensions

The main contribution of this paper lies in showing that community enforcement in random matching games can be applied far beyond the PD to support a wide range of payoffs. The main goal of this section is to discuss the versatility of the trust-building ideas we have used here to sustain cooperation in the product-choice game. In particular we show how far we can get with a straightforward adaptation of the main results of this paper. Moreover, we provide intuition for the way in which our approach might be used to get more general results such as a Nash-threats folk theorem, or similar results when the role of each player is randomly assigned in each period ("interchangeable populations"). We present these as conjectures, as the formal proofs would require technical analysis similar to what we have already developed without adding new insights.

Note that throughout the paper we use symmetric strategies, and so get symmetric payoffs for players within a community. In the discussion below, whenever we talk about the set of equilibrium payoffs, we restrict attention to such symmetric payoffs. In other words, we do not consider feasible payoff vectors where players of the same community get different payoffs.

5.1 Games Beyond the Product-Choice Game

For ease of exposition, we restricted attention to the product-choice game, and showed that payoffs arbitrarily close to the efficient payoff profile can be achieved. More generally, in what classes of games does this result apply? What is the set of payoffs that can be achieved in equilibrium in these games?

Take a two player game with action set A and let (a_1^*, a_2^*) be a Nash equilibrium.

A1. One-sided Incentives: There are action profiles (a_1, a_2) and $(\bar{a}_1, \bar{a}_2) \in A$ such that:

- In each of the two action profiles, exactly one player has an incentive to deviate, with player 1 wanting to deviate in (a₁, a₂) and player 2 wanting to deviate in (ā₁, ā₂).
- In one of the two action profiles, the player with no incentive to deviate is playing an action in the support of (a_1^*, a_2^*) .

Let $\tilde{A} := \{(a'_1, a'_2) \in A : \text{ either i}) (a'_1, a'_2) = (a^*_1, a^*_2) \text{ or ii}) a'_1 = a^*_1 \text{ and } a'_1 = a^*_1\}$. Then, any payoff $v \in \operatorname{conv}(\{u(a) : a \in \tilde{A}\})$ that Pareto dominates the payoff of (a^*_1, a^*_2) can

be approximated adapting the strategies in this paper.¹⁰ The action profiles in A1 are used to define the trust-building phases and the payoff v is approximated in the target payoff phase.¹¹ It may be worthwhile to note that condition A1 is generic in the class of 2×2 games with a unique pure strategy Nash equilibrium.

5.2 Can we get a Folk Theorem?

Note that, in the product-choice game, \tilde{A} does not include action profiles (Q_L, B_H) and (Q_H, B_L) . Since we cannot achieve payoffs close to (1+g, -l) or (-l, 1-c), our strategies do not suffice to get a folk theorem for all games satisfying A1. However, we believe that the idea of trust-building that we develop in this paper is powerful enough to take us farther. We conjecture that it may be possible to obtain a Nash threats folk theorem for two-player games by modifying our strategies with the addition of further trust-building phases. We do not attempt to prove a folk theorem here, but we hope that the informal argument below will illustrate how the idea of trust-building might lead to a folk theorem.

To fix ideas, consider a feasible target equilibrium payoff that can be achieved by playing short sequences of (Q_H, B_H) (10% of the time) alternating with longer sequences of (Q_H, B_L) (90% of the time). It is not possible to sustain this payoff in Phase III with our strategies. To see why not, consider a long time window in Phase III where the prescribed action profile is (Q_H, B_L) . Suppose a buyer faces Q_L for the first time in a period of this phase followed by many periods of Q_H . Notice that since the action for a buyer is B_L in this time window, she cannot infect any sellers herself. So, with more and more observations of Q_H , she will ultimately get convinced that few people are infected. So, it may not be optimal to revert to Nash any more. Contrast this with the original situation where the target action is (Q_H, B_H) . In that case, a player who gets infected starts infecting players himself and so at most, after M - 1 periods of infecting opponents, he is convinced that everyone is infected.

What modification to our strategies might enable us to attain these payoffs? We will use additional trust-building phases to recover incentives. Say, the target payoff involves alternating sequences of (Q_H, B_L) for T_1 periods and (Q_H, B_H) for $T_2 = \frac{1}{9}T_1$ periods. In

¹⁰The results and proofs are straightforward adaptations of the ones presented for the product-choice game.

¹¹Note that if the game has more than two actions, we need to specify how players behave after observing an action that is neither on-path nor the punishment action. To ensure that incentives are satisfied, we require an additional assumption on beliefs. It suffices to assume that such deviations are more likely to be made by infected players than uninfected ones. This implies that such actions are triggering actions.

the modified equilibrium strategies, in Phase III, the windows of (Q_H, B_L) and (Q_H, B_H) will be separated by trust-building phases. To illustrate, we start the game as before, with two phases: \dot{T} periods of (Q_H, B_H) and \ddot{T} periods of (Q_L, B_H) . In Phase III, players play the action profile (Q_H, B_L) for T_1 periods, followed by a new trust-building phase of T'periods during which (Q_L, B_H) is played. Then players switch to playing the sequence of (Q_H, B_H) for T_2 periods. The new phase is chosen to be short enough (*i.e.*, $T' \ll T_1$) to have no significant payoff consequences. Yet, it is chosen long enough so that a player who is infected during the T_1 period window but thinks that very few people are infected, will still want to revert to Nash punishments to make short-term gains during the new phase.¹² We believe that adding appropriate trust-building phases in the target payoff phase in this way can guarantee that players have the incentive to revert to Nash punishments off-path for any beliefs they may have about the number of people infected.

5.3 Interchangeable Populations

So far in this paper we have assumed that the random matching game is played by two independent communities; *i.e.*, each player is either a seller or a buyer. Alternatively, we could have assumed that there is one population whose members are matched in pairs in every period and, in each match, the roles of players are randomly assigned. Then, at the start of every period, each player has a fifty percent chance of playing in each role.

A first implication of this alternative modeling is that a negative result like that of Proposition 1 may not be true any more.¹³ However, we conjecture that the trust-building ideas that underlie the results in this paper are flexible enough to be adapted to this new setting.

Suppose that we want to get cooperation in the repeated product-choice game when roles are randomly assigned at the start of each period. We conjecture that the following simplification of our trust-building strategies can be used to get as close as desired to the efficient payoff (1, 1). There are two phases. Phase I is the trust-building phase: sellers play Q_L and buyers play B_H ; the important features of this profile being that i) only buyers have

¹²For example, think of a buyer who observes a triggering action for the first time in Phase III (while playing (Q_H, B_L)) and then observes only good behavior for a long time while continuing to play (Q_H, B_L) . Even if this buyer is convinced that very few people are infected, she knows that the contagion has begun, and ultimately her continuation payoff will become very low. So, if there is a long enough phase of playing (Q_L, B_H) ahead, she will choose to revert to Nash because this is the myopic best response, and would give her at least some short-term gains.

¹³A buyer infected in period 1 might become a seller in period 2 and he might indeed have the right incentives to punish.

an incentive to deviate and ii) sellers are playing a Nash action. Phase II is the target payoff phase and (Q_H, B_H) is played. Deviations are punished through Nash reversion; there is no delay in the punishment now. The main difference with respect to the old strategies is that contagion also takes place in Phase I; whenever an "infected" player is in the role of a buyer he will play B_L and spread the contagion, so we do not have a single player infecting people in this phase. This implies that we do not need a second trust-building phase, since its primary goal was to give the infected buyers the right incentives to "tell" the sellers that there had been a deviation.

The arguments for the incentives in this case would be very similar to those used in the setting with independent populations. After getting infected, a player would form his beliefs based on the fact that a buyer deviated in period one and that punishments have been going on ever since. Proving formally that players have the right incentives after all histories is a hard exercise for which we cannot rely on the analysis of the independent populations case. The fact that players' roles are not fixed has two main consequences for the analysis. First, the contagion is not the same and a slightly different mathematical object would be needed to model it. Second, the set of histories a player may have observed would depend on the roles he played in the past periods, so it is harder to characterize all possible histories. We think that this exercise would not add new insights to the main message of the paper and rather leave it as a plausible conjecture.

5.4 Alternative Systems of Beliefs

We assume that a player who observes a triggering action believes that some seller deviated in the first period of the game. This ensures that an infected player thinks that the contagion has been spreading long enough that, after Phase I, almost everybody is infected. It is easy to see that alternate (less extreme) assumptions on beliefs would still have delivered this property. We work with this case mainly for tractability. Also, since our equilibrium is based on communities building trust in the initial phases of the game, it is plausible that players regard deviations to be more likely earlier rather than later.

Further, the assumption we make is a limiting one in the sense that it yields the weakest bound on M. With other assumptions, for a given product quality choice game and given \dot{T} and \ddot{T} , the threshold population size M required to sustain cooperation would be weakly greater than the threshold we obtain. Why is this so? On observing a triggering action, my belief about the number of infected people is determined by two factors: my belief

about when the first deviation took place and the subsequent contagion process (described by the matrices of transition probabilities). Formally, on getting infected at period t, my belief x^t can be expressed $x^t = \sum_{\tau=1}^t \mu(\tau) y^t(\tau)$, where $\mu(\tau)$ is the probability I assign to the first deviation having occurred at period τ and $y^t(\tau)$ is my belief about the number of people infected if I know that the first deviation took place at period τ . Since contagion is not reversible, every elapsed period of contagion results in a weakly greater number of infected people. Thus, my belief if I think the first infection occurred at t = 1, first order stochastically dominates my belief if I think the first infection happened later, at any t > 1, *i.e.*, For each τ , for each $k \in \{1, \ldots, M\}, \sum_{i=k}^{M} y_i^t(\tau) \geq \sum_{i=k}^{M} y_i^t(1)$. Now consider any belief \tilde{x}^t that I might have had, with alternate assumptions on when I think the first deviation occurred. This belief will be some convex combination of $y^t(\tau)$, for $\tau = 1, \ldots, t$. Since we know that $y^t(1)$ first order stochastically dominates $y^t(\tau)$ for any $\tau > 1$, it follows that $y^t(1)$ will also first order stochastically dominate \tilde{x}^t . This in turn implies that with most alternate belief assumptions, we would have needed, at least, the population size to be larger in order to ensure that my limit beliefs in Phase III assigned enough weight to a large number of people being infected.

5.5 Stability and Robustness to Introduction of Noise

A desirable feature of an equilibrium could be global stabiliy. A globally stable equilibrium is one where after any finite history, play finally reverts to cooperative play (Kandori (1992)). The notion is appealing because it implies that a single mistake does not entail permanent reversion to punishments. The equilibrium here fails to satisfy this property. However, global stability can be obtained if a public randomization device is introduced. This is similar to Ellison (1994). The role of the randomization device would be to allow for the possibility of restarting the game in any period, with a low but positive probability.

A related question is to see if the equilibrium can be sustained in a model with some noise. First note that since players have strict incentives in equilibrium, our strategies are robust to the introduction of some noise in the parameters g, l, and c. However, if we consider a setting where players make mistakes, or there is noisy observation of one's opponents' actions, our equilibrium is no longer robust. Consider a setting where players are constrained to play the noncooperative action with probability at least $\varepsilon > 0$ at every possible history. We can ask if the equilibrium survives for small ε . Our construction is not robust to this modification. The incentive compatibility of our strategies crucially relies on the fact that players believe that early deviations are more likely. If players make mistakes with positive and equal probability in all periods, this property is lost. To see a particularly problematic case, consider the following situation in the setting with noise. If a buyer makes a mistake late in Phase II, no matter what she does after that, she will start phase III knowing that not many people are already infected. Hence, if she is very patient, it may be optimal for her to play the cooperative action and slow down the contagion. Suppose a seller observes a triggering action in the last period of Phase II. This seller will think that, it is very likely that his opponent was uninfected and has just made a mistake, and so will not punish. In this case, neither player reverts to Nash punishments. This implies that a buyer may profitably deviate in the last period of Phase II, since her deviation would go unpunished.

5.6 Uncertainty about Calendar Time

In the equilibrium in this paper, players condition their behavior on calendar time. Onpath, sellers switch their action in a coordinated way at the end of Phases I and II. Off-path, players coordinate the start of the punishment phase. The calendar time and the timing of the phases (\dot{T} and \ddot{T}) are commonly known and are used to coordinate behavior. Arguably, in modeling large communities, the need to switch behavior with precise coordination is an unappealing feature. It may be interesting to investigate if cooperation can be sustained if players were not sure about the calendar time or about the precise time to switch actions.

A complete analysis of this issue is beyond the scope of this paper, but we conjecture that a modification of our strategies would be robust to the introduction of *small* uncertainty about timing. The reader may refer to the Appendix Section A.4, where we consider an altered environment in which players are slightly uncertain about the timing of the different phases. We conjecture equilibrium strategies in this setting, and provide the main intuition behind why the efficient payoff might still be achieved.

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A Appendix

A.1 Properties of the Conditional Transition Matrices

In Section 4.2 we introduced a class of matrices, contagion matrices, which turns out to be very useful in analyzing the beliefs of players. First note that, since contagion matrices are upper triangular, their eigenvalues correspond with the diagonal entries. Given $x \in \mathbb{R}^k$, let $||x|| := \sum_{i \in \{1,...,k\}} x_i$. We are often interested in the limit behavior of $x^t := \frac{xC^t}{||xC^t||}$, where C is a contagion matrix and x is a probability vector. We present below a few results about this limit behavior. We distinguish three special types of contagion matrices that will deliver different limiting results.

Property C1: $\{c_{11}\} = \operatorname{argmax}_{i \in \{1,...,k\}} c_{ii}$.

Property C2: $c_{kk} \in \operatorname{argmax}_{i \in \{1,\dots,k\}} c_{ii}$.

Property C3: For each l < k, C_{l} satisfies C1 or C2.

Lemma A.1. Let C be a contagion matrix and let λ be its largest eigenvalue. Then, the left eigenspace associated with λ has dimension 1. That is, the geometric multiplicity of λ is one, irrespective of its algebraic multiplicity.

Proof of Lemma A.1. Let l be the largest index such that $c_{ll} = \lambda > 0$ and let x be a left eigenvector associated with λ . We claim that, for each $i < l, x_i = 0$. Suppose not and let ibe the largest index smaller than l such that $x_i \neq 0$. If i < l-1, we have that $x_{i+1} = 0$ and, since $c_{i,i+1} > 0$, we get $(xC)_{i+1} > 0$, which contradicts that x is an eigenvector associated with λ . If i = l-1, then $(xC)_l \ge c_{ll}x_l + c_{l-1,l}x_{l-1} > c_{ll}x_l = \lambda x_l$, which, again, contradicts that x is an eigenvector associated with λ . Then, we can restrict attention to matrix $C_{[(l-1)}$. Now, also λ is the largest eigenvalue of $C_{[(l-1)}$ but, by definition of l, only one diagonal entry of $C_{[(l-1)}$ equals λ and, hence, its multiplicity is one. Then, $y \in \mathbb{R}^{k-(l-1)}$ is a left eigenvector associated with λ for matrix $C_{[(l-1)}$ if and only if $(0, \ldots, 0, y) \in \mathbb{R}^k$ is a left eigenvector associated with λ for matrix C.

Given a contagion matrix C with largest eigenvalue λ , we denote by \breve{x} the unique left eigenvector associated with λ such that $\|\breve{x}\| = 1$.

Proposition A.1. Let $C \in \mathcal{M}_k$ be a contagion matrix satisfying C1 or C2. Then, for each nonnegative vector $x \in \mathbb{R}^k$ with $x_1 > 0$, we have $\lim_{t\to\infty} \frac{xC^t}{\|xC^t\|} = \breve{x}$. In particular, under C2, $\breve{x} = (0, \ldots, 0, 1)$.

Proof of Proposition A.1. Clearly, since C is a contagion matrix, if t is large enough all the components of x^t are positive. Then, for the sake of exposition, we assume that all the components of x are positive. We distinguish two cases.

C satisfies C1. In this case λ has multiplicity 1. We show that, for each pair $i, j \in \{1, \ldots, k\}$, $\lim_{t\to\infty} \frac{x_i^t}{x_j^t} = \frac{\check{x}_i}{\check{x}_j}$. Once this is established, the result immediately follows from the fact that, for each $t \in \mathbb{N}$, $||x^t|| = ||\check{x}|| = 1$. We already know that, $\check{x}C = \lambda\check{x}$, where λ is the largest eigenvalue of *C*. Then, the vector *x* can be written as $x = \alpha\check{x} + v$, where *v* is a vector orthogonal to \check{x} . Since \check{x} is a nonnegative vector different from 0 and all the components of *x* are positive, \check{x} and *x* are not orthogonal. Hence, $\alpha > 0$. Then,

$$\frac{x_i^t}{x_j^t} = \frac{(xC^t)_i / \|xC^t\|}{(xC^t)_j / \|xC^t\|} = \frac{(xC^t)_i}{(xC^t)_j} = \frac{\lambda^t \alpha \breve{x}_i + (vC^t)_i}{\lambda^t \alpha \breve{x}_j + (vC^t)_j} = \frac{\alpha \breve{x}_i + (v(\frac{1}{\lambda}C)^t)_i}{\alpha \breve{x}_j + (v(\frac{1}{\lambda}C)^t)_j}$$

Since λ is the largest eigenvalue of C and has multiplicity one, as $t \to \infty$, the second terms in both the numerator and denominator vanish. Then the limit as $t \to \infty$ is $\frac{\check{x}_i}{\check{x}_i}$.

C satisfies C2. We show that, for each i < k, $\lim_{t\to\infty} x_i^t = 0$. We prove this by induction on *i*. Let i = 1. Then, for each $t \in \mathbb{N}$,

$$\frac{x_1^{t+1}}{x_k^{t+1}} = \frac{c_{11}x_1^t}{\sum_{l \le k} c_{lk}x_i^t} < \frac{c_{11}x_1^t}{c_{kk}x_k^t} \le \frac{x_1^t}{x_k^t},$$

where the first inequality follows from the facts that $x_{k-1} > 0$ and $c_{k-1,k} > 0$ (C is a contagion matrix); the second inequality follows from C2. Hence, the ratio $\frac{x_1^t}{x_k^t}$ is strictly decreasing in t. Moreover, since all the components of x^t lie in [0, 1], it is not hard to see that, as far as x_1^t is bounded away from 0, the speed at which the above ratio decreases is also bounded away from 0.¹⁴ Therefore, we must have $\lim_{t\to\infty} x_1^t = 0$. Suppose the claim holds for each i < j < k - 1. Now,

$$\frac{x_j^{t+1}}{x_k^{t+1}} = \frac{\sum_{l \le j} c_{lj} x_l^t}{\sum_{l \le k} c_{lk} x_l^t} < \frac{\sum_{l \le j} c_{lj} x_l^t}{c_{kk} x_k^t} = \sum_{l < j} \frac{c_{lj}}{c_{kk}} \frac{x_l^t}{x_k^t} + \frac{c_{jj}}{c_{kk}} \frac{x_j^t}{x_k^t} \le \sum_{l < j} \frac{c_{lj}}{c_{kk}} \frac{x_l^t}{x_k^t} + \frac{x_j^t}{x_k^t}.$$

By the induction hypothesis, for each l < j, the term $\frac{x_l^i}{x_k^t}$ can be made arbitrarily small for large enough t. Then, the first term in the above expression can be made arbitrarily small.

¹⁴Roughly speaking, this is because the state k will always get some probability from state 1 via the intermediate states, and this probability will be bounded away from 0 as far as the probability of state 1 is bounded away from 0.

Hence, it is easy to see that, for large enough t, the ratio $\frac{x_j^t}{x_k^t}$ is strictly decreasing in t. As above, this can only happen if $\lim_{t\to\infty} x_j^t = 0$.

Recall the matrices used to represent a player's beliefs after he observes history $h^t = g \dots gb$. At the beginning of Phase III, the beliefs evolved according to matrices C_{1j} and S_{1j} , and late in Phase III, according to \hat{C}_{1j} . Note that these three matrices all satisfy the conditions of the above proposition. This is what drives Lemmas 1 and 2 in the text. Consider the truncated matrix \hat{C}_{2j} that gave the transition of beliefs of a player who observes history $h^t = g \dots bg$. This matrix also satisfies the conditions of the above proposition and this suffices for Lemma 3.

Proposition A.2. Let $C \in \mathcal{M}_k$ be a contagion matrix satisfying C1 and C3. Let $x \in \mathbb{R}^k$ be a nonnegative vector. Then, if x is close enough to $(0, \ldots, 0, 1)$, we have that, for each $t \in \mathbb{N}$ and each $l \in \{1, \ldots, k\}$, $\sum_{i=l}^k x_i^t \ge \sum_{i=l}^k \breve{x}_i^t$.

Whenever two vectors are as x^t and \breve{x} above, we say that x^t first order stochastically dominates \breve{x} (in the sense of more people being infected).

Proof of Proposition A.2. For each $i \in \{1...,k\}$, let e_i denote the *i*-th element of the canonical basis in \mathbb{R}^k . By C1, c_{11} is larger than any other diagonal entry of *C*. Let \breve{x} be the unique left eigenvector associated with c_{11} such that $\|\breve{x}\| = 1$. Clearly, $\breve{x}_1 > 0$ and, hence, $\{\breve{x}, e_2, \ldots, e_k\}$ is a basis in \mathbb{R}^k . With respect to this basis, the matrix *C* looks like

$$\left(\begin{array}{cc|c} c_{11} & 0 \\ \hline \\ 0 & C_{\lceil 1} \end{array}\right)$$

Now we distinguish two cases.

 $C_{\lceil 1}$ satisfies C2. In this case we can apply Proposition A.1 to $C_{\lceil 1}$ to get that, for each nonnegative vector $y \in \mathbb{R}^{k-1}$ with $y_1 > 0$, $\lim_{t\to\infty} \frac{yC_{\lceil 1}^t}{\|yC_{\lceil 1}^t\|} = (0, \ldots, 0, 1)$. Now, let $x \in \mathbb{R}^k$ be the vector in the statement of this result. Since x is very close to $(0, \ldots, 0, 1)$. Then, using the above basis, it is clear that $x = \alpha \breve{x} + v$, with $\alpha \ge 0$ and $v \approx (0, \ldots, 0, 1)$. Let $t \in \mathbb{N}$. Then, for each $t \in \mathbb{N}$,

$$x^{t} = \frac{xC^{t}}{\|xC^{t}\|} = \frac{\lambda^{t}\alpha\ddot{x} + vC^{t}}{\|xC^{t}\|} = \frac{\lambda^{t}\alpha\ddot{x} + \|vC^{t}\|\frac{vC^{t}}{\|vC^{t}\|}}{\|xC^{t}\|}$$

Clearly, $||xC^t|| = ||\lambda^t \alpha \breve{x} + ||vC^t|| \frac{vC^t}{||vC^t||}||$ and, since all the terms are positive,

$$\|xC^{t}\| = \|\lambda^{t}\alpha\| \|\breve{x}\| + \|vC^{t}\| \|\frac{vC^{t}}{\|vC^{t}\|}\| = \|\lambda^{t}\alpha\| + \|vC^{t}\|$$

and, hence, we have that x^t is a convex combination of \breve{x} and $\frac{vC^t}{\|vC^t\|}$. Since $v \approx (0, \ldots, 0, 1)$ and $\frac{vC^t}{\|vC^t\|} \rightarrow (0, \ldots, 0, 1)$, it is clear that, for each $t \in \mathbb{N}$, $\frac{vC^t}{\|vC^t\|}$ first order stochastically dominates \breve{x} in the sense of more people being infected. Therefore, also x^t will first order stochastically dominate \breve{x} .

 $C_{[1]}$ satisfies C1. By C1, the first diagonal entry of $C_{[1]}$ is larger than any other diagonal entry. Let \breve{x}^2 be the unique associated left eigenvector such that $||\breve{x}^2|| = 1$. It is easy to see that \breve{x}^2 first order stochastically dominates \breve{x} ; the reason is that \breve{x}^2 and \breve{x} are the limit of the same contagion process with the only difference that the state in which only one person has been infected is known to have probability 0 when using obtaining \breve{x}^2 from $C_{[1]}$. Clearly, $\breve{x}_2^2 > 0$ and, hence, $\{\breve{x}, \breve{x}^2, e_3, \ldots, e_k\}$ is a basis in \mathbb{R}^k . With respect to this basis, the matrix C looks like

$\left(\right)$	c_{11}	0	0
	0	c_{22}	0
	0	0	$C_{\mid 2}$

Again, we can distinguish two cases.

- $C_{[2]}$ satisfies C2. In this case we can repeat the arguments above to show that x^t is a convex combination of \breve{x} , \breve{x}^2 and $\frac{vC^t}{\|vC^t\|}$. Since both \breve{x}^2 and $\frac{vC^t}{\|vC^t\|}$ first order stochastically dominate \breve{x} , also x^t does.
- C_{[2} satisfies C1. Now we would get a vector x³ and the procedure would continue until a truncated matrix satisfies C2 or until we get a basis of eigenvectors, one of them being x and all the others first order stochastically dominate x. In both situations the result immediately follows from the above arguments.

Note that the matrix \hat{C}_{2} which gave the transition of beliefs of a player conditional on history $h^t = g \dots gbg$ late in the game, satisfies the conditions of the above proposition. This property is useful in proving Proposition 6.

A.2 Updating of Beliefs Conditional of Observed Histories

Suppose player *i* observes history $h^{\bar{t}+1} = g \dots gbg$ in Phase III, and we want to compute her beliefs at period $\bar{t} + 1$ conditional on $h^{\bar{t}+1}$, namely $x^{\bar{t}+1}$. Recall our method for computing $x^{\bar{t}+1}$. We first compute a set of intermediate beliefs x^t for $t < \bar{t} + 1$. For any period τ , we compute $x^{\tau+1}$ from x^{τ} by conditioning on the event that "I was uninfected in period $\tau + 1$ " and that " $\mathcal{I}^{\tau+1} \leq M - 2$ " (\mathcal{I}^t is the random variable representing the number of infected people after period t). We do not use the information that "I remained uninfected after any period t with $\tau + 1 < t < \bar{t}$ ". This information is added later period by period, *i.e.*, only at period t we show that this method of computing beliefs is equivalent to the standard updating of beliefs conditioning on the entire history at once.

Let $\alpha \in \{0, \ldots, M-2\}$ and let $h^{t+1+\alpha}$ denote the $(t+1+\alpha)$ -period history $g \ldots gbg \stackrel{\alpha}{\ldots} g$. *g*. Recall that U^t denotes the event that *i* is uninfected at the end of period *t*. Let $b_t(g_t)$ denote the event that player *i* faced b(g) in period *t*. We introduce some additional notation.

- $I_{i,k}^{(t)}$ denotes the event $i < \mathcal{I}^t < k$, *i.e.*, the number of infected people at the end of t periods is at least i and at most k.
- $E^t_{\alpha} := I^t_{0,M-\alpha} \cap U^t$
- $E^{t+1}_{\alpha} := E^t_{\alpha} \cap I^{t+1}_{1,M-\alpha+1} \cap b^{t+1}$
- For each $\beta \in \{1, \dots, \alpha 1\}$, $E_{\alpha}^{t+1+\beta} := E_{\alpha}^{t+\beta} \cap I_{\beta+1,M-\alpha+\beta+1}^{t+1+\beta} \cap g^{t+1+\beta}$
- $E^{t+1+\alpha}_{\alpha} := E^{t+\alpha}_{\alpha} \cap g^{t+1+\alpha} = h^{t+1+\alpha}.$

Let H^t be a history of the contagion process up to period t. Let \mathcal{H}^t be the set of all H^t histories. \mathcal{H}^t_k denotes the set of t-period histories of the stochastic process where $\mathcal{I}^t = k$. We say $H^{t+1} \Rightarrow h^{t+1}$ if history H^{t+1} implies that I observed history h^{t+1} .

The probabilities of interest are $P(\mathcal{I}^{t+1+\alpha} = k \mid_{h^{t+1+\alpha}}) = P(\mathcal{I}^{t+1+\alpha} = k \mid_{E_{\alpha}^{t+1+\alpha}})$. We want to show that we can obtain the probabilities after $t + 1 + \alpha$ conditional on $h^{t+1+\alpha}$ by starting with the probabilities after t conditional on E_{α}^{t} and then let the contagion elapse one more period at a time conditioning on the new information, *i.e.*, adding the "local" information that player i observed g in the next period and that infected one more person.

Precisely, we want to show that, for each $\beta \in \{0, \ldots, \alpha\}$,

$$P(\mathcal{I}^{t+1+\beta} = k \mid_{E_{\alpha}^{t+1+\beta}}) \stackrel{?}{=} \frac{\sum_{i=1}^{M} P(i \stackrel{t+1+\beta}{\to} k \mid_{E_{\alpha}^{t+1+\beta}}) P(\mathcal{I}^{t+\beta} = i \mid_{E_{\alpha}^{t+\beta}})}{\sum_{j=1}^{M} \sum_{i=1}^{M} P(i \stackrel{t+1+\beta}{\to} j \mid_{E_{\alpha}^{t+1+\beta}}) P(\mathcal{I}^{t+\beta} = i \mid_{E_{\alpha}^{t+\beta}})}.$$

Fix $\beta \in \{0, \dots, \alpha\}$. For each $H^{t+1+\beta} \in \mathcal{H}^{t+1+\beta}$, let $H^{t+1+\beta,\beta}$ denote the unique $H^{t+\beta} \in \mathcal{H}^{t+\beta}$ that is compatible with $H^{t+1+\beta}$, *i.e.*, the restriction of $H^{t+1+\beta}$ to the first $t + \beta$ periods. Let $F^{1+\beta} := \{\tilde{H}^{t+1+\beta} \in \mathcal{H}^{t+1+\beta} : \tilde{H}^{t+1+\beta} \Rightarrow E_{\alpha}^{t+1+\beta}\}$. Let $F_k^{1+\beta} := \{\tilde{H}^{t+1+\beta} \in F^{1+\beta} \in F^{1+\beta} \in F^{1+\beta} \in \mathcal{H}_k^{t+1+\beta}\}$. Clearly, the $F_k^{1+\beta}$ sets define a "partition" of $F^{1+\beta}$ (one or more sets in the partition might be empty). Let $F_k^{\beta} := \{\tilde{H}^{t+1+\beta} \in F^{1+\beta} : \tilde{H}^{t+1+\beta,\beta} \in \mathcal{H}_k^{t+\beta}\}$. Clearly, also the F_k^{β} sets define a "partition" of $F^{1+\beta}$. Note that, for each pair $H^{t+1+\beta}, \tilde{H}^{t+1+\beta} \in F_k^{1+\beta} \cap F_i^{\beta}, P(H^{t+1+\beta} |_{H^{t+1,\beta}}) = P(\tilde{H}^{t+1+\beta} |_{\tilde{H}^{t+1,\beta}})$. Denote this probability by $P(F_i^{\beta} \stackrel{t+1+\beta}{\to} F_k^{1+\beta})$. Let $|i \stackrel{t+1+\beta}{\to} k|$ denote the number of ways in which *i* can transition to *k* at period $t + 1 + \beta$ consistently with $h^{t+1+\alpha}$ or, equivalently, consistently with $E_{\alpha}^{t+1+\beta}$. Clearly, this number is independent of the history that led to *i* people being infected. Now, $P(i \stackrel{t+1+\beta}{\to} k |_{E_{\alpha}^{t+1+\beta}}) = P(F_i^{\beta} \stackrel{t+1+\beta}{\to} F_k^{1+\beta})|i \stackrel{t+1+\beta}{\to} k|$. Then,

$$\begin{split} &P(\mathcal{I}^{t+1+\beta} = k \mid_{E_{\alpha}^{t+1+\beta}}) = \\ &= \sum_{H^{t+1+\beta} \in \mathcal{H}_{k}^{t+1+\beta}} P(H^{t+1+\beta} \mid_{E_{\alpha}^{t+1+\beta}}) = \sum_{H^{t+1+\beta} \in F_{k}^{1+\beta}} P(H^{t+1+\beta} \mid_{E_{\alpha}^{t+1+\beta}}) \\ &= \sum_{H^{t+1+\beta} \in F_{k}^{1+\beta}} \frac{P(H^{t+1+\beta} \cap E_{\alpha}^{t+1+\beta})}{P(E_{\alpha}^{t+1+\beta})} = \frac{1}{P(E_{\alpha}^{t+1+\beta})} \sum_{H^{t+1+\beta} \in F_{k}^{1+\beta}} P(H^{t+1+\beta}) \\ &= \frac{1}{P(E_{\alpha}^{t+1+\beta})} \sum_{i=1}^{M} \sum_{H^{t+1+\beta} \in F_{k}^{1+\beta} \cap F_{i}^{\beta}} P(H^{t+1+\beta} \mid_{H^{t+1+\beta},\beta}) P(H^{t+1+\beta,\beta} \mid_{E_{\alpha}^{t+\beta}}) P(E_{\alpha}^{t+\beta}) \\ &= \frac{1}{P(E_{\alpha}^{t+1+\beta})} \sum_{i=1}^{M} \sum_{H^{t+1+\beta} \in F_{k}^{1+\beta} \cap F_{i}^{\beta}} P(H^{t+1+\beta} \mid_{H^{t+1+\beta,\beta}}) P(H^{t+1+\beta,\beta} \mid_{E_{\alpha}^{t+\beta}}) P(E_{\alpha}^{t+\beta}) \\ &= \frac{P(E_{\alpha}^{t+\beta})}{P(E_{\alpha}^{t+1+\beta})} \sum_{i=1}^{M} P(F_{i}^{\beta} \stackrel{t+1+\beta}{\to} F_{k}^{1+\beta}) \sum_{H^{t+1+\beta} \in F_{k}^{1+\beta} \cap F_{i}^{\beta}} P(H^{t+1+\beta,\beta} \mid_{E_{\alpha}^{t+\beta}}), \end{split}$$

which equals

$$= \frac{P(E_{\alpha}^{t+\beta})}{P(E_{\alpha}^{t+1+\beta})} \sum_{i=1}^{M} P(F_{i}^{\beta \ t+1+\beta} \ F_{k}^{1+\beta}) | i \stackrel{t+1+\beta}{\to} k| \sum_{H^{t+\beta} \in \mathcal{H}_{i}^{t+\beta}} P(H^{t+\beta} |_{E_{\alpha}^{t+\beta}})$$

$$= \frac{P(E_{\alpha}^{t+\beta})}{P(E_{\alpha}^{t+1+\beta})} \sum_{i=1}^{M} P(F_{i}^{\beta \ t+1+\beta} \ F_{k}^{1+\beta}) | i \stackrel{t+1+\beta}{\to} k| P(\mathcal{I}^{t+\beta} = i |_{E_{\alpha}^{t+\beta}})$$

$$= \frac{P(E_{\alpha}^{t+\beta})}{P(E_{\alpha}^{t+1+\beta})} \sum_{i=1}^{M} P(i \stackrel{t+1+\beta}{\to} k |_{E_{\alpha}^{t+1+\beta}}) P(\mathcal{I}^{t+\beta} = i |_{E_{\alpha}^{t+\beta}})$$

It is easy to see that $P(E_{\alpha}^{t+1+\beta}) = \sum_{j=1}^{M} P(E_{\alpha}^{t+\beta}) \sum_{i=1}^{M} P(i \xrightarrow{t+1+\beta} j|_{E_{\alpha}^{t+1+\beta}}) P(\mathcal{I}^{t+\beta} = i|_{E_{\alpha}^{t+\beta}})$ and the result follows.

Similar arguments apply to histories $h^{t+1+\alpha} = g \dots gbg$. \therefore where player *i* observes both *g* and *b* in the α periods following the first triggering action.

A.3 Sequential Equilibrium - Consistency of Beliefs

In the construction of the sequential equilibrium, we focused only on sequential rationality of strategies. In this section, we address the issue of consistency of beliefs. Recall our two assumptions on beliefs.

- i) **Assumption** 1: If a player observes a triggering action, then he believes that some seller deviated in the first period of the game, and since then play has proceeded as prescribed by the strategies.
- ii) **Assumption** 2: If a player observes a history not consistent with the above beliefs, he will think that some player in the other community has made a mistake; the probability of this mistake being independent of whether the responsible of the mistake was infected or uninfected.this player will think that there have been as many mistakes by the players in the other community as needed to explain the history at hand.

We need to prove the consistency of these beliefs.

Proof. Fix any player *i*. Perturb the equilibrium strategies as follows. Fix $\varepsilon > 0$ small. In any period *t* of the game, each player plays the prescribed equilibrium action with probability $(1 - \varepsilon^t)$, and plays the wrong action with probability ε^t . We need to show that, given any *t*-period private history off-path for player *i*, as perturbations vanish ($\varepsilon \rightarrow 0$), the strategies

converge to the prescribed equilibrium, and player i believes that, with probability 1, the first deviation occurred at t = 1. Moreover, we require that this convergence in beliefs be uniform in t.

Consider a history h^{t^*} , late in Phase III $(t^* \gg \dot{T} + \ddot{T})$ such that player *i* observes the first triggering action at time t^* , *i.e.*, $h^{t^*} = g \dots gb$. Denote any sequence of matches up to period t^* by H^{t^*} . We say $H^{t^*} \implies h^{t^*}$, to mean that the sequence of matches H^{t^*} is consistent with history h^{t^*} being observed. Further, let $H^{t^*}(\tau)$ denote a realization of the matching technology, that is consistent with the observed history $h^{t^*} = g \dots gb$, and where the first triggering action occurred at period τ . Clearly, there exists a corresponding event (sequence of matches), denoted by $\tilde{H}^{t^*}(\tau)$, that satisfies the following:

- The first triggering action occurred at t = 1,
- The two players who got infected at period t = 1 were matched to each other in each period until τ , and
- The realized matches in $\tilde{H}^{t^*}(\tau)$ and $H^{t^*}(\tau)$ are the same from period τ until t^* .

We first show that, conditional on observed history h^{t^*} , player *i* assigns arbitrarily higher probability to the event $\tilde{H}^{t^*}(\tau)$ compared to the event $H^{t^*}(\tau)$.

$$\frac{\mathcal{P}(\tilde{H}^{t^*}(\tau) \mid h^{t^*})}{\mathcal{P}(H^{t^*}(\tau) \mid h^{t^*})} = \frac{\mathcal{P}(\tilde{H}^{t^*}(\tau) \cap h^{t^*})}{\mathcal{P}(H^{t^*}(\tau) \cap h^{t^*})} = \frac{\varepsilon(1-\varepsilon)^{M-1}\frac{M-1}{M}\left[\prod_{k=2}^{\tau}\frac{1}{M}(1-\varepsilon^k)^M\right]X}{(1-\varepsilon)^M\left[\prod_{k=2}^{\tau-1}(1-\varepsilon^k)^M\right]\varepsilon^{\tau}(1-\varepsilon^{\tau})^{M-1}\frac{1}{M}X},$$

where X is the probability of the event (matches) that was realized from period τ until t^* in the events $\tilde{H}^{t^*}(\tau)$ and $H^{t^*}(\tau)$. The above expression simplifies to

$$\frac{1-\varepsilon^{\tau}}{1-\varepsilon}\frac{M-1}{M}\frac{1}{M}\frac{1}{(\varepsilon M)^{\tau-1}}$$

Clearly, for a fixed M, the above expression goes to infinity as ε goes to zero, uniformly in τ . To summarize, we have shown above that, for any possible sequence of matches $H^{t^*}(\tau)$ that is consistent with the observed history h^{t^*} and where the first triggering action occurred at some period $\tau \neq 1$, there exists a corresponding sequence of matches $\tilde{H}^{t^*}(\tau)$ which is also consistent with h^{t^*} , where the first triggering action occurred at t = 1, and that is arbitrarily more likely than $H^{t^*}(\tau)$. This implies in particular, that on observing a triggering action, a player will assign arbitrarily high probability to the event that the first deviation was by a seller in the first period of the game. To see why, note that

$$\frac{\mathbf{P}(\text{First dev. at } t=1 \mid h^{t^*})}{\mathbf{P}(\text{First dev. at } t\neq 1 \mid h^{t^*})} = \frac{\mathbf{P}(\text{First dev. at } t=1 \mid h^{t^*})}{\sum_{\tau=2}^{t^*} \sum_{H^{t^*}(\tau): H^{t^*}(\tau) \implies h^{t^*}} \mathbf{P}(H^{t^*}(\tau))} \geq \frac{\sum_{\tau=2}^{t^*} \sum_{H^{t^*}(\tau): H^{t^*}(\tau) \implies h^{t^*}} \mathbf{P}(\tilde{H}^{t^*}(\tau))}{\sum_{\tau=2}^{t^*} \sum_{H^{t^*}(\tau): H^{t^*}(\tau) \implies h^{t^*}} \mathbf{P}(H^{t^*}(\tau))}$$

We know now that the above expression goes to infinity as ε goes to zero, uniformly in τ . Consequently, player *i* on observing h^{t^*} assigns arbitrarily high probability to the first deviation having occurred in the first period of the game. Exactly similar arguments can be used for other histories h^{t^*} with t^* not late in Phase III.

We omit here the proof for the cases covered by Assumption 2. As mentioned earlier, to prove consistency in these cases, it suffices to assume that mistakes are infinitely less likely than the event that a seller deviated in period 1.

A.4 Uncertainty about Calendar Time

In this section, we investigate what happens in setting in which players are not sure about the calendar time or about the precise timing of the different phases. We conjecture that a modification of our strategies would be robust to the introduction of *small* uncertainty about timing. To provide some intuition for this conjecture, we consider an altered environment where players are slightly uncertain about the timing of the different phases. For the purpose of this example, we restrict attention to the product-choice game and try to sustain a payoff arbitrarily close to the efficient outcome (1, 1).

Given a product-choice game and community size M, we choose \dot{T} and \ddot{T} appropriately. At the start of the game, each player receives an independent, noisy but informative signal about the timing of the trust-building phases (values of \dot{T} and \ddot{T}). Each player receives a signal $\omega_i = (\dot{d}_i, \dot{\Delta}_i, \ddot{d}_i, \ddot{\Delta}_i)$, which is interpreted as follows. Player i on receiving signal ω_i can bound the values of \dot{T} and \ddot{T} with two intervals; *i.e.*,she knows that $\dot{T} \in [\dot{d}_i, \dot{d}_i + \dot{\Delta}_i]$ and $\ddot{T} \in [\ddot{d}_i, \ddot{d}_i + \dot{\Delta}_i]$. The signal generation process is described below. The idea is that players are aware that there are two trust-building phases followed by the target payoff phase. Moreover, signals are informative in that the two intervals are non-overlapping and larger intervals (imprecise estimates) are less likely than smaller ones.

i) Δ_i is drawn from a Poisson distribution with parameter γ
, and then d_i is drawn from the discrete uniform distribution over [T
 - Δ_i, T
 - Δ_i + 1,...,T]. If either 1 or T
 lie in the resulting interval [d_i, d_i + Δ_i], then Δ_i and d_i are drawn again.

ii) After ∆_i and d_i are drawn as above, ∆_i is drawn from a Poisson distribution with parameter ÿ. Finally, d_i is drawn from the discrete uniform distribution over [T – ∆_i, T – ∆_i + 1,..., T]. If the resulting interval [d_i, d_i + ∆_i] overlaps with the first interval [d_i, d_i + ∆_i] (*i.e.*, d_i + ∆_i ∈ [d_i, d_i + ∆_i]), then d_i is redrawn.

In this setting, players are always uncertain about the start of the trust-building phases and precise coordination is not possible. However, we conjecture that with a modification to our equilibrium strategies, sufficiently patient players will be able to attain payoffs arbitrarily close to (1, 1), provided the uncertainty about timing is very small. We describe below the modified strategies.

- Equilibrium play: Phase I: Consider any player *i* with signal $\omega_i = (\dot{d}_i, \dot{\Delta}_i, \ddot{d}_i, \ddot{\Delta}_i)$. During the first $\dot{d}_i + \dot{\Delta}_i$ periods, he plays the cooperative action $(Q_H \text{ or } B_H)$. Phase II: During the next $\ddot{d}_i (\dot{d}_i + \dot{\Delta}_i)$ periods, he plays as if he were in Phase II, *i.e.*, a seller plays Q_L and a buyer B_H . Phase III: For the rest of the game (*i.e.*, from period \ddot{d}_i on), he plays the efficient action $(Q_H \text{ or } B_H)$.
- **Off Equilibrium play:** As before, a player can be in one of two moods: *uninfected* and *infected*, with the latter mood being irreversible. We define the moods a little differently. At the beginning of the game all players are uninfected. Any action (observed or played) that is not consistent with play that can arise on-path, given the signal structure, is called a deviation. We classify deviations into two types. Deviations that definitely entail a short-run loss for the deviating player are called *non-triggering* deviations (e.g. a buyer deviating in the first period of the game). Any other deviation is called a *triggering* deviation (*i.e.*, these are deviations that with positive probability give the deviating player a short-run gain). A player who is aware of a triggering deviation is said to be infected. Below, we specify off-path behavior. We do not completely specify play after all possible histories, but we think the description below will suffice to provide the intuition behind the conjecture.

An uninfected player continues to play as if on-path. An infected player acts as follows.

Deviations observed before d_i + Δ_i: A buyer i who gets infected before period d_i switches to her Nash action forever at some period between d_i and d_i + Δ_i when she believes that enough buyers are infected and have switched as well. Note that buyers cannot get infected between d_i and d_i + Δ_i, since any action

observed during this period is consistent with equilibrium play (*i.e.*, a seller j playing Q_L at time $t \in [\dot{d}_i, \dot{d}_i + \dot{\Delta}_i]$ may have received a signal such that $\dot{d}_j + \dot{\Delta}_j = t$).

A seller *i* who faces B_L before period \dot{d}_i , ignores it (this is a non-triggering deviation, as the buyer must still be in Phase I, which means that the deviation entails a short-term loss for her). If a seller observes B_L between periods \dot{d}_i and $\dot{d}_i + \dot{\Delta}_i$, he will switch to Nash immediately.

- Deviations observed between d_i + Δ_i + 1 and d_i: A player who gets infected in the time interval [d_i + Δ_i + 1, d_i] will switch to the Nash action forever from period d_i. Note that buyers who observe Q_H ignore such deviations as they are non-triggering.
- Deviations observed after \ddot{d}_i : A player who gets infected after \ddot{d}_i switches to the Nash action immediately and forever.

We argue below why these strategies can constitute an equilibrium by analyzing some important histories.

Incentives of players on-path: If triggering deviations are definitely detected and punished by Nash reversion, then, for sufficiently patient players, the short-run gain from a deviation will be less than the long-term loss in payoff from starting the contagion. So, we need to check that all deviations are detected (though, possibly with probability < 1 in this setting), and that the resultant punishment that is triggered is enough to deter the deviation.

- Seller *i* deviates (plays Q_L) at t = 1: With probability 1, his opponent will detect the deviation, and ultimately his payoffs will drop to a very low level. A sufficiently patient player will therefore not deviate.
- Seller *i* deviates at 2 ≤ t < d_i + ∆_i: With positive probability, his opponent *j* has d_j > t, and will detect the deviation and punish him. But, because of the uncertainty about the values of *T* and *T*, with positive probability, the deviation goes undetected and unpunished. The probability of detection depends on the time of the deviation (detection is more likely earlier than later, because early on, most players are outside their first interval). So, the deviation gives the seller a small current gain with probability 1, but a large future loss (from punishment) with probability less than 1. If the uncertainty about *T* and *T* is small enough (*i.e.*, signals are very precise), then

the probability of detection (and future loss) will be high. For a sufficiently patient player, the current gain will then be outweighed by the expected future loss.

- Seller *i* deviates (plays Q_L) at t ≥ *d*_i: With positive probability, his opponent *j* has signal *d*_j = *d*_i, and will detect the deviation.
- All deviations by buyers (playing B_L) are detected, since B_L is never consistent with equilibrium play. If a buyer plays a triggering deviation B_L, she knows that with probability 1, her opponent will start punishing immediately. The buyer's incentives in this case are exactly as in the setting without uncertainty. For appropriately chosen T and T, buyers will not deviate on-path.

Optimality of Nash reversion off-path: Now, because players are uncertain about the true values of \dot{T} and \ddot{T} , there are periods when they cannot distinguish between equilibrium play and deviations. We need to consider histories where a player can observe a triggering deviation, and check that it is optimal for him to start punishments.

We assume that players on observing a deviation believe that some seller deviated in the first period of the game. This assumption on beliefs serves the same purpose as before, *i.e.*, conditional on observing a deviation, when it is time to start playing the Nash action, players will think that enough people are already infected for the Nash action to be optimal.

First, consider incentives of a seller *i*. We argue that a seller who deviates at t = 1 will find it optimal to continue deviating. Further, a seller who gets infected by a triggering deviation at any other period will find it optimal to revert immediately to the Nash action.

- Suppose seller i deviates at t = 1, and plays Q_L. He knows that his opponent will switch to the Nash action at most at the end of her first interval (close to the true T with high probability), and the contagion will spread exponentially from some period close to the true T + T. Thus, if seller i is sufficiently patient, his continuation payoff will drop to a very low level after T + T, regardless of his play in his Phase I (until period d_i + Δ_i). Therefore, for a given M, if T is large enough (and so d_i + Δ_i is large), the optimal continuation strategy for seller i will be to continue playing Q_L.
- Seller i observes a triggering deviation of B_L: If a seller observes a triggering deviation of B_L by a buyer (in Phase II), he thinks that the first deviation occurred at period 1, and by now all buyers are infected. Since, his play will have a negligible effect on the contagion process, it is optimal to play Q_L.

Now, consider the incentives of a buyer.

- Buyer i observes Q_L at 1 ≤ t < d_i: This must be a triggering deviation. A seller j should switch to Q_L only at the end of his first interval (d_j + Å_j), and this cannot be the case, because then, the true T does not lie in player i's first interval. On observing this triggering deviation, the buyer believes that the first deviation occurred at t = 1 and the contagion has been spreading since then. Consequently, she will switch to her Nash action forever at some period between d_i and d_i + Å_i when she begins believing that enough other buyers are infected and have switched as well (It is easily seen that at worst, buyer i will switch at period d_i + Å_i.).
- Buyer *i* observes Q_L at t ≥ *d_i* + *A_i*. Since *i* is at the end of her second interval, she knows that every rival must have started his second interval, and should be playing Q_H. So, this is a triggering deviation. She believes that the first deviation occurred at t = 1, and so most players must be infected by now. This will make Nash reversion optimal for her.

Note that in any other period, buyers cannot distinguish a deviation from equilibrium play.

- i) Any action observed by buyer i in her first interval (i.e., for t such that d_i ≤ t < d_i + ∆_i) is consistent with equilibrium play. A seller j playing Q_H could have got signal d_j > t, and a seller playing Q_L could have got signal d_j + ∆_j ≤ t.
- ii) Any action observed by buyer *i* between her two intervals (*i.e.*, at *t* such that $\dot{d}_i + \dot{\Delta}_i \leq t < \ddot{d}_i$) is consistent with equilibrium play. Q_L is consistent with a seller *j* who got $\dot{d}_j + \dot{\Delta}_j \leq t$, and Q_H is consistent with a seller with signal such that $t < \dot{d}_j + \dot{\Delta}_j$.
- iii) Any action observed by buyer *i* within her second interval (*i.e.*, at *t* such that $\ddot{d}_i \leq t < \ddot{d}_i + \ddot{\Delta}_i$) is consistent with equilibrium play. Q_L is consistent with a seller *j* who got $\ddot{d}_j > t$ (say $\ddot{d}_j = \ddot{d}_i + \ddot{\Delta}_i$), and Q_H is consistent with a seller with signal such that $\ddot{d}_j < t$ (say *j* got the same signal as buyer *i*).