

## Peer Review File

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### Reviewer A

The authors have created a manuscript reviewing the primary health care response to COVID-19 across Africa.

1. Africa contains 54 countries and a current population of 1.2 billion people. It can be very difficult to describe practice patterns within one country, much less one continent. To that end, what is the main purpose of this review? The authors say that they “aim to study available national primary care guidelines....and investigate how these guidelines assist primary care facilities.” Can the authors be more specific or give ideas about their goals? That would help to make the rest of the manuscript more significant to readers.

**Reply 1:** We have changed the title to **COVID 19: COMPARISON OF THE NATIONAL COVID-19 GUIDELINES IN AFRICA**

The goal of this study is to compare the various ways that African nations have responded to the epidemic at the National level. By exchanging experiences, this helps with continual attempts to comprehend and adjust to the needs of the COVID-19 epidemic. Collective experiences such as this support continuous endeavours to comprehend and adjust to the complexities imposed by the COVID-19 pandemic.

Changes in text: Please see Page 1, line 1.

2. Related to the above comment, the authors should note that Africa is not monolithic. Sub-Saharan Africa will have different cultural and geographic challenges compared to the northern countries, for example. One can imagine how difficult it would be to compare the response to COVID-19 in New York compared to Mississippi, and that is just in one country. It would be helpful to note the consequential differences in different parts of Africa.

**Reply 2:** This is actually one of the limitations of this study. Indeed, Africa is not monolithic, however most of the states in African countries do not function independently. They all follow the guidelines provided at the national level. That was why we had to study the National published guidelines, as there are no available health information data that shows the individual response of communities to the pandemic.

3. The authors should also note differences based on culture, religion, urban vs. rural farm areas, etc. Many of the “responses” that they listed were not necessarily available to all residents in each country.

**Reply 3:** We have modified the text.

Changes in text: Line 115 and 136

4. The authors should give much more detail about their search strategy. They appropriately listed their sources, such as PubMed and the CDC. But approximately how many articles/sources did they use? Were there dozens? Thousands? Were most of the sources published articles or websites from ministries of health? More detail would be helpful.

**Reply 4:** We used guidelines from a random sample of 15 African countries out of 54 countries in Africa, sources were majorly from official websites from ministries of health. These countries were Benin, Rwanda, Sudan, Ghana, Egypt, Kenya, Gambia, South-Africa, Algeria, Malawi, Nigeria, Ethiopia, Uganda, Tunisia, and Zimbabwe. To allow for a well-rounded comparison, we included articles and guidelines that focused on these domains: Coordination, planning and monitoring, Policy framework, Risk communication, Surveillance, rapid response teams. Infection prevention and control  
Changes in text: Line 62

5. What was the course of COVID-19 in countries across Africa over the first 12 months? The authors give a nice and brief description of the first case (Egypt) and subsequent next few weeks. But it would be helpful to know the results of the guidelines that they have listed. As an example, did sub-Saharan Africa have a different prevalence or number of reported cases compared to the northern countries? Were there differences in rates in the cities versus rural areas?

**Reply 5:** The guidelines led to a decrease in the number of cases  
Changes in text: Page 3, Line 85

6. The section on “Infection control” could be expanded more. Most of the recommendations were seen in almost every country worldwide. Were there specific recommendations in any African countries that were particularly unique compared to the worldwide response?

**Reply 6:** Several African nations implemented nationwide or partial lockdowns and nighttime curfews in order to significantly limit non-essential mobility. The use of these procedures may have directly contributed to the deceleration of the COVID-19 outbreak in Africa since the first confirmation of the first case

## **Reviewer B**

Line 67 - The aim of this study was ambitious and not achieved in this article. Consider reframing to 'available national guidelines' instead of 'primary care guidelines'

**Reply:** The title has been changed to COVID 19: COMPARISON OF THE NATIONAL COVID-19 GUIDELINES IN AFRICA

Line 70 - In the methods section you need to clarify which countries were included in this study? All African countries? The authors also need to explain how data was analyzed in the methods as this is not currently outlined. What strategies to reduce bias for this qualitative review were put in place?

**Reply:** We used guidelines from a random sample of 15 African countries out of 54

countries in Africa, sources were majorly from official websites from ministries of health. These countries were Benin, Rwanda, Sudan, Ghana, Egypt, Kenya, Gambia, South-Africa, Algeria, Malawi, Nigeria, Ethiopia, Uganda, Tunisia, and Zimbabwe. To allow for a well-rounded comparison, we included articles and guidelines that focused on these domains: Coordination, planning and monitoring, Policy framework, Risk communication, Surveillance, rapid response teams. Infection prevention and control

Changes in text: Page 2, line 62

Line 80 - The initial response isn't relevant to primary care, as with surveillance and contact tracing. There is no link here with these sections and primary care.

**Reply:** The title has been modified to COVID 19: COMPARISON OF THE NATIONAL COVID-19 GUIDELINES IN AFRICA

Line 82 - what kind of students? The relevance of this statement in the abstract and in Line 82 is not clear. Are they university or school students?

**Reply:** International University students

There was no discussion of limitations of this paper and should be included.

**Reply:** Accurate information regarding COVID-19 at the community level could not be obtained due to limited available health information data.