

Review of: "Post-Pandemic Reflections from Sub-Saharan Africa: What We Know Now That We Wish We Knew Then"

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REVIEWER'S REPORT

Post-Pandemic Reflections from Sub-Saharan Africa: What We Know Now That We Wish We Knew Then

Preamble: The authors focused on lessons learned from the COVID-19 Response by two countries in Sub-Saharan Africa (SSA). The article is, in the words of the authors, a narrative view, and little empirical evidence was provided. However, they posited that the response to the pandemic could have been better based on four (4) propositions, namely,

1. To separate Science from Politics
2. To separate Medical Practice from Business
3. To ensure Public Health Policies are devoid of untested behaviors
4. And to Formulate Policies and Preventive Practices that are distinct to Societies, Nations, and Cultures. It is difficult to disagree with this retrospective as a critique of decision-making during the pandemic emergency that could generate insights capable of making things better the next time around. More so as the claims of the authors aligned with what a few researchers and informed observers [1-7] were advocating over the course of the COVID-19 Pandemic emergency but were largely unheeded.

Nevertheless, the following comments are made for the authors to consider in making the narrative more comprehensive and balanced.

Observations:

1. The COVID-19 pandemic neither happened SUDDENLY nor UNEXPECTEDLY in SSA, given the lead time of about three months before the first case was documented in both countries after pictures of overwhelmed ICUs, hospitals, overflowing morgues, crematoria, churches, and deserted streets in Europe and North America had been streaming round the world almost on a daily basis.
2. Early reports [3-4, 8-9] by the *World Health Organization (W.H.O)* and others before the first case was documented in either country, and as the pandemic was unfolding, defined the foreseeable risks, indicating SSA had a demographic advantage, with many [1, 5,6] calling for a response tailored to local needs within the resources available.
3. Specifically, the **low mortality pattern of COVID-19** in SSA was evident as far back as 2020, the worst year of the pandemic [11, see also Reference 9 in MS under Review](if "the worst year of the pandemic" is a specific reference).

4. Indeed, one of the first reports [10, 11, and 12] of SARS-CoV-2 antibody levels pre-vaccines approaching “herd” population immunity capable of protecting everyone, including vulnerable groups, emanated from SSA in 2020, almost after the first wave.
5. What now seems baffling is the ramping up of COVID-19 vaccination that targets teenagers/young people at little to no risk as routine immunization when the global emergency has been declared over everywhere [13-14, 15].
6. This policy direction following foreign aid seems a complete repudiation of available data showing a better way at a lower cost, particularly when other public health conditions in SSA that kill far more than COVID-19 remain underfunded [16] .
7. Multilateral organizations [17], including donor agencies, do positively influence public policies that work for SSA, but not always.
8. Indeed, one public scholar, a virologist involved in the national response to COVID-19 of one of the countries, believed the national strategy was the wrong choice from the available options, *in gullibly following foreign standards*[18].

The wider national response team in several SSA countries included specialized government agencies in the health sector, with some initially endorsing untested/dangerous remedies as COVID-19 treatments without evidence of safety or efficacy in the local population [19].

1. Some would argue that what SSA truly needs more than anything else, as this pandemic showed in the region and elsewhere, is greater *sovereignty and self-determination* in decision-making at the country level on what is best for citizens based on their own evidence and with resources available, rather than handouts or unquestionably following a unified and globalized approach of *one-size-fits-all*, which not all who signed up to it complied with in a way that indicated some lives mattered more than others [16].
2. Why not call for an independent public inquiry of a judicial nature, just as many countries are doing, for tough lessons to be learnt for when the next pandemic comes along, especially as the emergency response occurred within the operating system of every country; and sometimes this includes CORRUPTION [20-23].
3. Finally, academics and business owners as government appointees who strongly disagree with political leadership that put the public good at risk, waiting until after the event and a new administration is in place before publicly criticizing that with which they were part of, can be viewed in bad faith.

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