# **Peer Review Report**

# Review Report on A descriptive comparison of mass testing during the COVID-19 pandemic in Montreal, Paris, Bamako, and Recife using the TIDieR-PHP framework

Original Article, Int J Public Health

Reviewer: Michael J. Deml Submitted on: 13 Jul 2022 Article DOI: 10.3389/ijph.2022.1604992

# **EVALUATION**

# **Q1** Please summarize the main findings of the study.

The study used the TIDieR-PHP checklist to describe mass COVID-19 testing in four cities from Canada, France, Mali, and Brazil. Findings show that there were similarities and differences in testing between the 4 cities, which were related to capacity, implementation timelines, healthcare systems, governance, and access to resources.

#### **Q 2** Please highlight the limitations and strengths.

The strengths are the descriptive elements that follow the TIDier-PHP checklist for interventions. The limitations are noted by the authors in the discussion section.

Q 3 Please provide your detailed review report to the authors. The editors prefer to receive your review structured in major and minor comments. Please consider in your review the methods (statistical methods valid and correctly applied (e.g. sample size, choice of test), is the study replicable based on the method description?), results, data interpretation and references. If there are any objective errors, or if the conclusions are not supported, you should detail your concerns.

Overall, this was an interesting manuscript that looks at an important element of the COVID-19 response and provides descriptive elements from each of the 4 study settings.

I have several suggestions to improve the quality of the findings as they are presented.

The abstract could be improved to more explicitly state the methods that the authors used to collect their data (i.e. review of grey literature, interviews with key informants). The results presented in the abstract could be further detailed and go beyond stating that there were similarities and differences between the 4 cities (this is not surprising and is rather self-explanatory).

It would be helpful in the introduction for the authors to state which types of tests they are looking at (i.e. PCR, rapid antigen tests). Is this important to know? Why or why not?

The introduction could also better contextualize the epidemiological situation in each of the cities and include information. It could also be interesting for the authors to comment on the procurement of testing supplies more extensively.

It would be helpful for the reader if the authors further justified the choice of the study settings besides simply stating that they "represent different contexts and continents."

In the methods, it would be helpful for the authors to justify their preference for the TIDieR-PHP framework as opposed to the other possible guidelines they mention. Why use this one and not the authors?

Why was August 22, 2020 chosen as a cut-off date? This should be explicitly stated.

The methods for the interviews need to be more rigorously reported. What do the authors mean by "nondirective interviews"? Who conducted the interviews? What types of interviews did researchers ask participants? How long did they last? How many interviews were there per country? How were participants recruited? In the reporting of the results, it would also be helpful to know how useful these interviews were and what information the interviews allowed authors to attain.

In the Results section, Table 1 should be explicitly introduced in the text and its contents described.

In the discussion section, I am wondering if for the 2nd paragraph, another limitation for testing would also be the overarching top-level strategies around testing \*i.e. testing only target groups? It would be helpful if the authors could comment on this.

In the limitations that the authors mention "the same amount of information and detail was not available for each city in terms of the intervention description and there was no standard approach to reporting information. It was difficult to find specific information regarding the SARS-CoV-2 testing processes...". I am wondering then why the authors did not ask study participants about this information during the interviews? This would be a research limitation and not a limitation about a lack of information in the grey literature.

The conclusions presented in the manuscript should not focus solely on the framework the authors used but rather on the study's results. What can the authors conclude about the study findings that the framework allowed them to understand? If the authors want to focus on the framework itself, then I would suggest they compare it to the other possible framework/tools they mentioned in the Methods section.

## PLEASE COMMENT

# **Q** 4 Is the title appropriate, concise, attractive?

I would suggest adding that the descriptions are at a city level. It currently suggests that they are country comparisons.

## Q 5 Are the keywords appropriate?

Yes

# Q 6 Is the English language of sufficient quality?

Yes, with some minor suggestions:

- In the introduction, line 32 "who" should be removed

- Consistency with how numbers larger than 999 are reported [1000 vs. 1,0000] and the reporting of date formats [22 August 2020, August 22, 2020, August 22nd, 2020]. In other words, choose 1 format and be consistent.

- Line 392, "In consequence" - please find another transition

- Reporting of date formats in the figures (see my response to Q7 below) [22 August 2020, August 22, 2020, August 22nd, 2020]



No.

QUALITY ASSESSMENT		
Q 9 Originality		
Q 10 Rigor		
Q 11 Significance to the field		
Q 12 Interest to a general audience		
Q 13 Quality of the writing		
Q 14 Overall scientific quality of the study		
REVISION LEVEL		
Q 15 Please make a recommendation based on your comment	s:	
Major revisions.		

Yes