

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	COVID-19 prevention practices in urban setting during early introduction of the disease: results from community survey in SNNP Region, Ethiopia
AUTHORS	Endriyas, Misganu; Kawza, Aknaw; Alano, Abraham; Hussen, Mamush; Shibru, Endashaw

VERSION 1 – REVIEW

REVIEWER	Abera, Hiwot Hawassa University
REVIEW RETURNED	31-Dec-2020

GENERAL COMMENTS	<p>This is a timely study with adequate sample size and heterogeneity. But it needs a lot of language editing. You need to fulfil all the points indicated in the STROBE guideline, beside the BMJ guidelines /authorship and structured discussion/ when it is applicable. I have commented in detail and highlighted in the draft pdf document on areas that need improvement and clarification. Please look at your references and try to site them in their appropriate location. I suggest that you add similar citations from other African countries for the discussion part.</p> <p>I have a reservation on the Authors list, can you look at the comments I gave in the document?</p> <p>- The reviewer provided a marked copy with additional comments. Please contact the publisher for full details.</p>
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REVIEWER	Chung, Sheng-Chia The Farr Institute of Health Informatics Research and Institute of Health Informatics, University College London
REVIEW RETURNED	04-Jan-2021

GENERAL COMMENTS	<p>Thank you for the helpful and informative study. The reviewer hopes to suggest some revision in the manuscript for the authors to consider.</p> <p>Major comments: The manuscript lacks the statistical analysis session in the method for the reviewer to evaluate the analytical rigour. It will be helpful to add the statistical analysis and describe the statistics (COR, AOR) and their use in full.</p> <p>- The extent of missingness to be described (missingness in questions answered and non-respondent, if the majority of the questionnaire is unanswered would it be considered as a valid response?) reason for missing and management of missing value to be discussed in light of missingness in the response.</p> <p>-It may be helpful to describe the eligibility criteria for the respondent.</p>
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	<p>-As the sampling method is not random, it may be helpful to cite relevant references for the sampling method used in the study and discuss its limitations in the discussion session of the manuscript.</p> <p>- As the survey instrument is not validated, it remains unclear the validity and reliability of the questionnaire and its scoring method. This should be addressed in the limitations in the discussion, and it may be helpful to include a copy of the study questionnaire in the supplementary appendix of the study.</p> <p>-Does the overall attitude has an impact on COVID-19 prevention practise?</p> <p>-The large variation in masks wearing is noticeable, will the practise improved if hand-made face covering can be encouraged for use. It will be helpful to have a paragraph in the discussion on the current policy/regulations in Ethiopia for COVID prevention.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Dr. Hiwot Abera, Hawassa University

Comments to the Author:

This is a timely study with adequate sample size and heterogeneity. But it needs a lot of language editing. You need to fulfil all the points indicated in the STROBE guideline, beside the BMJ guidelines /authorship and structured discussion/ when it is applicable. I have commented in detail and highlighted in the draft pdf document on areas that need improvement and clarification.

Please look at your references and try to site them in their appropriate location. I suggest that you add similar citations from other African countries for the discussion part.

I have a reservation on the Authors list, can you look at the comments I gave in the document?

Please see attached document

Response

- Thank you very much for detail review and comments to improve the paper. Attempts are made to address all points, except few points that need explanations. And here are explanations:
 - Age category: we categorized age by every five points than decades as it was commonest way in most surveys like central statistical agency, measure evaluation etc.
 - Occupation category: we did not merge farmers and merchants as these occupations are different. Merchants are engaged in trade while farmers are engaged on farm/agriculture
 - Consideration of high risk groups in sampling: we tried to include sample from people staying at home and walking in town but did not consider such criteria.

Reviewer: 2

Dr. Sheng-Chia Chung, The Farr Institute of Health Informatics Research and Institute of Health Informatics

Comments to the Author:

Thank you for the helpful and informative study. The reviewer hopes to suggest some revision in the manuscript for the authors to consider.

Major comments:

- The manuscript lacks the statistical analysis session in the method for the reviewer to evaluate the analytical rigor. It will be helpful to add the statistical analysis and describe the statistics (COR, AOR) and their use in full.

Response

- Accepted and added.
- The extent of missingness to be described (missingness in questions answered and non-respondent, if the majority of the questionnaire is unanswered would it be considered as a valid response?) reason for missing and management of missing value to be discussed in light of missingness in the response.

Response

- Three respondents who had no information about COVID-19 were excluded from main analysis. We faced few missing in age of respondents (141 respondents) as they were not sure of it and we categorized it to “I don’t know”. Moreover, significant number of respondents didn’t disclose monthly income and we excluded it from analysis. Unwillingness to disclose monthly income might be due to the respondents’ fear that the data might be used by the revenue authority as data collection period was end of budget year in the country.
- It may be helpful to describe the eligibility criteria for the respondent.

Response

- Added (residing in the area for 6 months and age ≥ 18)
- As the sampling method is not random, it may be helpful to cite relevant references for the sampling method used in the study and discuss its limitations in the discussion session of the manuscript.

Response

- Sampling was systematic. For household survey, we selected only one household from a block. First household was selected randomly from a block and next household was selected from next block in similar position. For example, if third house from first block was selected, third house from next block was selected for next interview. And for outside interview, every other (third) person that a data collectors met in their way to next blocks were interviewed. Interval was minimized taking minimal movement in towns as there was state of emergency. Limitation related to allocation is now added.
- As the survey instrument is not validated, it remains unclear the validity and reliability of the questionnaire and its scoring method. This should be addressed in the limitations in the discussion, and it may be helpful to include a copy of the study questionnaire in the supplementary appendix of the study.

Response

- Accepted and added
- Does the overall attitude has an impact on COVID-19 prevention practice?

Response

- There was no statistical association
- The large variation in mask wearing is noticeable, will the practice improved if hand-made face covering can be encouraged for use. It will be helpful to have a paragraph in the discussion on the current policy/regulations in Ethiopia for COVID prevention.

Response

- There was big industrial park producing garments and currently, the park shifted to production of masks and we hope there will be no shortage if people are willing to use.

VERSION 2 – REVIEW

REVIEWER	Abera, Hiwot Hawassa University
REVIEW RETURNED	07-Mar-2021

GENERAL COMMENTS	The manuscript is now well written and incorporated the corrected version based on the comments and suggestion forwarded previously. However, there are few minor flaws like spaces and change of words, which I forwarded previously and still present in
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	<p>this draft. I have highlighted them in the pdf document again so that the final version would be more neat and clear for the readers. Due to the timely nature and the policy implication of the paper, especially for the developing world, I recommend this manuscript to be accepted.</p> <p>Please look at the attached pdf file (including the supplementary files) and address the issues before the final submission.</p> <p>- The reviewer provided a marked copy with additional comments. Please contact the publisher for full details.</p>
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REVIEWER	Chung, Sheng-Chia The Farr Institute of Health Informatics Research and Institute of Health Informatics, University College London
REVIEW RETURNED	22-Mar-2021

GENERAL COMMENTS	No further comments from the reviewer.
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