



**Figure 1 | Hypothesized modulators of relative SARS-CoV-2 epidemic risk in sub-Saharan Africa**

Factors hypothesized to increase (red) or decrease (blue) mortality burden or epidemic pace within sub-Saharan Africa, relative to global averages, are grouped in six categories or dimensions of risk (A-F). In this framework, epidemic pace is determined by person to person transmissibility (which can be defined as the time-varying effective reproductive number,  $R_t$ ) and introduction and geographic spread of the virus via human mobility.

SARS-CoV-2 mortality (determined by the infection fatality ratio, *IFR*) is modulated by demography, comorbidities (e.g., non-communicable diseases (NCDs)), and access to care. Overall burden is a function of direct burden and indirect effects due to, for example, disruptions in health services such as vaccination and infectious disease control. **Table S2** contains details and the references used as a basis to draw the hypothesized modulating pathways.