

Review of: "The Imperative of a Comprehensive One Health Approach for Mosquito-Borne Disease Control in Indonesia"

Craig Williams¹

¹ University of South Australia

Potential competing interests: No potential competing interests to declare.

This article purports to describe how a One Health approach to mosquito-borne disease control in Indonesia would be a significant advancement on the current situation. There would be broad consensus that a One Health approach would be a useful one to adopt in this setting. In this way, the general points that the paper makes are supportable and not contentious at all.

I began reading this paper with interest to see if I could appreciate the current status of mosquito-borne disease control in Indonesia, some of the major deficits in surveillance and control systems, and perhaps some examples of outbreaks that had illuminated these deficiencies. Unfortunately, this paper doesn't really provide much information about the current situation in Indonesia in terms of data, events, outbreaks, etc.

Where are the specific examples of animal health and human health data systems or environmental surveillance metrics that require unification? Where is the policy and procedural framework gap in Indonesia? Specific analyses and descriptions of such things would greatly advance this work.

In many ways, what has been written here could apply to many countries, such that simply substituting the word 'Indonesia' for another country name would not change the paper materially. So this paper does not add a lot to knowledge or understanding, which is a shame because it would seem that a focus on mosquito-borne disease surveillance and control and a One Health approach would be of value.

Some other aspects of the paper require improvement. Firstly, despite a bold proclamation of discussing a One Health approach, the paper doesn't actually deal with this issue in any great depth and instead discusses general aspects of quality public health interventions (which are very supportable but not really about One Health). Secondly, terms such as 'behavioural capacity', 'green education', and '...a single health approach' are not defined.

The paper would do well to examine other countries or regions where a One Health approach has been initiated and perhaps even established. Instead, this paper is heavily reliant upon self-citation and, as such, lacks broader perspective. This is reflective of the superficial treatment given to this topic, and as a consequence, there is little additional value presented here, which is a shame given the scale of public health problems facing countries such as Indonesia.

