

Review of: "Expanding Participatory Epidemiology to Explore Community Perceptions of Human and Livestock Diseases among Pastoralists in Turkana County, Kenya"

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Potential competing interests: No potential competing interests to declare.

REVIEWER'S COMMENTS

The whole paper was well structured. However, it needs some few corrections. The following areas need to be addressed.

Abbreviations

CCPP is correctly captured in the main text but wrongly captured in the abbreviation as CCP. Others such as HIV/AIDS, HAT, AAT and KENTEC are not included in the abbreviations but part of the main text.

Introduction

Paragraph 6 and 7 are not well linked. The ending part of paragraph 6 should contain information that dovetail to paragraph 7.

Results

Table 2. Nadapal as a location has Edeke akiring/brucellosis (H/L) as one of its diseases. However, this has been repeated with the same information for participant description and category.

Also, with Lokwamosing as location, there is no indication as to whether the disease (Lokul/bladder incompetence/urinary tract infection) is livestock(L) and/or human(H).

Table 3. The information under additional epidemiologic knowledge, "Palm fruit without out food results in diarrhoea" need to be rephrased. Also, to be checked under the same heading "mostly adults get siir."

Figure 3. Worms was classified as a disease. Can the authors indicate the type of worm instead of generalizing it. For instance, Guinea worm disease. Coughing and Edema were also classified as diseases. However, they are symptoms of diseases. The authors should confirm Edema as a disease or symptom.

Conclusion

The conclusion needs to be restructured again. A new idea was introduced into the conclusion which does not reflect in the main text. The new idea was then cited in the conclusion. The conclusion should be making reference to the findings

and not introducing new information.

From the authors words, "...which can directly contribute to the Turkana One Health strategy (2023-2027) objective of "strengthening surveillance, prevention, response and control interventions to safeguard One Health priorities" (Griffith et al., 2023)".