

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

Kohei Makita¹

¹ Rakuno Gakuen University

Potential competing interests: No potential competing interests to declare.

1. General comments

This participatory study was unique because it prioritized human, zoonotic, and animal disease together. At first, according to the manuscript, the questions on human diseases and animal diseases were prepared separately, but after the first FGD, it was adjusted to deal with these diseases together, which showed the importance of One Health. The methodology and presentations are clear. However, please add an interpretation of different disease priority according to the urban/rural/near refugee camp settings in the results and discussion. Other comments are listed in the specific comments. In the review process, below specific questions on discussion can be addressed in the other locations of the discussion section.

2. Specific comments

Study design and sample

In the explanation of the field test, please describe how many pre-test-FDGs and where they were conducted. In the current texts, it is a little bit confusing whether the explanations were for pre-test or actual FDGs.

The texts of Nadapal, Turkwel, Kakuma, and Lokwamosing are too small on the map in Figure 1. I can only find Kakuma. When you indicate the names of these places, please remove the names of other locations as they are confusing.

Discussion

2nd paragraph, Adjustment of the study methodology to directly compare combined human and livestock diseases after the first FGD: Which location was this? Did you adjust after the pre-test FGD? Did you revisit the first group to collect missed information? Is the fact that the first group was differently asked significant in the result of that particular group?

Third paragraph, last sentence, these factors should be thoroughly understood before implementing health policies: What do you recommend to understand? How do you deal with 'prioritization' in terms of different aspects? For example, participants are valuing stabilization of life in the context of ecology of humans and individual survival from disease at the same time in prioritization, which is preference in economics. Do you think it useful in measuring relative importance in each aspect such as household economy or community survival, and then overall priority?

Fifth paragraph, alignment of policy to the communities: how do you think about neglected diseases which commonly escape perception of the communities? For example, there are zoonotic and non-zoonotic trypanosomiasis, and febrile symptom of brucellosis is commonly believed to be due to malaria.