



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_44257
Title of the Manuscript:	The behavior of Jhum cultivators living in Chattogram Hill Tracts districts and its relation with malaria in Bangladesh
Type of the Article	

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	Methods: The authors should provide the diagnostic method(s) (microscopy, rapid diagnostic test, PCR?). Logistic regression and LLIN, distance, and hanging LLIN and Table 9: This part of the text in the Results section should be re-checked with a statistician or epidemiologist.	1. In fact, in this study, we did not conduct any test with RDT or microscopy, just taken information from participants whether they had malaria in last one year. BRAC has been operating the malaria programme with Govt. since 2007 and all malaria cases are documented in RDT or laboratory register. So whenever a participant claimed a malaria cases it was crosschecked with register. 2. Yes, we rechecked the result of Table -9 of original manuscript and we got the same result.
Minor REVISION comments	Introduction: Plasmodium Ref 2: Please cite the latest WHO World Malaria Report (2017). Introduction: What is the “deadly vector?” Please provide the name of Anopheles species. Introduction, 2nd paragraph: A figure showing the entire country of Bangladesh and its different districts with different levels of endemicity would be helpful for many readers. Alternatively, readers should be referred to Ref 4, which shows a map of malaria distribution in Bangladesh. Introduction: What does “BRAC” stand for? Study design: WHO and many malaria experts consider that the most important target populations include children under 5 years old and pregnant women. Why did the authors exclude children under 5 years? “Para”: General readers would not understand what “para” means. It would be better to avoid this term and use “village” instead throughout the text. Methods, “FGD”: Please explain what this abbreviation stands for. Table 1: A more complete table title is required. There should be an explanation as to what the authors are comparing (P value). Abbreviations should be explained in the legend. Results: The percentages should be expressed up to 1 decimal place (for example, 16.9%, instead of 16.88%). Table 2 does not contain very useful information. The results can be described in one sentence in the text, and this table can be deleted. Table 3 also can be summarized in one or two sentences in the text and deleted. Results, Tables 4 and 5: The difference between “Jhum cultivator” and “cultivator (others)” is not clear. As in the case of Tables 2 and 3, Tables 4 and 5 can be deleted. The essential findings can be explained in the text in a few sentences. Table 5 is a statistical calculation, which does not have to be presented. It can be deleted. Results, Table 6: Please specify the time that corresponds to “evening” and “sleeping time.” This is an important information for readers interested in potential mosquito biting period. As with most tables, Table 6 can be deleted, and the information contained in it can be expressed in one or two sentences in the text.	1. Thank you and done. 2. Thank you for reviewer's comment. However, we don't find the relevant data especially for death of children U5 in WHO world malaria report 2017. We only found death report in WHO world malaria report 2017. But we update the Ref 1. 3. The deadly vectors are An. <i>Philippinensis</i>, An <i>Minimus</i>, An <i>Vagus</i> which are mentioned in page 3 in revised manuscript. 4. Thank you for reviewer's comment. 5. BRAC is brand of organization, previously it's meaning “Bangladesh Rural Advancement Committee”. 6. Thank you for reviewer's comment. In <i>Jhum</i> cultivation, all adult people irrespective of male and female are attended in cultivation and children are left at home with elderly people for care giving. So we kept children left from our study. It is one of the reason why children are less infected in Bangladesh. 7. Para is small village constitutes 10-50 households in CHT areas which is different from plain land of Bangladesh. This is culture of living of tribal people. In a para, one tribal group or mixed tribes of people can be living and each para has one <i>Karbari</i> who is leader of para. We also added a footnote in page 5 in revised manuscript 8. <i>Done</i> 9. Thank you for reviewer's comment. We have revised the legend of Table 1 in revised manuscript. Table 1 shows whether there is association between education, ethnic and age with occupation. <i>Jhum</i> cultivation is strongly associated with adult people and most of the <i>Jhum</i> cultivators are not educated which we want to see through this association. We have discussed this association in first paragraph of discussion section. 10. Thank you and done 11-13 : Thank you for reviewer's comment. We have redesigned Table 2-4 of original manuscript in Table 2 in page 9 in revised manuscript as per other reviewer's comment. <i>Jhum</i> cultivation is the cultivation in hilly area of CHT with <i>slash and burn</i> activity defined in first two paragraphs in page 3 of introduction section while cultivators is rice cultivators who are working in plain land of CHT. We also added footnote in page 8 in revised manuscript. Table 5 is redesigned as of Table 3 in revised manuscript as per other reviewer's comment. 14. Yes, we have deleted Table 6 of original manuscript. Evening is the time when sun is downed in west and night is just beginning. It is defined as 0 hour. Sleeping time means when <i>Jhum</i> cultivators retire to bed apart from evening. It may be 1, 2, 3, hour from evening time. We think Table 5 in revised manuscript is enough to get understand ‘evening and sleeping time’ by reader.



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	Table 7: Same comment as for most other Tables. The text is clear. The authors can add further detail in the text, for example, 18/30 (60%)...5/11 (45.4%)...10/31 (32.2%). Table 8: It is not clear what “during Jhum” and “return to home” mean. Please specify. The authors can also delete this table. Figure 5 is not necessary. Ref 8: The cited reference does not provide enough information to access this document. Please check the web link. Ref 10: This reference concerns a work done in Vietnam. Please check if Ref 10 really supports the authors’ statement in Bangladesh. Discussion, “The revelation is congruent with finding of Ziway Central Ethiopia... (ref 12).” I think that the authors should not compare their findings with those in Ethiopia (different mosquito vector, different ecology/environment). Ref 13: Please cite a more appropriate, peer-reviewed publication. This reference is a general information for International Travel and Health. The names of Anopheles species are not in capital letters: An. philippinensis, An. nivipes, etc. Discussion and conclusion: In addition to anti-mosquito measures, the authors should also emphasize the need for access to health care and effective antimalarial drugs to eliminate malaria.	15-16. Thank you for reviewer’s comment. Yes we have deleted Table 8 of original manuscript. But we have redesigned Table 7 as it will provide important information on ‘evening and sleeping time’ and clarify to reader which is presented in Table 5 in revised manuscript. In fact, <i>Jhum</i> cultivators are infected by mosquitoes during the cultivation period. But the exposure of malaria is different as it depends on immunity. Most of the cultivators back home whenever they perceived of malaria and malaria is exposed after they back home. Few of them bears the malaria during the cultivation period and they start for home in late. That why the result is different. 17. Yes we have deleted figure 5. 18. Yes we corrected it. Moreover, Ref -9 will provide enough information for citing. 19. Yes, the article of Central Vietnam is very much consistent with Bangladesh. The Study was taken in Ninh Thuan province of Central Vietnam which is surrounded by forest areas where they found regularly working and sleeping in the forest was a strong risk-factor with the odds almost three times higher than that of people not working in the forest. 20. Yes, we recognize the environment of Ziwy of Central Ethiopia is different from CHT of Bangladesh which is mentioned below as per revised manuscript (P16 L07-10) <i>The revelation is congruent with finding of Ziway Central Ethiopiawhich observed that the Peak indoor and outdoor activities of An. Arabiensiswas the early period of the night, between 18:00–19:00 and 19:00–20:00h though the ecology of city of Ziway is different from CHT [13].</i> 21. Yes, we have deleted the Ref 13 of original manuscript. 22. Thank you for reviewer’s comment and done. 23. Thank you for reviewer’s comment. In fact, most of treatment of <i>Jhum</i> cultivators were done through active cases detection. All <i>Shasthya Sebika</i>, <i>Shasthya Kormi</i> and Health worker are in touch whenever <i>Jhum</i> cultivators back home from <i>Jhum</i> cultivation and after they confirmed their arrival, they visit their home and conduct RDT. That why we found 82% (Table 4, page - 10) treatment were done by these community level workers. So the access to health center were ensured through active case detection. Yes, we did not cover the antimalarial drugs and it will be better if we do that.
Optional/General comments	The authors report on malaria survey performed among Jhum cultivators in Bangladesh. Introduction is adequate. Materials and methods section should describe diagnostic methods. English needs extensive corrections.	We have corrected linguistic mistake in revised manuscript.

PART 2:

	Reviewer’s comment	Author’s comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i> Yes, the authors should provide an ethical statement.	