Reviewer’s report

Title: Knowledge, Attitudes and Practices on Schistosomiasis and Soil-Transmitted Helminths among Caregivers in Ingwavuma area in uMkhanyakude District, South Africa

Version: 0 Date: 14 Feb 2019

Reviewer: Sepiso Masenga

Reviewer's report:

TITLE: Knowledge, Attitudes and Practices on Schistosomiasis and Soil-Transmitted Helminths among Caregivers in Ingwavuma area in uMkhanyakude District, South Africa

This was a study to assess the Knowledge, Attitudes and Practices of caregivers to persons with Schistosomiasis and Soil-Transmitted Helminth infection in Ingwavuma area in uMkhanyakude District of South Africa. It is a good study.

Abstract:
Line 23, 24 of background states "WHO recently recommended the implementation of robust strategies aimed at controlling or eliminating Schistosomiasis and STH by 2020" What are these strategies? Do the strategies involve educating communities on Schistosomiasis and Soil-Transmitted Helminth infections? Was this intervention program already running, I suppose it is, going by the 'ending year' which is 2020

PSAC should be defined at first usage in the abstract as well as introduction

Abstract Results:
"Findings reflected inadequate knowledge, attitudes and practices in relation to schistosomiasis and STH while awareness of schistosomiasis and STH was high (87.1% and 36 79.2% respectively). Correct knowledge on transmission, prevention, signs and symptoms and life cycle was below average for both infections among those who had heard of the disease." Isn't this expected by default especially that the community had not been educated?

Minor comments:
Page 4 line 67: is SAC a standard abbreviation

Page 4 line 89 and 90: the first part of the sentence has been repeated. Consider deleting

Page 5 lines 104: the statement written as "The study targeted caregivers of PSAC aged 1 - 5 years attending." implies that the care givers who were parents and guardians were aged between 1 and 5 years old. This statement is misleading. Correct it please

Methods
The sample size calculation for prevalence of schistosomiasis and STH yielding 398 is well elaborated but does not justify the 442 for caregivers. The authors can elaborate further to justify how they arrived at 442 logically.

Did the authors perform in-depth interviews on all 442 caregivers? What was the sample size for the focus group discussions? And how did the authors arrive at that? The authors should state exactly how they conducted the sampling.

It is prudent during interviews for such studies (qualitative) to also use recording devices. These help to maximize accuracy of information captured during FGDs. If the authors did not use any recording devices, they should state thus and perhaps include it as a limitation.

The authors do suggest on line 144 under data management and analysis that there was a recording done. I suggest they write this earlier.

Line 163 under results: consider rephrasing this statement to remove association. Check "Most CCGs had a long association with the study area having been born there.

General comments
Did the caregivers receive any prior knowledge/education through some awareness programs about schistosomiasis? If the caregivers were not schooled or trained, we expect their knowledge on schistosomiasis and STH to be limited. If the study was comparing or assessing intervention or awareness program before and after educating the community, then this study would be more pragmatic. In this state, the study seems to report already expected results.

Also, it is not clear whether there was any intervention in the area to warrant or test its success. An explanation is required. I am not sure if the authors wanted to just find out if the caregivers had knowledge and the competence to care for the victims adequately so that they can they can propose an intervention to train caregivers in the programs to combat schistosomiasis and STH?


Authors may need to add some more studies to justify the need for their study. Was there a problem already existing that they wanted to tackle or they simply wanted to explore?

Results:
Table 1 on results. The 55+ should state a precise range in years.

Table 3 and 5. The chi-square test alone may not be appropriate for the type of data and the way it is presented. The authors should consider involving a statistician here perhaps a post hoc test to discriminate the type of caregiver group contributing to the lower than 0.05 p values.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Yes

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

No

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable

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