Author's response to reviews

Title: Feeding styles of caregivers of children 6-23 months of age in Derashe special district, Southern Ethiopia

Authors:

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Version: 3 Date: 24 October 2011

Author's response to reviews: see over
Re: Submission of a revised version of the manuscript after reviewers’ comments are incorporated

Dear Sir/Madam,

First of all, the authors are very grateful for the invaluable and constructive comments given by the two referees. We have attempted to accommodate all the comments and queries given by the two referees on the manuscript entitled “Feeding styles of caregivers of children 6-23 months in Derashe special district, Southern Ethiopia”. Moreover, additional clarification requested from the editors have also been incorporated in the revised manuscript.

Authors’ responses are attached with this cover letter.

Best regards,

Mekitie Wondafrash (MD, DFSN)

Corresponding author
Reviewer: Amy E Brown

1. Literature Review: A paragraph discussing the outcomes of studies examining child-feeding style in Western culture would be pertinent (e.g. pressure to eat is often seen as negative, use of restriction and weight and so on). This could then be used to lead into how feeding style would need to be different in the targeted outcomes due to opposite issues with weight and eating. Greater emphasis could then be placed on why this is such an important study - it is a new area and the impact of feeding style needs to be explored.

Authors’ response: A paragraph has been dedicated to examine the situation in the western culture separately. We have indicated how feeding practices are different between cultures.

2. More detail needs to be given on why different caregivers sometimes completed the interview. Were they the main caregiver?

Authors’ response: In this study 88.6% of the immediate caregivers were biological mothers and hence the response rate was very higher among caregivers who are as the same time biological mothers.

3. Some studies in Western culture show feeding differences between male and female infants. Did any difference in the style occur?

Authors’ response: in this study not significant difference was observed between the sexes in terms of caregiver’s feeding behavior.

4. Was there any difference in feeding style according to caregiver? Were grandmothers for example different in their approach to biological mothers?

Authors’ response: This kind of analysis couldn’t be performed as majority of the immediate caregivers in the study were biological mothers. Only very few of the caregivers were grandmothers who were then merged with other caregivers (sisters, other relatives) for analysis.
5. Again in the discussion I think the findings need to be contrasted to the wide body of literature exploring maternal child feeding style in Western Culture. Why might pressure to eat be better in these situations?

Authors’ response: we tried to see literature on the effect of pressurizing children to eat in similar setting. In the West pressuring has been associated with alteration in feeding behavior and later development of overweight and obesity. Moreover, we didn’t examine the effect of the different feeding styles practices by caregivers.

6. Greater emphasis on the need for further work to follow up outcomes of different styles is needed.

Authors’ response: this has been indicated in the recommendation part.

We thank you very much for your invaluable comments and suggestions
Authors’ response to referee 2

Reviewer: Shamima Akhter

Major compulsory revisions

1. In "Methods" section under the subheading 'Measurement of caregiver’s feeding styles', the authors mentioned that they created the three feeding groups in a different procedure than the standard one. The procedure (whether it is based on a score or responses to which questions) need to be elaborated in detail.

This is also important to be cross-checked with an expert for agreement.

Authors’ response:

As it has been mentioned in the “methods” part we used a locally adapted Child Feeding Style Questionnaire in which caregivers were asked to respond to behavioral and belief questions. Those who were practicing the behavioral items related to a specific feeding style most of the time and agreeing or highly agreeing on the belief items were categorized as practicing that specific feeding style (i.e. we haven’t used scoring through direct observation of feeding events). The items in the questionnaire were adapted to the local context after consulting similar studies conducted with validated instrument.

2. In 'Result' section under subheading 'Breast feeding and complementary feeding practices of caregivers, most of 1st paragraph and beginning of 2nd paragraph are reporting about same variable and same subgroup of population. Therefore it might be good to merge them or re-write the both paragraphs.

Authors’ response:

The comments are accepted and the paragraphs were re-written

3. In 'Result' section under subheading 'Predictors of caregiver feeding styles', this section need to be re-written more clearly. Currently it has all the numbers and information, however, in such a way that it's quite difficult to read and understand the meanings. One way could be to report the findings of two code of the dependent variable (controlled feeding and laissez-faire)in separate paragraphs.
Authors’ response:

The comment has been accepted and the two outcome categories were written in separate paragraphs.

4. In 'Introduction', the focus of first paragraph is totally different than the rest of the article. The paragraph could focus more on the status of child nutrition and how much the child nutrition contributes to higher child mortality

Authors’ response:

The first paragraph has been rewritten

Minor essential revisions:

1. References used in the text, especially in 'Introduction' section are not consistent

Authors’ response:

Corrections have been made on some references and formatted according to the journal’s guideline.

2. Please mention the justification for selecting one urban and seven rural Kebeles in 'Methods' section.

Authors’ response:

In order to select one urban and seven rural Kebeles we used the current demographic structure of the country (majority (84%) of the population of Ethiopia live in rural and the rest in Urban settings according to census conducted in 2007). Hence, the sample was distributed to seven rural and one urban Kebele in the study district. In the “Results” section, the residence of the caregivers is comparable to the national proportion of the population by residence (table 1) in which 87.5% are rural residents.

3. In Table 2, the frequency is mentioned as decimal point numbers which is redundant as the sample unit is human.

Authors’ response:

Comment accepted and corrected

4. Some ‘Formatting’ issues throughout the article, such as, unnecessary double spaces after some words or some lines.

Authors’ response:

The comment accepted and the document has been seen by language expert
We thank you very much for your invaluable comments and suggestions.