Author’s response to reviews

Title: Body size perceptions and preferences favor overweight in adult Saharawi refugees

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Author’s response to reviews:

Dear editors and reviewers,

Thank you for allowing us to submit a revised version of our manuscript to Nutrition Journal, and thank you for all the valuable and constructive comments. We have, as recommended, revised the manuscript along the lines suggested by the reviewers, accompanied by this point-by-point table in which we have explained how we have modified our manuscript to accommodate each comment. All authors have read and approved the submission of the revised manuscript; the manuscript has not been published and is not being considered for publication elsewhere. We hope you will be able to accept the revised article for publication in your journal.

Detailed replies to the objections raised by the reviewer are attached below.

Yours sincerely,

Sigrun Henjum on behalf of the authors
Reviewer reports:

1. All results are presented in tables with total sample and percentages. The percentages were calculated in relation with the total sample and were interpreted as row percentages. Please, correct all tables and your results section. Example, in the first paragraph of your results you say that “More women were classified as being obese or overweight (approximately 30%) compared to men (approximately 13%).” In table 1 among women you have 57+41 overweight/obese, which correspond to 60.9% of the women sample and not 30%. Also among Men, 24.9% were overweight/obese and not 13%. Table 2 presents the same problem.

Thank you for making us aware of this, we have corrected all the tables and the result section.

2. As suggested by reviewer 1 you should show in a table the results for age, as it is an important part of your discussion. Please, verify your results.

We agree and have made a new Table 1 and Table 2, which include age groups.

3. Example of mistake: “…corresponding results for the age group of 26-45 years, were 52%, 46%, and 38%, respectively and for the age group of 46-80 years, 12%, 40%, and 54%, respectively”. As you can verify, for both cases the percentages are superior to 100%.

Thank you for making us aware of this, it has been corrected in the revised manuscript.

4. Please, include the statistical tests in your tables. It is not clear when age is significantly associated with BMI categories, body size perception and so on. If the tables include the p-values, it will be clear.

We agree and have included statistical test to the tables.

Reviewer #1:

1. Why did you choose specifically five refugee camps in Algeria? You may find problems with external validity and, thus, this could be explained in your introduction instead of only mentioned in discussion section.

We agree and have added this information to the introduction. “The participants were primarily recruited as part of a larger study on risk factors for non-communicable diseases among adult
Sahrawian refugees. The informed consent included a statement allowing us to use the data on body size perceptions and preferences”.

2. In results, in the sentence "Approximately 49% had a correct body size perception. Of these, 22% were overweight and or obese, and 21% of those classified as being overweight and/or obese underestimated their body size". Here, I suggest separating into two sentences, because it seemed that of those classified correctly, 21% of the classified as being overweight/obese underestimated their body size.

We agree and have changed it accordingly.

“Approximately 49% (n = 154) had a correct body size perception. Of these, 45% (n = 69) were overweight/obese and 48% (n = 135) of those who were classified as overweight/obese, underestimated their body size”.

3. You present several results according to age group and discuss these results. As they were important findings, you should present them in table 1 or table 2, or even a third table for this, specifically.

We agree and have added tables with age groups according to BMI categories (Table 1) and age groups according to self-perceived body size (Table 2).

4. In the sentence "The lower preference for overweight among men by women can be explained by the notion that women’s body size preferences are linked to the preference that the men have for female body sizes [46]." (page 9, lines 43-58) you could further explain this relationship, since the sentence is confusing and incomplete to explain it.

We agree and have re-written the section, see page 9-10: “The self-perceived body-size by a woman is affected by the male’s desired size for female and vice versa; however, both genders might be exaggerating the opposite-sex preferences, which leads to misjudgments about attractive body sizes. For example in western countries, when women were asked to select men’s ideal body size, they selected a much thinner figure than what men select as ideal, and men selected a more muscular figure than what was desired by women”.

Reviewer #2:

1. Could the perception of body size be influenced by the refugee condition? I mean that being refugees, they could feel to be underweight and undernourished.

Thank you for raising this interesting question. Refugees are especially vulnerable and particularly at risk of malnutrition coming from conditions of prolonged war and lack of resources. Forced migration puts refugees at risk of economic hardship and household food insecurity, and many do not have an adequate food intake to meet their basic nutritional needs. Therefore, it is possible that the refugees still have strong association between overweight/obesity and richness, health, strength, and fertility and that a change to a more western body ideal is slower in such setting.

2. Could the authors provide any explanation why so many obese women are present? This condition depends on nutrition transition, or these women are obese before the refugees status?

The Saharawi refugees have been settled in the refugee camps in Algeria since 1975, when Spain withdraw from Western Sahara and Morocco occupied the country. We do not know the prevalence of overweight/obesity in the refugees before the invasion. The Sahrawi people were nomads and moved around in the country with their animals. We know that a western diet has been introduced to them in the refugee camps with white flour, spaghetti, etc. We have mentioned this in the discussion. We also know that the level of physical activity in the refugee camps is low, and there are not many possibilities to do training. A changed diet combined with no activity is probably the reason for the high rates of overweight and obesity, in addition to a culture that still values an overweight body ideal.