Author’s response to reviews

Title: Factors associated with minimal meal frequency and dietary diversity practices among infant and young children in the predominantly agrarian society of Bale zone, at southeast Ethiopia: A community based cross sectional study

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Title: Factors associated with minimal meal frequency and dietary diversity practice among infant and young children at Southeast Ethiopia: A community based cross sectional study

HW: yalewhaile28@gmail.com

Version submitted date: May/2017

With Regards!!

From: Haile Woldie (E-mail: yalewhaile28@gmail.com)

Correspondence Author

Author's one by one response to reviews:

To: Archives of Public Health Editorial Team

Subject: Submitting a revised version of the manuscript:
Object: Manuscript ID = (AOPH-D-17-00005) Factors associated with minimal meal frequency and dietary diversity practice among infant and young children at Southeast Ethiopia: A community based cross sectional study

Point by Point Responses:

We would like to take this opportunity to thank the reviewers for sharing their detail view and constructive comments for further development of our manuscript. The comments are very important for the document which will further improve the scientific status of the manuscript. Dear editorials; authors point-by-point responses for each given comments on the manuscript are provided in the following pages.

Point by point response for the manuscript reviewers
Reviewer–One (1)

Comments given by the reviewer–One

Answers given by the authors

☐ This paper contributes data on the prevalence rates of minimal meal frequency and dietary diversity and associated factors with the indicators in Southeast Ethiopia. The following are suggestions to improve the manuscript:

Major compulsory revisions

1. In abstract, instead of "acceptable dietary diversity scores" please use the standard term "minimum dietary diversity". Please be consistent with the term throughout the text.

2. In results (abstract), please write CI in percentage since you are reporting prevalence in percent. In addition, please mention the 95% CI of the odds ratio.
3. "……kebeles (smallest administrative units) in". In this sentence, is something missing?

4. "…..single population proportion formula (P)". What does "P" mean?

5. "…the result for S1". What are S1 and S2?

6. Please define "eligible subject" in your study.

7. "….determined by preliminary survey…” Which survey? Did the authors conduct this survey?

8. "After a proportional allocation to each kebele, the systematic sampling technique was employed." More clarification is needed.

9. Please provide a reference based on what you developed your two indicators.

10. "Accordingly, children who consumed ≤ 3 food groups and ≥ 4 food groups were classified as having poor…". I don't understand what you want to say. Minimum dietary diversity is itself an indicator that means proportion of children 6-23 months of age who receive foods from 4 or more food groups. I request the authors to stick with this definition.

11. "Minimal meal frequency mean is….". This sentence needs to be corrected. You can write "In minimum meal frequency indicator, 'minimum' is defined as…..”

12. "Timely initiation of complementary feeding" and "Minimum acceptable diet", are you using these in this paper? If not, please remove.
13. It looks more lucid if you use a different sub-heading like "Operational definitions" and define all the terms/indicators you've used in this study.

14. I'd not use the term "living standard" based on what you've calculated. Instead, I'd call it socio-economic status or simply wealth quintile. In addition, it's better to mention what were the assets that the authors used to calculate the composite indicator.

15. In table 1, instead of "not read and write", "illiterate" sounds appropriate.

16. In figure 1, it looks better if you just show the percent of consuming foods.

17. In table 3, please check the number of "Frequency of antenatal care visit". In addition, it is better to write in text about the women who had $\geq 4$ times of ANC visit rather than just saying "More than ninety percent of children mothers had at least one history…." Similar is the case for PNC.

18. While mentioning limitations, I think it is better to remove the second one as you haven't looked into initiation of complementary feeding. In addition, you can add a limitation, study being not representative of the whole nation.

19. This manuscript needs extensive language corrections (preferably by a native English speaker) before being published. Dear reviewer, First of all, we authors want to forward our respectful thanks for your fruitful comments for our previous manuscript. Dear reviewer; all of your comments were crucial for further scientific development of the manuscript. Dear; all of your given comments corrected one by one in the following ways;
1. Dear reviewer; According to your 1st important comment, the indicator of "Acceptable dietary diversity scores" changed by a standard term of "Minimum dietary diversity" throughout the document.

2. Dear reviewer; We authors considered your 2nd comment and corrected like; “….Child age (AOR= 0.29; 95% CI: 0.28, 0.94) and parity (AOR= 2.8; 95% CI: 1.11, 7.50)…. mothers educational status (AOR= 0.52; 95% CI: 0.28, 0.94), child history of illness in the past one week (AOR= 0.44; 95% CI: 0.26, 0.73) and maternal counselling on IYCF practice during PNC visits (AOR= 2.6; 95% CI: 1.59, 4.45) were....”

3. Dear reviewer; Once again, we authors need to forward our appreciation for your 3rd important observation in the manuscript. Dear; it was due to editorial problem of the sentence and now considered accordingly.

4. Dear reviewer; We authors want to add our great appreciations for your 4th comment in our previous version of the document. Dear; it was due to editorial problem and now, removed the symbol of “P”.

5. Dear reviewer; Once again, we authors need to forward our thanks for your 5th comment. Dear reviewer; we authors have a response on this issue, and it was just to represent shortly the sample sizes of the two outcome indicators; i.e., (S1) for minimum meal frequency and (S2) minimum dietary diversity score. However, after we taken into account your important view, we authors removed the two symbols (S1 and S2) for the better understandability of our sampling procedure, and corrected as; “The prevalence (P) of minimum meal frequency and minimum dietary diversity practices were taken as 44.7% and 10.8% respectively (16), and…assumptions of; a 95% of confidence level, and 5% margin of error (d)…, the result for minimum meal frequency and minimum dietary diversity scores were 380 and 148 respectively…. a minimum sample size of 836 was obtained after …”

6. Dear reviewer; According to your 6th comment, we authors defined the eligible subjects in the study area, like; "….., according to the 2016 Bale Zone Health Department Biannual Health Development report, there are a total of 29, 751 infants and young children aged 6–23 months in the study area (24)…", likewise a total 5279 children aged 6–23 months
7. Dear reviewer; We authors want to forward our unlimited appreciation on your view for preliminary survey (given as the 7th comment). Dear reviewer; actually we were not carried out any survey other than the present survey. However, it was due to editorial problem and now, we corrected in the following ways like; "….A total number of 5279 infants and young children aged 6–23 months living in the selected kebeles was obtained from each kebeles health post log books, which was used to calculate the sampling fraction (k)……., a proportional allocation was considered to estimate the total number of children to be participated in each selected kebeles….., a systematic sampling technique was employed to recruit study participants…"

8. Dear reviewer; Your 8th comment was crucial for the better development of the manuscript. Dear; after we considered the issue, we authors tried to improve the level of clarification like; “Furthermore, proportional allocation was considered to estimate the total number of children to be participated in each selected kebeles. Then, a systematic sampling technique was employed to recruit study participants…..”

9. Dear reviewer; We authors taken corrective action for your 9th comments accordingly.

10–11. Dear reviewer; Once again, we authors need to forward our unlimited appreciation for your important comments in our manuscript. Dear; according to your fruitful views given as 10th and 11th comments, the definitions of “Minimum dietary diversity”, “Minimal meal frequency”, and other indicators used in our study have clearly defined in the operational definition part of the manuscript.

12. Dear reviewer; After we considered the importance of the two indicators "(Timely initiation of complementary feeding" and "Minimum acceptable diet)" in our work, we removed the indicators from the manuscript.

13. Dear reviewer; As it stated before, we authors tried to define briefly all indicators used for our study in the operational definition part of the manuscript.

14. Dear reviewer; Once again, we authors need to forward our great gratitude for your uncontrolled views in our manuscript. Dear; based on your 14th comments, we tried to correct like; “…Wealth index was used to indicate socio-economic status of study participants’
household..... A total of eleven composite assets indicators (i.e.; owning of farm land, per-hectare productivity of the farm (in quintal), television, refrigerator, mobile telephone, availability of electric power, fixed phone, bicycle, kart, number of milk caws and number oxen) via a principal components analysis (PCA) were used to construct the wealth index of households.......”

15. Dear reviewer; Based on your 15th comments, we authors have changed the word “Not read and write” by the word of “Illiterate” accordingly.

16. Dear reviewer; We authors tried to consider and correct one by one all your comments indicated from 16-19 accordingly.

Reviewer–Two (2)

Comments given by the reviewer– Two Answers given by the authors

☐ The manuscript aimed to identify the factors associated with minimal meal frequency and minimum dietary diversity among children aged 6-23 months in Bale Zone, Southeast Ethiopia.

1. Consider including Operational Definition Section and define the following: kebeles, woredas, Afan-Oromo, minimum dietary diversity, minimum meal frequency and minimum acceptable diet, etc.

Methodology

2. Indicate the population (N) of 6-23 months old children in the study area.

3. State why and how design effect of 2 was used in the study.

4. Indicate the inclusion/exclusion criteria for the study?
5. Check for the redundancy in the methodology.

6. Indicate the source of list of participants (e.g. National Census).

Results and Discussion

7. Consider discussing the findings in the manuscript in an order that is harmonious with how the findings were presented in the tables and figures.

8. Make sure that the percentages presented in the manuscript are the same with what is indicated in the tables.

9. Indicate the p-values in the bivariate and multivariate logistic regression analysis.

10. Cite the references for the possible explanations/mechanisms provided for the associations of found in the study.

11. Consider reporting the results for minimum dietary diversity and minimum meal frequency of breastfed and non-breastfed children separately as recommended by WHO (2008).

12. Consider further disaggregating and reporting the results for minimum dietary diversity, minimum meal frequency and minimum acceptable diet of the age groups 6-11 months, 12-17 months and 18-23 months of age as recommended by WHO (2008).

13. Use another word for 'Illiterates'.
References

14. Make sure only reputable journals/sources were cited or used as references.

15. Improve the limitation of the study. May include the limitations of the methods used in the study. World Health Organization. (2008). Indicators for assessing infant and young child feeding practices, Part I: Definition. Dear reviewer; We authors want to forward our grateful thanks for your time devotion and constructive comments on our previous version of the manuscript. Dear reviewer; we authors have tried to correct and respond one by one all of your given comments in the following ways;

1. Dear reviewer; All indicators used in our study have briefly shown in the “Operational Definition part” of the manuscript accordingly.

Methodology

2. Dear reviewer; Based on your important couple of views indicated as the 2nd and 6th comments in the methods part of the manuscript, we authors corrected accordingly like; “….Furthermore, according to the 2016 Bale Zone Health Department Biannual Health Development report, there are a total of 29751, infants and young children aged 6–23 months found in the study area (24).”

3. Dear reviewer; We authors have a response for your 3rd comment in the following way. Dear; the design effect is a correction factor that is used to adjust required sample size and to allow the design structure and resulting in larger sample size in many studies. The design effect is basically the ratio of the actual variance, under the sampling method actually used. Design effect vary from survey to survey, and even within the same survey and again will vary from question to question. In general in well designed studies, the design effect usually ranges 1 to 3.

4. Dear reviewer; Once again, we authors want to thanks for your 4th important comments. Dear; the inclusion and exclusion criteria’s of the study clearly indicated in our second version of the manuscript.
5. Dear reviewer; Based on your 5th comments, detail corrective reviews have to control information redundancy in the methodology part.

Results and Discussion

Dear reviewer; Once again and again, we authors want to forward our unlimited appreciation for all of your constructive views given in the “Results and Discussion part” of our manuscript. Dear; all of your comments were important for further scientific developments of our manuscript. Dear reviewer; we authors tried to consider and correct one by one all of your comments in the following ways;

6. Dear reviewer; According to your 7th comments in our previous version of the manuscript, detailed corrective measures have taken to harmonize all findings indicated in tables and figure with discussion part of the manuscript.

7. Dear reviewer; As a result of your 8th crucial comment, we authors cross checked the whole parts of the manuscript for similarity of all values indicated in the tables and figure to other parts of the manuscript accordingly.

8. Dear reviewer; Based on your 9th comment, the P–values have shown in both bivariate and multivariate regression analysis.

9. Dear reviewer; Once again, we authors appreciated for your 10th comment given in “Results and Discussion Part” of the manuscript. Dear; we cited all the sources of information for the possible explanations for our findings.

10. Dear reviewer; We authors want to forward our great appreciation for the 11th important recommendation on the manuscript. Dear reviewer; due to their insignificant in number, we authors agreed not to consider the results separately (i.e., breast feed and non-breast feed children).
13. Dear reviewer; According to your view given as 13th comment in the discussion parts of our work, we authors corrected the word “Illiterate” by the word of “Not read and write”.

References

14. Dear reviewer; Once again, we authors need to forward our great appreciation for your uncontrolled contribution for further development of our manuscript. Dear; all your comments given in the “References Parts” of our work were very important. Dear; all of your issues indicated as 14th and 15th comments have corrected accordingly.

Reviewer–Three (3)

Comments given by the reviewer–Three  Answers given by the authors

☐ Please note that there is no page number in the manuscript I receive so the comments are made considering the title page as page 1.

General comments:

1. Background is not clear and need to be rewritten. Especially, context concerning Ethiopia is not well presented: other studies concerning this topic were not introduced in the background:


☐ Ergib Mekbib et al.: 2014: Magnitude and Factors Associated with Appropriate Complementary Feeding among Mothers Having Children 6-23 Months-of-Age in Northern Ethiopia; A Community-Based Cross-Sectional Study; Journal of Food and Nutrition Sciences 2014; 2(2): 36-42

I suggest the authors to take account this last publication during their revisions:


2. The study is not novel, given that the context is Ethiopia and similar papers have already been published since 2013. The author's need to justify what was new in their study.

What is the specific importance of their area of study (Southeast Ethiopia)?

What is the hypothesis of the authors justifying this study?

The results need to be compared with the others studies in Ethiopia more precisely: what factors the other studies found to be associated with MMD and DD?

3. The used of the terms 'malnutrition' and 'undernutrition' in all the manuscript is not clear.

For example authors claims "The most recent preliminary results showed that, improper feeding practice in the first two years of child's age is a major cause of child undernutrition, resulted for multiple nutritional and health outcomes (4).’ However, the reference is about malnutrition and not undernutrition. Please clarify and justify this terms.
Is the dietary diversity correlates with undernutrition, malnutrition or both? Same concern concerning meal frequency? Because the authors didn't evaluate the global energy intake, I'm not sure that the term 'undernutrition' is appropriate in this study. See for reference Prakash Shetty, Malnutrition and Undernutrition, Medicine Volume 31, Issue 4, 1 April 2003, Pages 18-22.

Background

1. Page 3, line 18: The sentence doesn't make sense for me. Please precise what are the negative impact of malnutrition.


3. Page 3: In the 2nd paragraph, arguments seem to be the same than in the first one. Please reorganize the two first paragraphs.

4. Page 3: The order of the arguments need to be changed: it is not very happy to speak about the number of children deaths after pointing the fact that malnutrition can cause repeated grades in school. Negative impact of malnutrition need to present in a logic order.


6. Page 3, line 40: The term 'complementary foods' is not explained before and readers cannot understand what the authors speaking about.

7. Page 3, lines 43-46: Did the authors want to say: In most of the developing countries, children are directly...?
Methods

1. The authors argued that the first 1000 days is important: why the population included infant from 6 to 23 months only?

2. Page 4, line 48: The minimum dietary diversity proportion was choosing to be 39.1% to determinate the sample size basing on work of Jonas et al. However, others work in Ethiopia found lowers proportion: 10.8% in EDH survey and 12.6% in the study by Beyene et al. Because nothing is know in the region studied by the authors, proportion from a national representative sample (EDH survey) must be used instead of other regional studies. Moreover, the authors indicate in the background that this proportion is only 10.8% (page 1 line 56) to justify this study.

3. Page 4, line 37: What is a woreda? Even if a reference is proposed at the end of the sentence, please explain briefly.

4. Page 5, lines 23-30: Are the questionnaires have been previously used in other countries and other studies?

5. Page 5, lines 39-45: How the minimum diversity dietary has been choose: is this an international or a local recommendation? (WHO or others?). I think WHO's specification is used but the reference appear only at the end of the paragraph and it's not clear if it's concern all the indicators studied.

6. Page 5, lines 52-55: Same concern about the minimum meal frequency: please add a reference concerning this point.

7. Page 6, lines 10-17: The method used to obtain the household wealth index is not clear for me. Please clarify what the "composite asset indicator" is.

8. Page 6, lines 31-35: How the acceptability and applicability of the procedures and tools has been evaluated?
Results

1. In the table 1, about 60% of the infants were male and only 40% were female:
   o What the authors think about that? Is there a reason to this sex ratio in Ethiopia?
   o Is the gender has been used in the models to find a correlation with minimal DDS or minimal meal frequency?

2. Page 8 line 10: Why the availability of latrine had been explored? Is there a link between this variable and meal frequency or diet diversity? Please explain.

3. Page 8, line 16: PNC is not defined before.

4. Page 8, line 44: please remove 01

5. Page 8, lines 47-58: All these data were presented in the table and there is no need to rewrite all the values: please group the factors positively and negatively associated with minimal dietary scores.

Discussion:

1. Page 9: In first paragraph, authors claims that their results was higher than local reports in Ethiopia (line 13) and lower than results in Ethiopia few lines further (line 25). It is not clear what findings were 'lower'? (Meal frequency, dietary diversity?) (Lines 24-28).
More generally, the discussion about meal frequency and dietary diversity may be clarified because the readers don’t know what the authors are discussing in several times.

2. Page 9, lines 40-48: Please compare data with international data and then with local or national sample in Ethiopia to clarify the discussion.

3. Page 9, lines 56-60: Home gardening is proposed to explain acceptable dietary diversity practice but data obtain by authors apparently not support this hypothesis? If no association was found in bivariate analysis, this explanation cannot be proposed as an explanation.

4. Page 10 line14: "Frequency of the meal increase as the age of child increase" may be better (age of infant never decrease).

5. Page 10, line 20: "Where those ..." This sentence doesn't make sense. Is this sentence the following of the previous one?

6. Tables

-----Tables 4 and 5
-----P value is not included in the tables. Please add.
-----The *symbol is not explained in the legend.

7. Figure

There is no confidence interval in the figure 1.
References:

Reference 4: Please correct the citation:


There is a lot of typo error in the references: please check carefully.

Some reference seems to not be in accordance with journal recommendation.

Dear reviewer, First of all, we authors want to forward our respectful thanks for your unlimited views in the previous version of our manuscript. Dear; all of your comments were very important for further development of our work. Dear; we authors tried to address one by one all of your issues given as a general comments in the following ways;

1. Dear reviewer; Based on your 1st valuable comment, detail corrective measures have taken in the background part in all aspects like; contextualizing the information to Ethiopian situation and including some evidences accordingly.

2. Dear reviewer; We authors appreciated and have a response for your view given as 2nd comment in our manuscript. Dear; more works have done to include and show what rationales were initiated the authors to carry out this study in the Northeast part of the country in particular. Dear reviewer; now, the main justification for our study were indicated briefly in the following forms like; “Inappropriate child feeding practices are among the leading causes of child malnutrition, morbidity and mortality in Ethiopia (16). The cause of inadequate meal frequency and poor dietary diversity practice is multi-factorial and has diverse contributing factors (5). Evidence based health and nutrition knowledge in risks of inappropriate IYCF practices have a crucial role to improve the levels of inadequate meal frequency and poor dietary diversity practices (21), and malnutrition reduction in infants and young children (22). However, studies revealing determinants of minimum meal frequency and dietary diversity practices in children aged 6–23 months in Southeast Ethiopia are scarce. With this background, the present study
was carried out to identify determinants of minimum meal frequency and dietary diversity practices among children aged 6–23 months in Southeast Ethiopia. Furthermore, findings from this study will provide evidences for programme managers and policymakers to design and implement appropriate interventions to improve the levels of inadequate meal frequency and poor dietary diversity practices, and malnutrition, morbidity and mortality reduction in infants and young children at Southeast Ethiopia.”

3. Dear reviewer; We authors considered one by one all the issues indicated as your 3rd general comment and detail corrective measures have taken one by one accordingly.

Background

Dear reviewer; Once again, we authors want to forward our gratitude for your crucial views on the background part of our manuscript. Dear; all of your comments were very important to improve the scientific status of our work. Dear; we authors tried to address one by one all of your fruitful comments in the following ways;

1. Dear reviewer; Based on your comment of “Page 3, line 18”, we authors tried to make more explanatory and precise about the negative impacts of malnutrition like;…”The most recent preliminary results showed that, improper feeding practices in the first two years of child’s age are among major causes of child malnutrition (3). It results to permanent outcomes of stunting, poor cognitive development, and significantly increased risks of many chronic and infectious diseases (4–6). The potential negative impact of malnutrition during this critical windows period is unlimited to childhood life (7). Although, it diminishes individuals level of productivity during adulthood (8), negatively affecting the future social and economic development of countries (9). Finally, it causes the vicious cycle of intergenerational malnutrition (10).”

2. Dear reviewer; Once again, we authors appreciated on your comment indicated as “Page 3, lines 20-22:” Dear; now, we corrected the sentence

3. Dear reviewer; As a result of your comment indicated at “Page 3: about the rearrangement of the second paragraph”, we corrected accordingly.
4. Dear reviewer; We authors appreciated for your fruitful comments given at “Page 3: about the order of arguments”. Dear; we tried to take corrective action on the order of arguments accordingly.

5. Dear reviewer; We authors have a response on your comment of “Why child feeding practice needs special attention in Africa?” Dear reviewer; actually we didn’t have any advanced evidences on the issue of growth curve for African children in particular. Dear reviewer; we just forwarding a lateral message from a report as indicated in the introduction part of our manuscript. You know, poor infant and young child feeding practices are more prevalent in African nations including Ethiopia. Dear, now we authors tried to do some correction on the content of the sentence accordingly.

6. Dear reviewer; According to your vital comments given at “Page 3, line 40.” and “Page 3, lines 43-46”, we authors tried to brief and clear what we authors are speaking on accordingly.

Methods Part

Dear reviewer; Once again, we authors need to forward our uncontrolled appreciation for your unlimited reviews on the methodology part of our work. Dear reviewer; according to your important comments given in this part, we authors tried to respond one by one in the following ways;

1. Dear reviewer; We authors have a response for your 1st comment in methods part of our manuscript. Dear; most of the time malnutrition occurs in the 1st 1000 days of infants and young children life. This is well investigated and evidenced issue throughout the world. That is why we authors were tried to show something on the risk of malnutrition in 1st 1000 days of child life. However, according to your better and recommendation and appropriateness of the information with our study subjects, we authors agreed to remove from the background and discussion parts of our manuscript.

2. Dear reviewer; We thanks again for your fruitful comment given at “Page 4, line 48”, in the method part. Dear; for the better scientific protocol of our sampling process, we authors agreed to estimate our sample size from the national survey (EDHS) report and
corrected in the following ways; “Sample size was determined by using a single population proportion formula. The prevalence (P) of minimum meal frequency and minimum dietary diversity practice were taken as 44.7% and 10.8% respectively (16), and with considering the following assumptions of…."

3. Dear reviewer; According to your comment given at “Page 4, line 37”. We authors tried to respond and indicate briefly the meaning of Woreda in the Operational definition part of our manuscript like; “

4. Dear reviewer; We authors have a response on your comment given at “Page 5, lines 23-30”. Dear reviewer; Yes! The questionnaires used in our study were developed from different literatures carried out at local and global setups, which are somewhat similar to our study. However, based on the objectives of our study, some adjustment has been made on the structure, and contents of questionnaires. Dear reviewer; now, we authors tried to described briefly and rewritten in detail about questionnaires used in our study.

5. Dear reviewer; We authors want to say something for your comments of “Page 5, lines 39-45”. Dear; the minimal dietary diversity was defined based on the WHO (2008) infant and young child feeding indicators. Furthermore, the source of information has indicated accordingly.

6. Dear reviewer; According to your important comment given at “Page 5, lines 52-55”, now we authors cited the source of information clearly.

7. Dear reviewer; We authors want to forward on your important comment given at “Page 6, lines 10-17”. Dear reviewer; you know, household wealth index is an indicator for level of wealth that is consistent with expenditure, cumulative socio-economic status and income measures. It mostly recommended tool to measure the socio-economic levels of peoples, especially for developing nations. The tool is constructed from selected household assets and determined by principle component analysis. Dear reviewer; based your important comment, we authors tried to clear the procedure in the second versions of our manuscript.
8. Dear reviewer; Once again, we authors want to tanks for your fruitful comment given at “Page 6, lines 31-35”. Dear; as we tried to indicate it previously, before the actual days of data collection process we were evaluated the acceptability and applicability of the procedures and tools during the time pre-test, which were taken out of selected study kebeles.

Results Part:

Dear reviewer; We authors want to forward our great thanks for your important critical views in the “Results part” of our work. Based on your crucial comments, we authors tried to address one by one in the following forms;

1. Dear reviewer; We authors appreciated for your interesting observation on the ratio of male (60%) and females (40%). Sorry to say, and we authors didn’t have any justification for the ratio; furthermore we didn’t consider and used gender adjustment in the model during our analysis.

2. Dear reviewer; We authors didn’t have any strong reasons for your comment “Page 8 line 10”, but sometimes latrine availability is taken as one strong indicators for better health and nutrition awareness, as well the economic wellbeing of the household, which may inversely affect dietary and meal frequency practice of the child.

3. Dear reviewer; Your comment given at “Page 8, line 16”, have corrected accordingly.

4. Dear reviewer; Based on your comment indicated at “Page 8, line 44”, now we authors removed the value of 01.

5. Dear reviewer; As a result of your important recommendation given “Page 8, lines 47-58”, we authors taken detail corrective measures accordingly.
Discussion Part:

Dear reviewer; We authors appreciated for your uncontrolled effort and important views in the discussion part of our manuscript. Dear; all of your comments were very important for the better scientific status of our manuscript. Dear, all your vital views on the discussion part have considered one by one in the following ways;

1. Dear reviewer; We authors tried to correct your 1st comment given in the discussion part, which was about the information found between (Line-25 Vs Lines 24-28).

2. Dear reviewer; We authors want to say something for your indicated at “Page 9, lines 40-48”, in the following ways. Dear reviewer; most of scientific protocols are recommending for the importance of comparing finding starting at the local level then to international setups during the writing process in the discussion part. However; in the background part, the write up process looking from international levels to local findings. As a result of this we didn’t restructured the way in the discussion part.

3. Dear reviewer; We authors want to say something for your comment indicated at “Page 9, lines 56-60”. Dear reviewer; the issue of home gardening was given as another possible explanation for the discrepancy between findings. Because, there are possibilities that, having home gardening to increase the likelihoods of having better dietary diversity practices, as further supported with more evidences in the discussion part of our manuscript.

4. Dear reviewer; Once again, we authors want to add our thanks for your important view given at “Page 10 line14”. Dear; according to your crucial recommendation we corrected accordingly like; “...This indicates that minimum meal frequency is positively associated with the age of infants and young children; which implies, practice of minimum meal frequency increase as the age of child increase.”

5. Dear reviewer; As a result of your fruitful comment given at “Page 10, line 20”, we authors tried to brief and clear more accordingly.
6. Dear reviewer; All of your comments given on the tables and figure have considered in detail in the second versions of our manuscript.

References;

☐ Dear reviewer; All of your comments indicated in the references part and referencing process viewed in detail and have taken in to consideration by the authors and corrected.

Comments given by the Editor-in-Chief Answers given by the authors

1. Both in the text and in the abstract the minimal meal frequency and food diversity should be explained better

2. In the analysis, how as the sampling design accounted for

3. Avoid using abbreviations in the title of tables and graphs

4. Do not use abbreviations in the titles of tables and graphs. If used, the full text should always coma first.

5. Please also take a moment to check our website at http://aoph.edmgr.com/l.asp?i=25100&l=Q7N4IEKF for any additional comments that were saved as attachments. Please note that as Archives of Public Health has a policy of open peer review, you will be able to see the names of the reviewers.

6. If improvements to the English language within your manuscript have been requested, you should have your manuscript reviewed by someone who is fluent in English. If you would like professional help in revising this manuscript, you can use any reputable English language editing service. We can recommend our affiliates Nature Research Editing Service (http://bit.ly/NRES-HS) and American Journal Experts (http://bit.ly/AJE-HS) for help with English usage. Please note that use of an editing service is neither a requirement nor a guarantee of publication. Dear Editor-in-Chief; We authors need to
forward our appreciation for your important comments on our manuscript. Dear; We have got that, all of your views were very crucial for further scientific development of our manuscript. Dear Editor-in-Chief; we authors tried consider all of your crucial comments one by one in the following ways:

1. Dear Editor-in-Chief; More corrective work has done by using a standard term of “Minimum dietary diversity” to explain the two words of (minimal meal frequency and dietary diversity) in all parts of the manuscript.

2. Dear Editor-in-Chief; We authors have a response on your second. Dear; except in our sample size estimation process, we didn’t considered and used any design effect in the analysis of our study results.

3. Dear Editor-in-Chief; Once again, we authors want to add our unlimited appreciation on your 3rd and 4th comments on the manuscript. Dear; we authors have done detail correction in use of abbreviations on title of tables and graphs accordingly.

4. Dear Editor-in-Chief; Based on your valuable suggestion on the language problems of our manuscript, we authors tried to did all the bests to improve the language problem of our work.

Thank you!!!!