

Review of: "There is high prevalence of overnutrition among married and cohabiting women in Nigeria: Findings from the 2018 Nigeria Demographic and Health Survey"

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Potential competing interests: No potential competing interests to declare.

Thank you for the opportunity to review the manuscript entitled "There is high prevalence of overnutrition among married and cohabiting women in Nigeria: Findings from the 2018 Nigeria Demographic and Health Survey".

Using the 2018 NDHS, this study assessed the prevalence and predictors of excess weight (overweight and obesity) among married women in reproductive age in Nigeria through the lens of the socio-ecological framework. The interest in the study population is argued in evidence where these women are in a disadvantaged situation when compared with unmarried/non-cohabiting peers in Nigeria and other regions. The SEM model proposed for the study is adequate considering that the study is interested in investigating individual and territorial variations of a health phenomenon.

Although the manuscript is generally well developed, it is considered that some suggestions could improve its quality and improve comprehension for international readers.

In the introduction, it is suggested to differentiate the BMI categories. Specifically, between "overweight", "obesity" and "overnutrition", clarifying that this last concept implies the sum of the previous categories and specifying that the analyzes of the manuscript address overnutrition (overweight + obesity).

It is considered that the term "excess weight" may be more convenient to use instead of overnutrition.

Possibly the introduction is a convenient section to specify why the authors decided to work both nutritional categories together instead of describing and addressing the magnitudes of overweight and obesity separately. In relation to this approach, the objective needs to be revised. Likewise, it is necessary to specify the sample: women of reproductive age who are married and/or women who cohabit, since it is expressed differently throughout the manuscript.

The authors propose a knowledge gap, evidencing the importance of studying the nutritional situation of the analyzed sample. Although evidence is presented on the disparities in excess weight among married/ cohabiting women, my concern is that these results have not been sufficiently interpreted in the study context. In other words, based on the evidence in this population group, what are the factors that are operating in this health inequality in this scenario? There is a profuse body of literature on gender inequalities in health that could help to contextualize the background and the results themselves.

The authors propose a hypothesis that indicates territorial differences; however, no precedents are presented nor is the



region under study contextualized so that the hypothesis can be understood. That is, what are the arguments that support the statement of the working hypothesis?

The description of the methods and procedures of analysis and results is adequate. It would be interesting to provide a cartography that complements the information in Figure 1 and that presents the spatial variations of overweight/obesity/excess weight, since it would show territorial disparities and broaden the debate in relation to the socio-ecological approach.

It is important to focus the discussion of results (individual/ interpersonal/ community) around the objectives and hypotheses of the study. In addition, prioritizing an empirical and theoretical articulation that makes it possible to advance specifically in the knowledge of the factors associated with the prevalence of overweight/obesity among married/cohabiting women. In this sense, it is considered that this manuscript can make a substantial contribution to the body of knowledge to the extent that the results that shed light on the objectives and hypotheses of the study are discussed.

In this regard, studies on gender and health inequalities can provide relevant contributions to discuss the results and elucidate factors that shape the real opportunities to access health for married/cohabiting women.

On the other hand, the representations about health and wealth constitute a relevant contribution of the manuscript that allows the reader to know customs and traditions that may be influencing the health results of the women studied, such is the case of beliefs that link excess weight to opulence and economic well-being.

The individual results show disparities related to religious aspects that are not taken up in the discussion.

It is necessary for the authors to discuss the limitations of the study (for example: BMI as the only measure to determine overweight and obesity, lack of data on eating habits, etc.)

Finally, a better formulation of the title is considered appropriate since the objectives of the study and its findings exceed the current proposal.

Regards