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Research Article

Adult Separation Anxiety and Emotional Eating Among First-Year Students of the Faculty of Dentistry

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Abstract

Objective: In our study, the effect of adult separation anxiety on emotional eating levels among first-year students of the Faculty of Dentistry was investigated. The associations between adult separation anxiety and other psychiatric disorders are significant.

Methods: A total of 62 first-year dental students participated in the study. Participants were administered a sociodemographic data form, the Adult Separation Anxiety Questionnaire, and the Emotional Eating Scale.

Results: A moderate negative correlation was found between separation anxiety and age ($r = -0.349$, $p = 0.006$), a moderate positive correlation between emotional eating and body mass index (BMI) ($r = 0.476$, $p < 0.001$), and between separation anxiety and emotional eating ($r = 0.494$, $p < 0.001$). Separation anxiety predicted emotional eating, and every one-unit increase in separation anxiety was associated with a 0.253-unit increase in emotional eating.

Conclusions: The beginning of university is a critical period with increased risk for mental health disorders, making research evaluating psychiatric conditions during this time particularly important. In our study, adult separation anxiety was identified as a significant factor affecting emotional eating. It is crucial to prevent maladaptive coping behaviors and to ensure that mental health disorders are not overlooked during this period.

Keywords: Adult Separation Anxiety, Emotional Eating, Students

1. INTRODUCTION

Adult separation anxiety entails excessive worry and distress when an individual is separated from their home environment and loved ones or people they have become attached to.

Initially described in children, adult separation anxiety has more recently been added to diagnostic systems as a disorder pertinent to adulthood. Although there is some literature on adult separation anxiety, it is relatively scarce compared to other anxiety disorders.[1,2]

There are studies investigating the relationship and comorbidity of adult separation anxiety with other anxiety disorders. Adult separation anxiety may also negatively affect the prognosis of other psychiatric disorders.[3,4] The university period coincides with late adolescence and is considered a high-risk period for the onset of mental disorders. According to the current education system, most students have not previously lived away from home, and during their first year at university, they leave their homes for the first time. With the transition to university, they move away not only from their homes—often regarded as safe spaces—but also from family members to whom they feel emotionally close. Young individuals often struggle with psychological difficulties stemming from adapting to a new city or adjusting to a different social environment. Adult separation anxiety may exacerbate these challenges and make it more difficult to cope with the stress associated with the first year of university. If adult separation anxiety is overlooked during this period, and if maladaptive coping strategies are employed in dealing with this anxiety, it may trigger the onset of other mental health disorders. Young individuals may experience emotional responses such as restlessness, anxiety, and fear when they are separated from their families or from the living environments to which they are accustomed.

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Anxiety disorders may be overlooked during the process of adapting to a new environment. These emotions may be regarded as normal by both young people and those around them. In this context, it may lead to the adult separation anxiety disorder being overlooked.[5-7]

University students may resort to emotional eating as a coping strategy for the anxiety they experience during this period. Emotional eating is characterized by increased appetite, unconscious overeating, and unhealthy eating behaviors in response to stress. During this time, young individuals may exhibit maladaptive eating patterns, either consciously or unconsciously, in an attempt to alleviate their anxiety. At this point, emotional eating becomes problematic both as a maladaptive coping strategy and as a contributing factor to other weight-related conditions such as obesity and metabolic syndrome. The hypothesis of the present study is that adult separation anxiety increases levels of emotional eating. Based on this hypothesis, the study was designed. Adult separation anxiety can be frequently observed especially during this period, and it is important not to overlook it in terms of identifying various psychological symptoms in young individuals. By focusing on a specific population, our study aims to contribute to the literature in this field. Research that aims to combat emotional eating in young people and improve their coping skills with psychological symptoms and problem-solving abilities is valuable for both public health and mental health, and will shed light on the future.

2. MATERIALS AND METHODS

The study was conducted with first-year students of the Faculty of Dentistry at Recep Tayyip Erdoğan University Training and Research Hospital during the 2024-2025 academic year. The study was designed as a cross-sectional, observational, and descriptive study. A total of 62 dentistry students participated in the research. Prior to the study, all necessary official permissions were obtained, and an online survey form (Docs Form) was prepared to facilitate reaching the participants. Participants were assessed through this online form. At the beginning of the Docs form, participants were provided with information about the study and given an option to consent to participate. The study continued only with those participants who agreed to take part. The introductory section of the form collected sociodemographic data such as age, gender, height, weight, smoking status, alcohol and substance use, exercise habits, and whether the student was from outside the city or had previously lived in Rize. Participants' psychiatric diagnoses and medication use were assessed using a questionnaire. Those who reported having a psychiatric disorder and those using medication were excluded from the study. Additionally, participants completed the Adult Separation Anxiety Scale and the Emotional Eating Scale. Participants with any history of alcohol or substance use, psychiatric disorders, chronic internal diseases, or those who had been using psychiatric medication within the last two years were excluded from the study. All these data were gathered through the Docs form sent to the participants. Ethical approval for the study was obtained from the Non-Interventional Clinical Research Ethics Committee of Recep Tayyip Erdoğan University. Ethical principles were adhered to at every stage of the study (Decision No: 2024/52).

2.1. Assessment tools employed in the study

2.1.1. Adult Separation Anxiety Scale

This scale was designed to assess symptoms of adult separation anxiety defined for the adult period. Higher scores indicate a greater presence of adult separation anxiety symptoms. It is a self-report, Likert-type scale. Its validity and reliability have been established for the Turkish population, demonstrating good internal consistency. In our sample, the measured internal consistency value was calculated as 0.84.[8]

2.1.2. Emotional Eating Scale

This scale was developed to assess levels of emotional eating. Its Turkish validity and reliability were established by Arslantaş and colleagues. The scale consists of 10 items, each rated on a Likert-type scale from 1 to 4, ranging from "never" to "always." Higher scores indicate higher levels of emotional eating. It is a self-report scale in which participants select the option that best describes their experience. The scale has

demonstrated acceptable internal consistency in the Turkish population. The Cronbach's alpha value for our research sample was calculated as 0.78.[9,10]

2.2. Statistical analysis

The data analysis of the study was performed using SPSS version 25. Descriptive statistics were presented as minimum, maximum, mean, and standard deviation, while categorical variables were expressed as counts and percentages. The normality of the data was evaluated using the Kolmogorov-Smirnov test, skewness and kurtosis values, and visual inspection of histograms. For comparisons between two independent groups that met the normality assumption, the independent samples t-test was used, and Pearson correlation analysis was conducted to assess correlations. Emotional eating was considered as the dependent variable. Separation anxiety was included in the model as the primary independent variable due to the theoretical relationship between separation anxiety, difficulties in emotion regulation, and eating behaviors. Gender, age, and having come from outside the city were added to the model as potential confounding variables. The regression analysis was conducted using the enter method. The model was found to be significant, with no issues of multicollinearity or autocorrelation detected ($F = 6.147$, $p < 0.001$). Statistical significance was set at $p < 0.05$.

3. RESULT

A total of 62 first-year students enrolled in the Faculty of Dentistry participated in the study. The youngest participant was 18 years old, and the oldest was 23, with a mean age of 19.7 years. Among the participants, 10 were male (16.1%) and 52 were female (83.9%). Body Mass Index (BMI) was calculated by dividing body weight (in kilograms) by the square of height (in meters). The lowest BMI was 17.2, the highest was 31.9, and the mean BMI was 22.7. Nine participants (14.7%) had previously lived in Rize, while 53 (85.5%) came to Rize from outside the city for the first time. Regular exercise was defined as exercising two days per week for two hours, and 11 participants (17.7%) reported engaging in regular exercise. Seven participants (11.3%) reported active smoking (Table 1).

Table 1

Sociodemographic and clinical characteristics of the participants

		Minimum	Maximum	Mean	Std. Deviation
Age		18	23	19.7	1.1
BMI		17.2	31.9	22.7	3.4
Separation Anxiety		10	75	30.8	14.3
Emotional Eating		0	23	9.5	6.3
		n	**%**		
Gender	**male**	10	16.1		
	female	52	83.9		
Smoking	**no**	55	88.7		
	yes	7	11.3		
Physical activity	**no**	51	82.3		
	yes	11	17.7		
Residence	**Same city**	9	14.5		
	Out of city	53	85.5		
Current residence	**With family**	10	16.1		
	Lives alone (home)	1	1.6		
	State dormitory	48	77.4		
	Private dormitory	3	4.8		

When examining the relationships between scale scores and participants' sociodemographic and clinical data, a moderate negative correlation was found between age and separation anxiety (r = -0.349, p = 0.006), a moderate positive correlation between BMI and emotional eating (r = 0.476, p < 0.001), and a moderate positive correlation between separation anxiety and emotional eating (r = 0.494, p < 0.001) (Table 2).

Table 2

Relationship between participants' sociodemographic data and scale scores

		Seperation anxiety		Emotional eating	
		Mean±SD	**p**	**Mean±SD**	**p**
Gender					
	female(n=52)	32.69±14184	0.018	9.88±6067	0.367
	male(n=10)	21.1±11040		7.9±7637	
Residence					
	Same city(n=9)	31.11±15145	0.948	7.56±3395	0.306
	Out of city(n=53)	30.77±14311		9.91±6651	
Physical Activity					
	yes(n=11)	36.64±18624	0.139	9.36±8298	0.909
	no(n=51)	29.57±13088		9.61±5910	
Smoking					
	yes(n=7)	39.14±18488	0.103	11±9238	0.528
	no(n=55)	29.76±13532		9.38±5943	

		Age	**BMI**	**Seperation anxiety**	**Emotional eating**
Age	**r**	-	-0.091	-0.349	-0.012
	p	-	0.483	0.006	0.928
BMI	**r**	-0.091	-	0.189	0.476
	p	0.483	-	0.141	<0.001
Seperation anxiety	**r**	-0.349	0.189	-	0.494
	p	0.006	0.141	-	<0.001

Pearson correlation, independent sample t test, p<0.05
BMI:body mass index

A linear regression model was established to predict emotional eating, and the model was statistically significant (F = 6.147, p < 0.001). According to the model, the only significant predictor of emotional eating was the level of separation anxiety (p < 0.001), with each one-unit increase in separation anxiety associated with a 0.253 unit increase in emotional eating scores (Table 3).

Table 3

Linear regression model of factors affecting emotional eating

	B[1](%95 CI)	**Std. Error**	**B[2]**	**t**	**p**
(Constant)	-15.631(-43.838-12.576)	14.081		-1.110	0.272
Seperation anxiety	0.253(0.143-0.364)	0.055	0.572	4.579	<0.001
Gender	0.160(-3.968-4.288)	2.060	0.009	0.078	0.938
Residence	-1.368(-5.565-2.830)	2.095	-0.077	-0.653	0.517
Age	0.875(-0.474-2.224)	0.673	0.164	1.300	0.199

model F:6.147, p<0.001, Adj. R^2:0.255, Durbin Watson: 2.528
1:Unstandardized Coefficients, 2, Standardized Coefficients

4. CONCLUSION

Our study examined the relationship between separation anxiety and emotional eating among first-year dentistry students. The results indicated that separation anxiety has a positive effect on increasing levels of emotional eating. The first year of university is a critical period for young adults, as it involves leaving home and adapting to a new environment, which can be a vulnerable time for mental health. During this period, symptoms of adult separation anxiety and other psychological disorders may increase as individuals become distanced from a secure family environment.[11,12] With the onset of separation anxiety in students, maladaptive coping strategies may develop to manage anxiety, and emotional eating can be one of these maladaptive coping mechanisms. There are studies in the literature that examine the relationship between anxiety disorders and emotional eating. Research has demonstrated that anxiety disorders constitute a risk factor for emotional eating. It has been emphasized that emotional eating can lead to various negative outcomes such as obesity, insomnia, and maladaptive stress coping strategies. From this perspective, emotional eating should not be considered solely as an isolated problem but rather as a component of multiple psychological disorders. Anxiety disorders, through their effects on behavior, are also observed to negatively impact various bodily systems.[13-17] Studies investigating the relationship between adult separation anxiety disorder and emotional eating are limited in the literature, and no research with a similar design has been encountered. However, considering the clinical and pathogenic similarities between adult separation anxiety and anxiety disorders, it is thought that emotional eating levels in patients with adult separation anxiety may be similar to those in anxiety disorders. Our research findings support this hypothesis.[18-20] In our study, adult separation anxiety levels were found to be higher in females. According to the literature, a study reported that women with generalized anxiety disorder exhibited higher levels of emotional eating. This research highlights the female gender both because it represents anxiety disorders and because it includes female patients, thus emphasizing the relevance of gender differences.[21] In our study, separation anxiety was found to be higher in females compared to males. In our study, separation anxiety levels were found to be higher in women compared to men. The literature also includes studies reporting that anxiety disorders are more prevalent among women. However, the imbalance in gender distribution within the sample necessitates caution in the interpretation of this finding. The fact that the study sample consisted of university students and did not represent a broader population also limits the generalizability of the findings. Therefore, although female gender may be considered a potential risk factor for adult separation anxiety, this relationship needs to be confirmed in more balanced samples. Although no significant difference was found between genders in terms of emotional eating, the literature includes studies reporting higher levels of emotional eating among women. In this context, gender may be considered a potentially important factor in emotional eating behaviors among university students; however, the findings should be interpreted in light of the sample characteristics.[22-23] Although emotional eating did not differ significantly between genders in our study, there are studies in the literature reporting higher levels of emotional eating among females. Therefore, the gender factor should be considered as potentially important among university students.[21,24] Another factor related to separation anxiety in our study was age. As the participants' age decreased, their levels of separation anxiety increased. However, this relationship was not observed for emotional eating levels. Additionally, emotional eating and separation anxiety levels were not found to be associated with whether the students came from outside the city. It might be assumed that coming from a different city could increase symptoms of adult separation anxiety, as both a new city and a new environment might exacerbate anxiety symptoms. However, our findings indicate no significant relationship between city relocation and anxiety symptoms. In this regard, it can be suggested that the impact of entering a new environment, such as university, might be a more influential factor than the change of city itself.

When examining the main hypothesis of our study regarding the effect of separation anxiety on emotional eating, it was observed that separation anxiety increases emotional eating symptoms. Emotional eating was positively associated with body mass index. This finding suggests that separation anxiety may be related to higher emotional eating tendencies, which are in turn associated with increased body mass index. However, these findings should be interpreted as indicating associations rather than causal relationships. Such associations may have implications for students' overall health and body image–related concerns. No studies investigating the relationship between separation anxiety and emotional eating with a similar sample were found in the literature. However, numerous studies conducted with young adults have reported a connection between anxiety and emotional eating. Therefore, it is important to provide social resources that can both protect the mental health of young individuals and positively influence their general health. It should also be considered that young people may develop unhealthy eating habits as a coping mechanism for mental health issues.[25-27]

In conclusion, adult separation anxiety negatively affects individuals not only during childhood but also in adulthood, constituting a psychiatric disorder that may lead to functional impairment. It is a diagnosis that may be overlooked in clinical practice if not specifically assessed by clinicians. The first year of university is a critical period in which young adults transition from the secure family environment to a new life stage characterized by increased academic, social, and personal responsibilities. This transition process may heighten vulnerability to mental health problems due to rising academic demands, requirements for social adjustment, and the fact that independent living skills are not yet fully developed. Therefore, providing psychosocial support aimed at strengthening coping skills for mental health problems among university students—particularly during the first year—is of great importance. In addition, promoting healthy eating habits and increasing access to regular physical activity are important for supporting mental well-being and preventing potential adverse health outcomes. Planning preventive and supportive interventions that incorporate holistic health approaches within the university setting may yield positive effects on students' academic achievement and long-term health outcomes. Despite its limitations, our study contributes to the literature and raises awareness on this important topic.

Limitations

The most important limitation of our study is that no face-to-face interviews were conducted with the participants, and mental disorders were not excluded through clinical evaluation. Participants with psychiatric disorders were excluded based on self-reported information. This constitutes the primary limitation of our research. Psychiatric assessments performed through face-to-face interviews would be more reliable and accurate than self-reported data. Additionally, psychosocial factors such as socioeconomic status, stress, and other variables that may influence emotional eating levels were not examined in our study. There is a need for further research with larger datasets that evaluate all potential risk factors contributing to emotional eating. The study was conducted at a single center. This constitutes an important limitation; however, the participants were recruited from different cities, thus representing various regions of the country. However, the sample size remains limited. Our study included participants from only one university department, and no other departments were involved, indicating that the participants shared similar academic backgrounds. Future studies including young individuals from diverse academic disciplines would enrich the findings. Despite its limitations, our study is valuable as it represents a specific population and, together with its limitations, will guide future research.

Article Information Form

Author Contributions

Conceptualization: M.P., S.N.T., E.B.C., Ş.K.D.; Methodology: M.P., S.N.T., E.B.C., Ş.K.D.; Software: M.P.; Validation: M.P., S.N.T., E.B.C., Ş.K.D., M.Y.; Formal analysis: M.P.; Investigation: S.N.T., E.B.C., Ş.K.D.; Data curation: S.N.T., E.B.C., Ş.K.D.; Writing

– original draft: M.P., M.Y.; Writing – review & editing: M.P., S.N.T., E.B.C., Ş.K.D., M.Y.; Visualization: M.P., M.Y.;

The Declaration of Conflict of Interest/ Common Interest

No conflict of interest or common interest has been declared by authors.

The Declaration of Ethics Committee Approval

Ethical approval for the study was obtained from the Non-Interventional Clinical Research Ethics Committee of Recep Tayyip Erdoğan University. Ethical principles were adhered to at every stage of the study (Decision No: 2024/52).

Artificial Intelligence Statement

No artificial intelligence tools were used while writing this article.

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