

UNIVERSITI TEKNOLOGI MARA

**EATING BEHAVIOR AND BINGE EATING SEVERITY IN RELATION
TO GENDER AND BODY MASS INDEX (BMI) AMONG TERTIARY
EDUCATION STUDENTS IN POLITEKNIK SULTAN SALAHUDDIN
ABDUL AZIZ SHAH (PSA)**

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ABSTRACT

Binge eating behavior among young adults in Malaysia is a growing concern, influenced by various psychological and social factors. This study aimed to examine the association between eating behavior patterns and binge eating severity among tertiary education students, with additional analysis of Body Mass Index (BMI) to explore its relationship with eating behaviors and binge eating across gender. A cross-sectional study was conducted among 121 students (56.2% male) at Politeknik Sultan Salahuddin Abdul Aziz Shah (PSA) using convenience sampling. BMI was calculated from measured weight and height. Eating behavior was assessed using the validated Modified-Malay Eating Behavior Pattern Questionnaire (EBPQ-Malay), and binge eating severity was evaluated using the Binge Eating Scale (BES).

Descriptive statistics were used to summarize sociodemographic and anthropometric data. The Mann–Whitney U test was applied to compare differences in eating behavior and binge eating severity between genders, and Spearman’s rank correlation was used to determine associations between BMI, binge eating, and eating behavior. Based on BMI classification, 12.4% of participants were underweight, 28.9% had normal weight, and 58.7% were overweight or obese. Regarding binge eating severity, 62.8% had no or minimal binge eating, 25.6% had moderate symptoms, and 11.6% were classified as having severe binge eating behavior. A weak but statistically significant positive correlation was found between BES score and BMI ($p = 0.229$, $p = 0.012$), suggesting that students with higher binge eating tendencies were more likely to have a higher BMI. No significant gender differences were observed in overall binge eating severity.

These findings highlight the need for early identification of binge eating behaviors, particularly among students with elevated BMI. Institutions can use this data to design tailored health education programs that promote structured meal patterns and emotional regulation strategies. Strengthening early intervention and nutrition awareness efforts in tertiary institutions is essential to prevent the long-term health consequences of disordered eating.

TABLE OF CONTENTS

AUTHOR'S DECLARATION.....	i
ACKNOWLEDGEMENT.....	i
TABLE OF CONTENTS.....	i
LIST OF TABLES.....	ii
LIST OF FIGURES.....	iii
LIST OF ABBREVIATION.....	iv

CHAPTER 1 - INTRODUCTION

1.1 Research Background.....	1
1.2 Problem Statement.....	2
1.3 Research Justification.....	3
1.4 Research Question.....	4
1.5 Research Objectives.....	4
1.6 Hypothesis.....	5
1.7 Significant of the study.....	5
1.8 Limitations.....	6
1.9 Conceptual framework.....	7

CHAPTER 2 - LITERATURE REVIEW

2.1 Eating Behavior Patterns.....	8
2.1.1 Definition of Eating Behavior.....	8
2.1.2 Eating Behavior Constructs.....	8
2.1.3 Relationship with Disordered Eating.....	10
2.2 Binge Eating.....	11
2.2.1 Definition of Binge Eating.....	11
2.2.2 Prevalence of Binge Eating in Malaysia.....	12
2.2.3 Factors of Binge Eating Among Young Adults.....	12
2.3 Nutritional Status and Body Mass Index (BMI).....	14
2.3.1 Definition and Classification of BMI.....	14
2.3.2 Relationship between Binge Eating and BMI.....	15
2.3.3 Eating Behaviors and BMI.....	16
2.4 Gender Differences in Eating and Binge Behavior.....	17
2.4.1 Gender and Eating Behavior Patterns.....	17
2.4.2 Gender and Binge Eating Severity.....	18
2.5 The Lifestyle and Dietary Patterns of Students.....	19
2.5.1 Characteristics of Young Adults.....	19
2.5.2 Eating Habits of Polytechnic or University Students.....	20

CHAPTER 3 - METHODOLOGY

3.1 Research design.....	22
3.2 Study location.....	23

CHAPTER 1 - INTRODUCTION

1.1 Research Background

Eating behavior refers to the way individuals select, consume, and respond to food. It includes not only what people eat, but also when, how, and why they eat. Eating behaviors are shaped by biological needs, cultural practices, emotional states, and environmental influences. In a healthy context, eating behavior is considered adaptive, meaning it supports nutritional needs, health, and well-being (Supramaniam et al., 2023)

However, under stress, emotional strain, or lifestyle disruptions, eating behavior can become maladaptive. Maladaptive eating refers to irregular or harmful eating patterns, such as meal skipping, emotional eating, binge eating, or consuming food without hunger. These behaviors may interfere with health and lead to negative physical or psychological outcomes.

One of the most concerning forms of maladaptive eating is binge eating. Binge eating is defined as the consumption of a large quantity of food within a short period, accompanied by a loss of control. This behavior is a key feature of Binge Eating Disorder (BED), and is also observed in other disordered eating conditions. It is often triggered by emotional distress, low self-esteem, or poor coping mechanisms.

Young adulthood is a critical period for the development of eating behaviors. As students transition into independent living, manage academic responsibilities, and make personal food choices, they may adopt disorganized eating habits. These include skipping meals, eating late at night, or snacking excessively. Yusof et al. (2019) found that approximately 10% of Malaysian university students reported binge eating behavior, with a higher prevalence among females.

In addition, factors such as eating alone, multitasking while eating (e.g., using phones, watching TV), or sharing food images on social media may contribute to mindless eating, disrupted satiety cues, and greater intake of unhealthy food (Yong et al., 2021). Meule and Platte (2014) also observed that late-night eating is associated with poor dietary quality, including higher energy-dense food consumption and reduced fruit and vegetable intake.