



REASONS OF ABSENTEEISM AMONG UNDERGRADUATE MEDICAL STUDENTS IN JHALAWAR MEDICAL COLLEGE, JHALAWAR: A CROSS SECTIONAL STUDY

Community Medicine

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ABSTRACT

Background In academics student's success depend on attendance. Absenteeism may negatively impact the learning process of student. So, to attend the classes of undergraduate medical course regularly is mandatory and also much helpful for medical student to get a proper and clear idea about the subject of discussion as per course curriculum, which is essential for the satisfactory academic performance in the examination **Aim and objectives:** To identify reasons of absenteeism among undergraduate medical students in Jhalawar Medical College, Jhalawar and factor for improving this condition as suggested by students. **Material and method:** An institutional based cross-sectional study was conducted among 165 second year undergraduate medical students of JMC, Jhalawar by using a self-designed pre validated questionnaire. Complete enumeration technique was used for study. Questionnaire comprising of various sections related to absenteeism was used and suggestions were also recorded for improvement of these conditions. **Statistical analysis:** Data were entered excel sheet and analyzed using SPSS trial version (28.0) **Result:** There were 165 students were involved in this study. Out of them 109 (66.1%) were male and 56 (33.9%) were female students. Significant association ($p < 0.05$) of absenteeism was found with gender, current residence, consumed alcohol, admission seat and native place. No significant ($p > 0.05$) association was found between absenteeism and education medium in school. Main reasons of absenteeism were health issue (82.4%), student preferred self-study (68.5%), no provision of preparation leave (55.2%). **Conclusion:** Campus accommodation, provision of preparation leaves, improvised teaching method can improve the situation of Absenteeism.

KEYWORDS

INTRODUCTION:

Focus of the undergraduate medical education is to produce competent doctors with adequate medical knowledge, affective attitude towards patient and proper clinical skills for practice¹. In academics student's success depend on attendance². Studies have shown that better attendance is related to higher academic achievement for all student³. Absenteeism has been shown to be indicator of low level of motivation for learning⁴. So, to attend the classes of undergraduate medical course regularly is mandatory and also much helpful for medical student to get a proper and clear idea about the subject of discussion as per course curriculum, which is essential for the satisfactory academic performance in the examination^{5,6,7}.

Medical student's absenteeism in class is related to many factors including student and faculty attitudes about learning, class and examination schedule, quality of teaching methods, online medical learning resources, educational environment of the class, health & lifestyle related pressures, extra-curricular activities and the overall health learner-facilitator relationship⁸⁻¹⁶.

This study will be conducted to identify the reasons of absenteeism among medical students.

OBJECTIVES

1. To identify factor leading to absenteeism.
2. To identify factor for improving this condition as suggested by students

MATERIAL AND METHODS

Study Type - Analytical cross-sectional study

Study Area - The present study was conducted at Jhalawar Medical College, Jhalawar.

Study population - Students of 2nd year MBBS of Jhalawar Medical College, Jhalawar.

Inclusion criteria - Those students who were willing to participate in study and those who were present on day of data collection.

Exclusion criteria - Those students who were unwilling to participate in the study and those students absent on day data collection.

Study period - 1 month after ethical approval.

Sample size - Complete enumeration of undergraduate student of 2nd year MBBS in Jhalawar Medical College

Study Tools

Questionnaire -

A pre-designed and pre-tested questionnaire was filled by participants contain two parts:

The questionnaire has 2 parts:

1. **First part** - Questions regarding socio demographic characteristics of participants like age, gender, religion, category, place of stay, personal habits.
2. **Second part** - questions regarding absenteeism causes and suggestion

Technique of data collection

Purpose, methodology and questionnaire was explained to 2nd year undergraduate student in detail. Thereafter consent form was distributed and consenting participants was enrolled in study. Participants were asked to complete the questionnaire. The study participants were asked about reasons of absenteeism and suggestions to improving attendance by questionnaire in proforma.

Data Entry and Analysis:

All data was collected through validated Performa and entered in Excel sheet. The data was analyzed through SPSS28.0(trial version) and Chi-square statistical test used in data analysis.

Ethical Issues:

The present study was conducted after getting permission from institutional ethic committee of Jhalawar Medical College (JMC), Jhalawar. Informed and written consent was obtained from study participants.

RESULTS

This cross- cross sectional study was conducted to identify the reasons of absenteeism among second year medical students of Jhalawar Medical College, Jhalawar. 193 students were approached for this study and out of 193 students, 165 participated in study on voluntary basis and 28 student were absent on day of survey. The study conducted among 165 students revealed following finding. Among 165 students who participated in study, 66.1% of the study subjects were males and 33.9% were females. 57.6% of study participant were belong to urban area and 42.4% to rural area and 69.1% were residing in hostel.

Table 1 Association Between Absteem And Related Factors

Factors		Absences (times/month)				Total	P-Value
		1-2	3-4	5-6	>6		
Gender	Male	38 (34.9%)	42 (38.5%)	18 (16.5%)	11 (10.1%)	109 (100.0%)	0.025*
	Female	33 (58.9%)	15 (26.8%)	6 (10.7%)	2 (3.6%)	56 (100.0%)	
Current residence	College hostel	63 (55.3%)	30 (26.3%)	14 (12.3%)	7 (6.1%)	114 (100.0%)	0.0001*
	With family	1 (25.0%)	3 (75.0%)	0 (0.0%)	0 (0.0%)	4 (100.0%)	
	Rented house	7 (14.9%)	24 (51.1%)	10 (21.3%)	6 (12.8%)	47 (100.0%)	
Consumed alcohol	No	64 (43.5%)	53 (36.1%)	22 (15.0%)	8 (5.4%)	147 (100.0%)	0.010*
	Yes	7 (38.9%)	4 (22.2%)	2 (11.1%)	5 (27.8%)	18 (100.0%)	
Admission seat	State govt	42 (52.5%)	28 (35.0%)	5 (6.3%)	5 (6.3%)	80 (100.0%)	0.0001*
	All India	1 (20.0%)	1 (20.0%)	3 (60.0%)	0 (0.0%)	5 (100.0%)	
	Payment	28 (37.8%)	26 (35.1%)	15 (20.3%)	5 (6.8%)	74 (100.0%)	
	NRI	0 (0.0%)	2 (33.3%)	1 (16.7%)	3 (50.0%)	6 (100.0%)	
Native place	Rural	39 (55.7%)	21 (30.0%)	8 (11.4%)	2 (2.9%)	70 (100.0%)	0.019*
	Urban	32 (33.7%)	36 (37.9%)	16 (16.8%)	11 (11.6%)	95 (100.0%)	
Education medium in school	English	44 (38.6%)	43 (37.7%)	18 (15.8%)	9 (7.9%)	114 (100.0%)	0.369
	Hindi	27 (52.9%)	14 (27.5%)	6 (11.8%)	4 (7.8%)	51 (100.0%)	

Table 1. There is significant association with gender and absenteeism (p value =0.025) and according to percentage absenteeism is higher in male in respective to female students. Current residing place also have significantly association with absenteeism (p value=<0.0001*) and according to percentage more absenteeism found among students who lived in rented house and less among college hostel and with family. Absenteeism has significant association with alcohol consumption (p value= 0.010*) and according to percentage absenteeism is higher among students who consumed alcohol respective to non-consumed. There is significant association with admission seat and absenteeism and higher percentage of absenteeism found in payment and NRI seat. Native place and absenteeism have significant association (p value=0.019*) and higher percentage of absenteeism seen among urban students. Education medium in school don't have significant association with absenteeism.

Table 2 Students personal factors related to absenteeism

Personal factor responsible for absenteeism	Yes	No	Not sure
Health issue	136 (82.4%)	21 (12.7%)	8 (4.8%)
Family issue	56 (33.9%)	91 (55.2%)	18 (10.9%)
Late sleep due to social media/internet use	56 (33.9%)	101 (61.2%)	8 (4.8%)
Home sickness	41 (24.8%)	115 (69.7%)	9 (5.5%)
Preferred Self- study	113 (68.5%)	41 (24.8%)	11 (6.7%)
Extracurricular activity	40 (24.2%)	120 (72.7%)	5 (3.0%)

Depression	36 (21.8%)	124 (75.2%)	5 (3.0%)
Dislike medical field	12 (7.3%)	149 (90.3%)	4 (2.4%)
Language problem	9 (5.5%)	153 (92.7%)	3 (1.8%)

Table 2 represent personal factors relates. The study found out that 82.4% participants agreed that frequent self-health issues are responsible for absenteeism. 68% students agreed that they preferred self- study is another reason for absenteeism. 33.9% students agreed that late sleep due to social media or internet use also reason of absenteeism. 33.9% Students agreed that family issues are responsible for absenteeism. 24.8% students accepted that home sickness is another reason for absenteeism. This was followed by extracurricular activities, depression dislike medical field, language problem as revealed by 24.2%, 21.8%, 7.3% and 5.5% students respectively.

Table 3 Teaching-learning related factor of absenteeism

Teaching related factor of absenteeism	Yes	No	Not sure
Monotonous teaching	54 (32.7%)	108 (65.5%)	3 (1.8%)
Less focus on practical	44 (26.7%)	107 (64.8%)	14 (8.5%)
Non interaction with teacher – student	43 (26.1%)	108 (65.5%)	14 (8.5%)
Poor teaching strategies	47 (28.5%)	112 (76.9%)	6 (3.6%)

Table 3 shows student's perception regarding teaching -learning factor related to absenteeism. 32.7% students accepted that monotonous teaching by faculties is responsible for absenteeism. 28.5 % students agreed that lecture does not cover complete topic. 26.7% students agreed that less focus on practical is another reason for absenteeism. This was followed by non-interaction between teacher and students, excessive use of audio-visual aids as revealed by 26.1%, 18.2% students respectively.

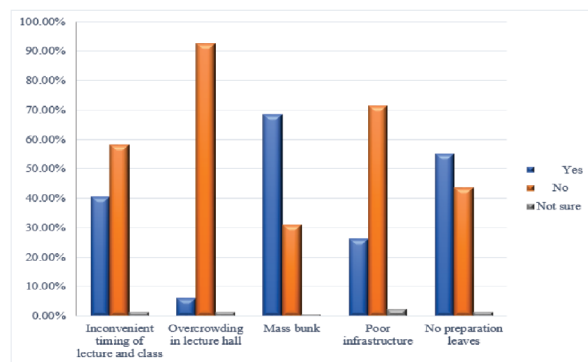
**Figure 1. Other factor related to absenteeism**

Figure 1 shows majority 55.2% students accepted that there is no preparation leave for examination responsible for absenteeism. 40.6% students agreed that inconvenient timing of lecture and class responsible for absenteeism. This follows by poor infrastructure of lecture hall/class rooms, overcrowding in lecture hall/class room as revealed 26.1% and 6.15% respectively.

Table 4. Suggestions for improvement of attendance of undergraduate medical students

Improving teacher -student relationship	73 (44.2%)
Small group teaching	26 (15.6%)
Conductive lecture hall/classrooms	12 (7.2%)
Provision of preparation leave	125 (75.8%)
Convenient timing for lectures/classes	103 (62.4%)
Sports in curriculum	85 (51.51%)
Appropriate use of audio-visual aids	14 (8.4%)
Promotion of integrated teaching	21 (12.7%)

Table 4 shows suggestion from students for improvement attendance of undergraduate medical students. Majority of students 75.8% suggested for provisional for preparation leave. 62.4% students suggested for convenient timing for lectures/classes. 51.51% students suggested for sports in curriculum. 44.2% students suggested for improving teacher-student relationship. For small group teaching suggested 15.6 % and followed by promotion of integrated teaching, appropriate use of audio-visual aids, conductive lecture hall and class rooms as 12.7%, 8.4%, 7.2% respectively.

DISCUSSION

Dasputra A et al (2015)¹⁷ observed that common reason of absenteeism is sickness. This finding of present study 82.4% participant agreed that health issues are responsible for absenteeism. 68.5% students agreed that they preferred self-study is another reason for absenteeism.

In the present study it was found that 32.7% students agreed that monotonous teaching techniques are reason of absenteeism. Similar finding has been documented by Hunter and Tetley (1999)¹⁸ Australia who found that interesting lectures will not miss by students. This study revealed that 28.5% students agreed that poor teaching strategies are responsible for absenteeism. This finding is supported by a study conducted by Tripura K et al (2015)¹⁹ in which poor teaching strategies were responsible for absenteeism.

In current study found out that 55.2% students agreed that no provision of preparation leaves before examination is responsible for absenteeism. Similar result was also found in study by Tripura K et al (2015)¹⁹ in which 55.8% student accepted that absenteeism coincided with preparation of internal examination. This study revealed that 40.6% student agreed that timing of lecture/class (morning classes/time overlap with mess) are responsible for absenteeism. This result supported by study done by Desalegn et al (2014)²⁰ in Hawasaa University Ethiopia, missing morning classes could be due to late night sleep. Poor infrastructure and overcrowding are reasons of absenteeism according 26.1% and 6.15% students respectively according to this study. Similar result was found in study done by Dasputra A et al (2015)¹⁷ as poorly ventilated, overcrowding lecture halls were causes of absenteeism. In this study found out that 24.2% students agreed that extra-curricular activities were reasons of absenteeism.

Conclusion and recommendation

Campus accommodation, improvised teaching method, strict policy for substance abuse control among students with special emphasis on counseling of male students and provision of preparation leave can improve the situation of Absenteeism.

Limitation of study:

This in study only one batch was included and sample size was not large enough so results may not be necessarily generalized.

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Conflicts of interest: There are no conflicts of interest

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