Reasons of Absenteeism among Undergraduate Medical Students: A Review

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ABSTRACT

Absenteeism refers to the frequent absence from classes without any good reason. In spite of compulsory attendance rule, individual students, parents, institute and society suffer when students do not attend classes in medical college on regular basis. Student absenteeism is a concern in higher education especially medical education. Student's absenteeism results in inadequate learning and poor academic performance. Despite the strict rules, absenteeism is an on-going problem in many universities and a phenomenon that is also on the rise in universities worldwide. There is extensive literature on the link between absenteeism and lack of subject matter interest, poor teaching strategies, unfavorable learning environment, excessive socialization among students, part-time jobs, ill health, sleeplessness and poor relations with lecturers. In addition, accessibility of lecture content in the form of online slides, videos and audios has their own contribution to absenteeism. Early detection and prevention might prevent unwanted consequences of absenteeism on medical students' academic performance. Medical colleges should pay more attention and take immediate measures on those who starting to absent from classes because they might need support from them.

Key Wards: Absenteeism, medical students

Introduction

One of the most vital considerations among students in higher educational level is academic performance though there are some differences in performance among the students. The goal of undergraduate medical education is to produce a physician with adequate knowledge of health and diseases, reasonable medical skills and a healthy attitude towards patients and their families. Student attendance is thought to be an important factor in the academic performance of medical students on the basis that clinical contact and teaching are necessary to develop competence. Lectures remain one of the important modes of teaching in many medical colleges despite adaptation of new curriculum. It is easy to deliver knowledge through lecture to a large number of students and logistically saving resources. Low attendance in lectures is not a new problem. Number of causative factors has been suggested. With the revolution in the electronic equipment there are varieties of computer based softwares to assist in making the lectures more presentable, interesting and interactive, thus making the traditional teaching effective. Despite this development low attendance at lectures is still an issue. Absenteeism at higher education level affects the learning process of the students as well as the final result at the end of academic session.

Several studies identify internal and external factors associated with academic performance. Class absenteeism is one of the factor that has negative effect on the mastery of the academic curriculum. One of the most useful work done by Kelland et al reported that a decrease in the examination result...
score with increase in the number of absences in classes during human physiology course. In the study by Fielet al9 it has been demonstrated that significant learning occur during the lectures but. In the study by Riggs et al10 a negative correlation is shown between percent absences and examination scores, suggesting the value of monitoring attendance and identifying students at risk for poor performance. Sabujet al11 in Bangladesh found that absenteeism affects academic performance among undergraduate paediatric medicine students.12

The lower attendance rate among students who previously failed an end-of-year examination suggests that previous poor academic performance may be associated with subsequent poor attendance. The medical students were more likely to miss classes than health science students (Nursing, Health Officer, Midwifery, Laboratory Technology, Optometry, and Environmental Health) despite the medical curriculum requirement of 100% class attendance unless the student has legitimate reasons for missing class. This could explain why academic delays and dismissals from the program are commonly observed among medical students, particularly during the final years in medical colleges. If this behavior continues after medical education, it will reflect on their work life and therefore, may affect the quality of health service in the future.11,13,14

In our country medical education are still following the traditional lecture format of teaching. Lectures and classroom discussion represent the primary means of teaching for undergraduate medical students. Students who miss a lot of classes perform poorly on exams because they were not present when the topics were covered, alternatively students with high levels of absenteeism less committed to academics in general.15 Lecture and tutorials provide a platform where students interact with the teachers, observe them and distinguish them as role models. Low attendance hence may affect this process and hinder their professional growth.16 On the other hand the role of teachers in improving student’s attendance in lectures can not be denied. Teachers with good teaching skills deliver lectures which are organized and structured; have good communication skills which attract students and shows higher attendance rates.17 Despite the strict rules, absenteeism is an on-going problem in many universities and a phenomenon that is also on the rise in universities worldwide.18-20

There is extensive literature on the link between absenteeism and lack of subject matter interest, poor teaching strategies, unfavorable learning environment, excessive socialization among students, part-time jobs, ill health, sleeplessness, and poor relations with lecturers.17,18,20-22 In addition, accessibility of lecture content in the form of online slides, videos, audios have their own contribution to absenteeism.23-27

Absenteeism will only allow students not to obtain appropriate information and contact with relevant material (lectures, practical session, clinical skills, etc) that is required for effective learning to occur. In addition, regular attendance in learning activities corresponds to a distributed practice system (i.e. the students allocate learning effort throughout a course over multiple and short duration of learning sessions) that is effective to increase the retention of knowledge. Study conducted in Saudi Arabia by BinSaeed et al28 showed that student absenteeism may contribute to low achievement or vice versa. Under-achievement assumes critical importance for medical care providers who are involved in decision making in life and death situations.

As educators, we want our students to attend classes. We enjoy teaching and interacting with students and work hard to make our classes worthy of the student’s time and energy. We know who our best students are because they attend class regularly, but we often have a hard time putting a face to the names of the students that fail. On the basis on this anecdotal evidence, we assume that students who attend class regularly benefit from the lectures, tutorials and learning activities designed to facilitate their acquisition of knowledge. Conversely, we assume that excessive absences from class results in poor academic performance. These assumptions, however, are not based on empirical evidence. This review will highlight the reasons of absenteeism among undergraduate medical students.

Factors related to medical students

The major reasons for missing lectures were preparing for another examination, inconvenient class schedule, lack of interest in the subject matter,
Hafeez et al in Pakistan found two top most reasons why students don’t attend lectures were; the timings of the lectures were not adjusted according to their schedule and that they preferred self/group study over lectures. According to Desalegen et al the absence in the morning lectures is higher than absence in the afternoon lectures that can be due to delay going to bed. So early-morning classes is another cause of absenteeism. There is better attendance at lectures scheduled in the middle of the day when students are already likely to be on campus. Transport problem also is a reason for absenteeism.

Student absenteeism was significantly associated with marital status and part-time job. The married students and those who have part time jobs are more susceptible to absence due to non-academic workloads. Social drug use was very strongly associated with being absent from lectures. Studies have shown that substance abuse and alcohol consumption are risk factors for prevalent and unexcused absence from lectures. Additionally, students with low motivation are more likely to engage in social drug use. Society related causes such as low societal value for education is also identified as the reasons for absenteeism. Poor family relation sometimes play role in absenteeism. Psychological factor like peer pressure may contribute to it.

Factors related to teaching stuff

Lectures involved teaching a lot of students in a single large class room and test the ability of a teacher how efficiently he conveys the knowledge and keeps the students attentive. The qualities of teachers, their practices and the relationship they have with their students appears to force the students to miss classes. Class absenteeism due to menstrual disorders is common among female medical students. Getting to bed late in the night and feeling tired in class are other common reasons for absenteeism.

Even though medical students opt for the course by choice, they may find the course work more rigorous and demanding than anticipated. Absenteeism can be one convenient way to escape the curriculum. Participants lack of interest in the subject might be the reason for absenteeism. Lack of interest in the subject matter could be attributed to two reasons: 1) the likelihood that the majority of health science students are assigned to the field probably against their choice; 2) even though medical students elect to be on the medical track, they may find the course work more rigorous and demanding.
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followed online lecture recording instead of classroom lecture. Student must be physically present and mentally receptive for learning to occur.46 Students who choose to skip lecture-based teachings and rely solely on other modes of learning with the class subject are less likely to retain relevant knowledge related to the subject as compared to those who attend the class; subsequently those who absent perform poorly on the examinations.11

One study showed that 80% of medical students chose to attend specific lectures dependent on the lecture topic itself, while another found that 69% of students cite interest in the topic as a key reason for attendance.53,54 Even though the argument on the comparative benefits of different instructional designs (e.g., small group discussion, problem based learning, lectures, tutorials, practical demonstrations, and bedside clinical teaching) continues11, skipping class is expected to be unbeneficial for learning even the best and most sophisticated instructional designs used by educators. Even lecture-based teaching seems to provide substantial benefits for learning to take place despite its didactic in nature55, poor feedback, and inability to engage in authentic practice.11

Lengthy classes are another contributing reason for absenteeism.30 Scheduling one lecture in a day has a negative effect on attendance. Multiple lectures in one day result in better attendance.51

Factors related to teaching material/strategy

The interaction in lecture is part of the professional socialization process in which students observe faculty members and recognize them as role models.46 The lecture-based teachings are capable to enhance skills related to cognitive, affective and psychomotor.47 Historically, reports suggested that attendance is better at lectures compared to small group teaching.48 However, modern publications have suggested that students prefer self-study or smaller teaching sessions, and quote this as a reason for non-attendance at larger group sessions.49 In a recent publication, 70% of students preferred small group teaching to larger lectures but still recognised that lectures form a fundamental part of education.37 Omrod et al50 reports that some students seem to learn better when information is presented through words (verbal learners), whereas others seem to learn better when it is presented in the form of pictures (visual learners). Clearly in a class where only one instructional method is employed, there is a strong possibility that a number of students will find the learning environment less optimal and this could affect their academic performance. Attendance is poor when lecture slides are available to students prior to lectures, compared to when unavailable. This suggests that students believe they can achieve the same level of knowledge from the resources provided regardless of attendance.51 There are numerous positives to accessing online resources. Students often struggle to make organised, thorough lecture notes for revision. Having a template in the form of pre-released slides could potentially rectify this problem and improve revision techniques.52 Accessibility of lecture content in the form of online slides, videos and audios have their own contribution to absenteeism.22 Another study reported that continuous assessment marks were lower in pharmacology students, where students
medical education in Bangladesh. One of the important developments in recent years in medical education in Bangladesh is the establishment of a large number of medical colleges both in govt. and private sector. Currently, there are more than 100 medical colleges in Bangladesh.57

Medical education system in Bangladesh inherited the typical features of colonial education, which is very much on the traditional pattern: lecture-based, teacher-centered, discipline-based, examination-driven, and hospital-oriented.58 Reorientation of medical education is needed along with policy settings to attract students.Mia et al59 conducted a study among three government and four nongovernment medical colleges in Bangladesh and found that the most important reasons for dropouts and defaulters were lacking of personal interest and less capability for understanding the medical subjects, non-friendly and non-cooperative attitude of teachers and content overloaded curriculum; personal illness and illness of family members and poor institutional set up. This review also found the similar reasons why students remain absent in classes. Strict regularity, sincerity and attention should be paid to all types of classes including lectures, clinical, tutorial and practical can change the situation. A coordinated class, tutorials and examination system should be developed in each medical college, so that all students can prepare themselves for examination properly. Sultana et al60 observed that medical students experience a higher level of personal distress during their undergraduate course in Bangladeshi. High levels of stress may have a negative effect on mastery of the academic curriculum. Teachers and examiners at all levels should be friendly and cooperative, and should pay special attention to the students to overcome their weaknesses.

Conclusion

Creating awareness among medical students about the effect of absenteeism on their academic performances may prevent them from skipping classes. Medical colleges also should pay more attention and take immediate measures on those who starting to absent from classes because they might need support from them. Early detection and prevention might prevent unwanted consequences of absenteeism on medical student’s academic performance. Application of strict attendance policy may influence student attendance and medical colleges should reinforce the attendance policy as an effort to improve their student’s academic performance.

Reference


