

Absenteeism and Lateness among Saudi Medical Students at Albaha University, Saudi Arabia: An observational Study

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Abstract:

Background: Student absenteeism affects the learning-teaching process and disturbs the well-being of the class. This study was conducted to determine the factors lead to absenteeism and lateness among undergraduate students of Faculty of Medicine; Albaha University

Methods: This was an observational, descriptive cross-sectional study carried out among 160 undergraduate medical students of Albaha University, Saudi Arabia, during Jan - March 2017. The primary outcome indicator was self-reported absenteeism from lectures in the semester preceding the study period. The study included all regular undergraduate students who were enrolled in the University for at least one semester. The data was entered and analyzed using SPSS version 20. The association between class absenteeism and socio-demographic and behavioral correlates of absenteeism was determined by bivariate and multivariate analyses. Results were reported as crude odds ratios (COR), adjusted odds ratios (AOR) and 95% confidence intervals (CI).

Results: Among the participant, the respondent rate was found to be 94.3 %, and all were males. Of these students, more than two thirds (73.2%) did not missed any hours of the total class hours and were never being notified or warned due to being absent from the class and only and only 5.6 % of the students who participated in the study had received warning for three or more times. There was a significant association between student's performance reflected as his Grade Point Average and absenteeism notification ($p= 0.000$). The main causes revealed by our participants for absenteeism were extra lecture (86.3%), nature of the timetable (85.9%), residence of the student (72.2%), lack of sleep (68.2%), traffic problems (58.4%) lack of interest (58.1%). While the least causes were as follows: financial problems (18.6%) lecturer's performance (19.7%), transportation problems (29.3%) and mate's influences (37.9%).

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I. Introduction

Academic success was correlated to student attendance. Students that were chronically absent or tardy to classes were more likely to struggle academically and score lower on standardized tests .¹ Absenteeism also affects the learning-teaching process and disturbs the well-being of the class .² In quality terms, absenteeism is a waste of educational resources, time and human potential. Student absenteeism also causes rework and wasted time for lecturers .³Numerous factors prompted students to be absent or late to classes. In some studies absenteeism was attributed to the influence of friends or peers, relations with teachers, content of classes, family aspects, bullying, and learning disabilities.⁴ Other studies have characterised some reasons for growing absenteeism, such as: subordinate subject interest, poor and tedious teaching technique, discouraging environment, extreme student socialization, commitment to part-time jobs, insomnia and ill health, poor relationships with teachers.^{5,6} On the other hand some have documented that availability of lectures handout, online slides, videos or audio recordings as sources leading to absenteeism.^{7,8} Also over-sleeping was considered as the primary cause of student absenteeism .⁷ Faculty of Medicine at Albaha University, have obvious policies concerning compulsory attendance during lecture, laboratory and clinical sessions. Class attendance and participation are extremely important to the

learning process and as such are considered in the evaluation of course grade. and when the student attains a level of more than 20% absenteeism the regulation has authority to depart the student from the final exam. Despite the strict rules, absenteeism is an on-going problem in the faculty of medicine; and can considered as a phenomenon need to be investigated; thus, our study was conducted to determine the factors that influencing student’s absenteeism and lateness among undergraduate students of Faculty of Medicine; Albaha University.

II. Subjects and Methods

This was an observational, descriptive cross-sectional study carried out among 198 undergraduate medical students of Albaha University, Saudi Arabia, during the end of the first semester i.e. 20th -30th March 2017. The study targeted students from all academic levels (premed to 6th year) as study population. All the subjects were interviewed using a self-administered questionnaire, the objectives of the study were explained to participants and questions were explained for all students included in the study, and they were informed that their participation was voluntary. All collected data were coded, entered, analyzed and interpreted using the Statistical Package for Social Science (SPSS) version 16.0 (SPSS, Chicago, IL, USA). A Chi-square test was used to observe the association between two categorical variables. A p-value of <0.05 was considered as statistically significant.

III. Results

Out of 210 questionnaires, total of 198 questionnaires with completed data were analysed with a respondent rate of 94.3 %. The main reason for non-participation was unavailability of students in classrooms or during the survey due to clinical or community based activities outside the University. All participant were males and all academic levels were included and were distributed as shown in table (1) below

Table (1): Distribution of Study Participant and Their Academic Level

Academic level	Frequency	percentages
First Year(Premed)	56	28.3%
2 nd Year	22	11.1%
3 rd year	34	17.2%
4 th Year	38	19.2%
5 th Year	24	12.1%
6 th Year	24	12.1%
total	198	100%

Among our study participants more than two thirds (73.2%) did not missed any hours of the total class hours and were never being notified or warned due to being absent from the class, 21.2% were warned one or two times for being absent for more than 10% of the total class hours allocated for the modules during the semester and only 5.6 % of the students who participated in the study had received warning for three or more times (Fig.1).There was strong association between student’s academic level and absenteeism notification during the study semester (p= 0.000) (Table 2).

Regarding the Grade Point Average (GPA) among our participants, most of them (75.8%) have score of 2.75 and above, and we found an association between student’s performance reflected as hisGrade Point Average and absenteeism notification (p= 0.000) as shown in table (3)

Figure (1): Distribution of the Participants According to Their Absenteeism Notification

Table (2): Association of the academic level and Absenteeism Notification

	Number of times being notified due to absenteeism			P value
	Never	1-2 times	3 times or more	
First Year (Premed)	96.4%	3.6%	0%	0.000
2 nd Year	90.9%	9.1%	0%	
3 rd year	64.7%	23.5%	11.8%	
4 th Year	71.1%	28.9%	0%	
5 th Year	54.2%	25.0%	20.8%	
6 th Year	37.5%	54.2%	8.3%	
TOTAL	73.2%	21.2%	5.6%	

Table (3): Association of the Grade Point Average and Absenteeism Notification

Grade Point Average	Number of times being notified due to absenteeism			Total	P value
	Never	1-2 times	3 times or more		
GRADE 1-1.75	0.0%	4.8%	9.1%	1.5%	0.000
GRADE 1.76-2.75	17.9%	31.0%	54.5%	22.7%	
GRADE 2.76 -3.5	23.4%	57.1%	18.2%	30.3	
GRADE 3.6 -4	58.6%	7.1%	18.2%	45.5	

Influence of Student’s personality related factors for absenteeism:

Regarding the Influence of Student’s personality related factors for absenteeism which include lack of sleep, psychological, financial and health problems their response were as shown in table (4); most of the respondents agreed that lack of sleep or sleeping late and their psychological, financial and health problems were considered as personal factors leading to their absenteeism or being late in the class and the overall agreement were 68.2%, 63.5%, and 66.2% respectively. While only 18.6 % agreed that financial problems were considered as a factor for the student’s absenteeism and being late at the class. There is a strong association between the academic level of the respondents and these factors (P=0.000).

Relationship between social issues and student’s absenteeism

family and friends’ factors have been shown to influence student class attendance, as shown in figure (3) among our participants these issues have some influences as 49% of them declare that the familial commitment play a role in the absenteeism of some students specially among students of grade 4 (76.3%) and Grade6 (66.7%) while only 37.9% declare that social issues can lead to student absenteeism. there was a strong association between social issues and student’s absenteeism (p=0.000) table (5).

Influence of academic issues related factors for absenteeism:

Academically, as shown in figure (4) most of the participants reveal that the timetable (85.9%) and the extra lectures (86.3%) lead to increase in their absenteeism levels from the class and lecture attendance and this was clear among students of all academic levels. On the other hand, the teacher attitude, performance and the quality of the lecture have no or little influence of student’s absenteeism; 54.3%,19.7%and 50% respectively as shown in table (6)

Relationship between external issues and student’s absenteeism

Regarding external factors as student’s residence, traffic jam and transportation problem that can have influence on the students towards being absent or late from the class, as shown in figure (5) and table (7), most of our participants agreed that both the distance of the student residence and traffic jam have influence on their absenteeism 72.2% and 58.4 % respectively while only 29.3% of the students have transportation problems

Table (4): Association of the Personality related factors and Absenteeism

Factors		Academic level						Total	P-value
		1 st	2 nd	3 rd	4 th	5 th	6 th		
Lack of sleep	Agree	55.4%	86.1%	50%	63.2%	91.6%	91.7%	68.2%	0.000
	Disagree	28.5%	4.5%	14.7%	23.7%	55.4%	4.2%	16.7%	
Psychological pressures	Agree	41.1%	54.5%	67.7%	63.2%	50.0%	50.0%	63.5%	0.000
	Disagree	33.9%	22.7%	23.7%	23.7%	29.2%	20.9%	24.2%	
Financial problem	Agree	33.9%	9.1%	17.6%	7.9%	20.8%	8.3%	18.6%	0.007
	Disagree	46.4%	50.0%	50.1%	42.1%	54.1%	75.0%	51.0%	
Health problem	Agree	73.2%	40.9%	44.1%	100.0%	54.2%	62.5%	66.2%	0.000
	Disagree	14.3%	13.6%	41.1%	0.0%	20.8%	12.5%	14.1%	
Habitual	Agree	26.8%	31.8%	32.4%	100.0%	37.5%	58.3%	47.5%	0.000
	Disagree	39.3%	40.9%	32.3%	0.0%	33.3%	29.2%	28.8%	

Figure (2): Distribution of the Participants According to Their Absenteeism due to personal related factors

Table (5): Association of the social issues and Absenteeism Notification

Factors		Academic level						Total	P-value
		1 st	2 nd	3 rd	4 th	5 th	6 th		
Familial commitment	Agree	21.5%	54.5%	55.3%	76.3%	37.5%	66.7%	49.0%	0.000
	Disagree	42.8%	13.6%	26.1%	0.0%	45.8%	20.8%	26.2%	
Mates and companions	Agree	32.1%	27.3%	17.6%	76.3%	33.4%	33.3%	37.9%	0.000
	Disagree	51.8%	59.0%	55.9%	0.0%	45.8%	29.1%	38.9%	
Abetment	Agree	48.3%	31.8%	20.5%	63.2%	20.8%	45.8%	40.9%	0.002
	Disagree	30.3%	50.0%	64.7%	23.7%	62.5%	41.6%	42.4%	

Figure (3): Distribution of the Participants According to Their Absenteeism influenced by social issues

TABLE (6): Association of the academic problems and Absenteeism

Factors		Academic level						Total	P-value
		1 st	2 nd	3 rd	4 th	5 th	6 th		
Uninterested modules	Agree	51.8%	27.2%	47.0%	100%	41.7%	66.7%	58.1%	0.000
	Disagree	32.1%	45.4%	29.4%	0%	41.7%	16.6%	26.3%	
Poor performance	Agree	28.5%	22.7%	17.7%	0.0%	16.7%	33.3%	19.7%	0.029
	Disagree	48.3%	45.5%	52.9%	57.6%	50.0%	33.3%	43.5%	

Lecturer	Agree	45.5%	45.4%	52.9%	65.8%	66.7%	54.2%	54.3%	0.000
	Disagree	27.2%	45.4%	20.5%	21.0%	12.5%	25.0%	24.9%	
Quality of the lecture	Agree	33.9%	31.8%	55.9%	76.3%	50.0%	54.2%	50.0%	0.000
	Disagree	44.6%	45.5%	17.6%	23.7%	20.9	29.2%	31.3%	
Timetable 1	Agree	60.7%	91.2%	91.2%	100.0%	100%	95.8%	85.9%	0.000
	Disagree	21.4%	2.9%	2.9%	0.0%	0.0%	0.0%	7.6%	
Extra lectures	Agree	62.5%	90.9%	90.9%	100.0%	100%	95.8%	86.3%	0.000
	Disagree	25.0%	9.1%	9.1%	0.0%	0.0%	0.0%	9.7%	

Figure (4): Distribution of the Participants According to Their Absenteeism and academic problems

TABLE (7): Association of the external factors and Absenteeism

Factors		Academic level						Total	P-value
		1 st	2 nd	3 rd	4 th	5 th	6 th		
Residence far away	Agree	62.5%	72.8%	53.0%	100.0%	75.0%	75.0%	72.2%	0.000
	Disagree	25.0%	0.0%	17.7%	0.0%	16.6%	8.3%	13.2%	
Traffic problem	Agree	62.5%	86.4%	54.5%	23.7%	83.3%	58.4%	58.4%	0.029
	Disagree	23.2%	0.0%	21.2%	28.9%	16.7%	12.5%	19.3%	
transportation	Agree	42.9%	36.3%	32.4%	0.0%	41.7%	20.9%	29.3%	0.000
	Disagree	34.0%	36.3%	32.4%	100.0%	37.5%	50.0%	49.0%	
Communication	Agree	25.0%	13.6%	14.7%	76.3%	16.7%	37.5%	32.3%	0.000
	Disagree	60.7%	86.2%	70.6%	23.7%	62.5%	45.8%	54.5%	

Figure (5): Distribution of the Participants According to Their Absenteeism influenced by external factors

IV. Discussion

In our study, we try to investigate causes of absenteeism and lateness from student's perspective in order to raise the problem to our faculty leaders so as to help spread of this problem among other students which at last can affect the students' performance and faculty output since the faculty had just graduated the 2nd batch of medical students that shows a satisfactory competency level among other graduated students.

Beside strict attendance regulation put force by the faculty, still there was some students (5.6 %) do not obey these rules as shown by our study findings, this finding was similar to a study done at Umm Alqura University, Makkah, KSA⁹ and other studies.^{10,11}

The main factors that influence student attendance and lateness and were agreed upon by most of our participants were found to be nature of the timetable and associated extra lectures outside the timetable, as the timing of the lectures start at early morning that make students arrive late or be absent in most of the early morning lectures this may attributed to the pattern of sleeping as medical students sleep late because of the exams preparation since Albaha faculty of medicine adopt the integrated curriculum with modules running through whole academic year. this finding was the same as a study carried out among third year medical students attending the King Saud University, Saudi Arabia.¹²

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