

EDITORIAL

ABSENTEEISM AMONG MEDICAL STUDENTS

Adnan Khan, Nargis Noman, Muhammad Shafiq, Shahab Falak, Ahmad Daud, Muhammad Asghar Essa, Muhammad Sani

Gomal Medical College MTI, D.I.Khan KP, Pakistan

Absenteeism is defined as regularly skipping scheduled classes without a valid justification. It is a clear indicator of poor personal performance and low motivation among students. This behavior undermines academic success, professional development, and societal transformation, all of which rely heavily on consistent class attendance. Regular participation in classes fosters essential job-related skills such as tenacity, problem-solving, and teamwork.¹ Higher education institutions view absenteeism as a significant concern due to its detrimental impact on learning and academic performance.² Physical lectures are vital for introducing complex subjects, exploring diverse perspectives, and synthesizing clinical or laboratory experiences. They promote reflection, comprehension, and the development of scientific and clinical thinking.³ In preventive health education, class attendance is crucial for academic success, as lectures remain a fundamental part of the curriculum, engaging students in real-time learning and assessment. However, the rise of video-captured lectures and online self-learning resources has led to a decline in classroom attendance in medical colleges.⁴ Research across various countries has investigated factors contributing to absenteeism in medical schools. At Hawassa University of Medicine in Ethiopia, a cross-sectional study conducted in 2013 identified key factors: preparing for other exams and lack of interest were top student-related reasons, while teaching style and availability of lecture materials were the primary college and external factors.²

Similarly, a 2015 survey at the Rajiv Gandhi Institute of Medical Sciences in India found that laziness and extracurricular activities were major student-related factors, with lengthy classes and unclear instruction being significant college-related issues. Illness and entertainment were common external influences.⁵ At the Government Medical College in Chandigarh, India, a study highlighted gender differences in absenteeism causes. Male students cited lack of self-discipline, late rising, and socializing as primary reasons, while female students pointed to health issues and increased workload. Both genders reported long lectures and poor teaching styles as college-related factors, and easy access to online content and inconvenient class schedules as external factors.⁶ In our institution at Gomal Medical college, a survey has been conducted regarding this subject, but it is not yet published. In this it is identified passing exams without attending lectures, preferring self/group study, and disrupted sleep cycles as major student-related factors. Non-interactive classes and perceived lack of impact on grades were significant college factors, while poor hostel conditions were key external influences. To address these issues, institutions should consider practical and value-based teaching methods, counseling for sleep disturbances, and making the curriculum more engaging to reduce reliance on self-study. Improving teaching methodologies with the support of medical education technology units and conducting further research to assess these factors is also recommended.

KEY WORDS: Medical students; absenteeism; student factors; college factors; external factors.

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Corresponding Author:

Dr. Muhammad Shafiq
Associate Professor
Department of Orthopaedic
Gomal Medical College MTI
D.I.Khan, KP, Pakistan
E-mail: drshafiqorthosurg@gmail.com

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CONFLICT OF INTEREST
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