

Original Research Article

Students' perspective on absenteeism: a cross-sectional study among students at government medical colleges of Western Maharashtra

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ABSTRACT

Background: The professional courses as undergraduate medical education need high theoretical and clinical classes attendance as those students will be future doctors and will deal with the health and disease of the public. In spite of implementing strict policies regarding student attendance, the rate of absenteeism in medical colleges remains high and is a growing apprehension a phenomenon that is also on the rise in universities worldwide.

Methods: A cross-sectional study in few Governments Medical Colleges of Western region of Maharashtra using a self-administered questionnaire. Data was collected and analysed through Google forms.

Results: Preparatory leave before every examination required (50.7%), air-conditioned classrooms (49.7%), good ventilated classrooms (44.1%), interactive teachers (41.8%), decrease lecture duration (38%), more practical less theory classes (37.6%) and good transportation facilities (34.3%) were various major suggestions given by students to increase the overall attendance.

Conclusions: Feedback from students must be repeatedly considered while designing and revising the curriculum to reduce absenteeism.

Keywords: Absenteeism, Medical students, Preparatory leave

INTRODUCTION

According to guidelines under graduate medical education regulation 2023 (GMER) dated 12 June 2023, the learner must have 75% attendance in theory and 80% in practical in each phase of instruction in that subject.¹ Attendance of undergraduate medical (MBBS) students is a crucial component of Indian medical graduate training programme. The professional courses as undergraduate medical education need high theoretical and clinical classes attendance as those students will be future doctors and will deal with the health and disease of the public.² In spite of implementing strict policies regarding student

attendance, the rate of absenteeism in medical colleges remains high and is a growing apprehension a phenomenon that is also on the rise in universities worldwide.³ Several studies have been conducted to explore reasons for absenteeism, which showed lack of subject matter interest, poor teaching strategies, unfavorable learning environment class and examination schedule, quality of teaching materials, assessment methods, lifestyle-related pressures and poor relations with lecturers.⁴ Lecture contents have become more accessible in the form of slides, videos, audios over the internet for self-learning purpose, which may contribute to the absenteeism.⁴ In this study we are trying to

understand students’ perspective regarding attendance and the curriculum. This study certainly tries to bridge the communication gap between students and teachers. Hence, the present study was conducted to explore factors responsible for absenteeism and measures to circumvent this issue.

METHODS

It is a descriptive cross-sectional study conducted at a given point in time (24 hours-time was given to respond to questionnaire) 31/12/2023 to 01/01/2024. This study was conducted in online mode at Government Medical College of Alibag. Ethical permission was taken from institutional ethics committee before conducting this online survey. Utmost care was taken to maintain the confidentiality of the data and to not disclose any

student’s identity. A questionnaire was prepared with the help of various studies conducted on absenteeism like Gul et al, Garg et al, Din et al and Ocak et al.^{3,5,10,11} Interaction with students also contributed few measures to reduce absenteeism. The questionnaire was validated by various disciplines faculty in our institute. The participants were full time enrolled undergraduate medical (MBBS course) students of all phases of various government medical colleges of western Maharashtra. Questionnaire shown in Table 1 with the help of google form was circulated in WhatsApp group of undergraduate medical students. Time given to collect responses was 24hrs and limited to one response only. Consent was taken and forms were filled voluntarily by students without any instructions as response to all questions were mandatory to submit this form. Data collected was analyzed through descriptive statistics.

Table 1: All questions on questionnaire.

Question no.	Option no.	Questions
1		Name
2		Roll number
3		Age
4		Marks in percentage in SSC
5		Marks in percentage in HSC
6		Marks in biology in percentage in HSC.....
7		Marks in physics in percentage in HSC
8		Marks in English in percentage in HSC
9		Educational qualification of mother
10		Educational qualification of father
11		Number of siblings
12		Why you have chosen MBBS course to study? Check all that apply.
	A	Career prospects
	B	Service to nation
	C	Give treatment to non-affording patients
	D	Monetary gains only
	E	Parents decision
	F	Friends’ advice
	G	Other career options were not available
	H	Interested in superspecialist courses
	I	For Social reputation and show off
	J	To marry a doctor
13		Percentage of marks/ expected marks in first MBBS.....
14		Expected marks in Second MBBS in percentage
15		Reasons for absenteeism among MBBS students-check all that apply.
	R1	Not interested in MBBS course
	R2	Not interested in theory lectures
	R3	Not interested in clinical postings
	R4	Do not like teaching by Teachers
	R5	Hostel conditions not good
	R6	Bad weather conditions
	R7	Difficult to tolerate Summer
	R8	Difficult to travel during rainy season
	R9	Interested in cultural activities only
	R10	Interested in sports only
	R11	Violence in classroom by classmates
	R12	Mental disturbance in classroom by classmates
	R13	Do not like interaction with classmates

Continued.

Question no.	Option no.	Questions
	R14	Poor seating arrangement in classroom
	R15	ill ventilated classroom
	R16	Interested in self study only
	R17	Threatening environment by teachers
	R18	Threatening environment by classmates
	R19	Lecture timings are inconvenient
	R20	Clinical postings timing inconvenient
	R21	Not interested to talk to patients
	R22	Lecture content available online
	R23	Joined PG NEET/ NEXT coaching classes
	R24	feeling exhausted after classes
	R25	Prefer to study at home in comfortable environment
	R26	Hostel food is not good
	R27	Cannot tolerate hostel food
	R28	Do not feel like to study and attend classes
	R29	Tired of studying
	R30	You like hanging out with friends during lecture timings
	R31	You feel mentally stressed or overburdened
	R32	You are working for earning money
	R33	Your income is the only source of income for family
	R34	You feel stressed because of family
	R35	You have to take care of your siblings at home
	R36	Teachers fail to create interest in lecture
	R37	Your personal physical and mental health issues
	R38	Your parents physical and mental health issues
	R39	Family problems
	R40	Interested in postgraduate specialty learning only
	R41	Need to go home frequently on Weekends
	R42	Like to continue leave before and after holidays
	R43	Studying for exam; Preparatory leave required before every exam
	R44	Other.....
16		Preparatory leave duration?
	A	One week before every exam
	B	Two weeks before every exam
	C	Three weeks before every exam
	D	Four weeks before every exam
	E	Leave not required
17		What measures can increase the attendance of MBBS students? Check all that apply.
	M1	Air conditioned classrooms
	M2	Good ventilated classroom
	M3	Good audiovisual aids
	M4	Interactive teachers
	M5	Increasing lecture timing
	M6	Decreasing lecture timing
	M7	Good hostel rooms with AC and all facilities
	M8	Good transportation facilities to and fro to college
	M9	Making available more good food options
	M10	Change in teaching pattern required
	M11	More self study activity like seminar presentation
	M12	More practical and less theory in classroom
	M13	More frequent exams instead of lectures
	M14	More frequent quiz and debates instead of lectures
	M15	Students must be given choice to choose the exam dates which are convenient to them
	M16	Sports and extracurricular activities must be conducted daily
	M17	Sports and extracurricular activities must be conducted weekly
	M18	Stipend required for MBBS students
	M19	Teaching environment need to be friendly

Continued.

Question no.	Option no.	Questions
	M20	Attendance should not be counted for eligibility of MUHS (summative)exams
	M21	MBBS and post graduate course needs to be merged together
	M22	Postgraduate options must be available from phase 3 onwards without entrance exam
	M23	Postgraduate options must be available from phase 4 onwards without entrance exam
	M24	MBBS course duration need to be reduced
	M25	Total teaching duration need to be reduced
	M26	Broad specialty/post graduate courses must be started after HSC instead of after clearing MBBS
	M27	Preparatory leave must be provided before every exam
18		How frequently exams must be conducted in one year?
	A	Weekly
	B	Monthly
	C	Quarterly
	D	Annually
	E	Daily
19		Total duration of Teaching hours- daily must be reduced to (currently 8 hours)
	A	6 hours
	B	5 hours
	C	4 hours
	D	2 hours
	E	8 hours required
20		Number of Subjects per year must be reduced to (currently 3)
	A	Only 1 subject per year
	B	Only 1 subject for 6 months
	C	Only 1 subject for 3 months
	D	Currently 3 subjects per year is good
21		Introduction of Clinical subjects
	A	Clinical subject exams must be conducted in phase 2
	B	Clinical subject exams must be conducted in phase 3
	C	Clinical subject exams must be conducted in respective phases only
22		Your suggestions to increase attendance of students.....
23		Your suggestions to Teachers regarding attendance and teaching
24		Your Suggestions to national medical commission regarding MBBS course and postgraduate courses.....

RESULTS

The present study was conducted online with the help of Google forms. Questionnaires were filled in by undergraduate students of various phases of government medical colleges of western region of Maharashtra. A total of 306 students responded to this form. Out of 306 students 199 students (65%) 89 students (29%) scored more than 90% marks in SSC exam and HSC exam respectively. Out of 306 students, 148 (48%) scored more than 90% marks in biology. The 231 students (75%) scored more than 75% marks in English (HSC). Regarding educational qualification of parents: 148 mothers (48%) and 205 fathers (67%) were graduate and above. Out of 306, 102 students (33.3%) have two and more than two siblings, 159 students (51%) have one sibling while 45 (14%) students have no siblings.

Career prospects (54.6%), ‘give treatment to non affording patients’ (51.4%) and service to nation were most common reasons given by students to choose MBBS course to study. Other reasons were ‘interested in super speciality courses’ (35.1%), parents’ decision

(19.9%), ‘monetary gains only’ 7.4%, ‘social reputation’ (7.1%), ‘to marry a doctor’ (6%) and ‘friends’ advice’ (1.1%) shown in Figure 1.

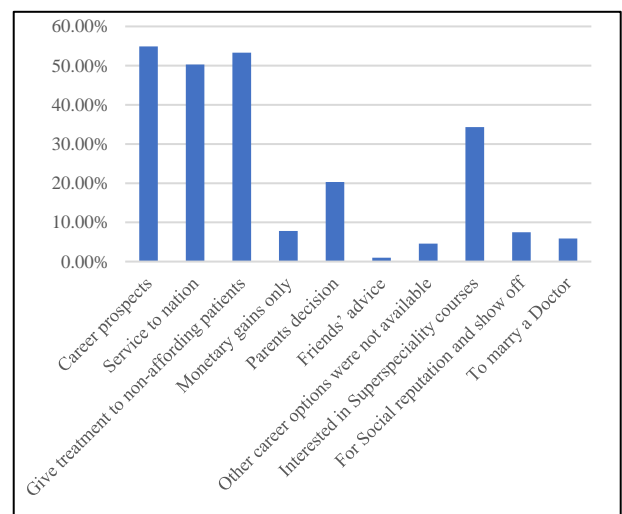


Figure 1: Reasons to choose MBBS course to study.

Table 2: Reasons for absenteeism in decreasing order of frequency.

Reason. no	Reasons for absenteeism among undergraduate medical students	Percentage (%)
R43	Studying for exam; preparatory leave required before every exam	42.2
R24	feeling exhausted after classes	38.9
R7	Difficult to tolerate summer	30.1
R8	Difficult to travel during rainy season	30.1
R25	Prefer to study at home in comfortable environment	29.4
R15	ill ventilated classroom	27.1
R26	Hostel food is not good	23.9
R6	Bad weather conditions	20.9
R2	Not interested in theory lectures	19.6
R22	Lecture content available online	17.6
R16	Interested in self study only	16.7
R37	Your personal physical and mental health issues	15.4
R31	You feel mentally stressed or overburdened	14.7
R27	Cannot tolerate hostel food	14.4
R36	Teachers fail to create interest in lecture	14.4
R5	Hostel conditions not good	14.1
R14	Poor seating arrangement in classroom	12.7
R4	Do not like teaching by teachers	12.4
R41	Need to go home frequently on weekends	11.8
R19	Lecture timings are inconvenient	10.8
R42	Like to continue leave before and after holidays	9.5
R23	Joined PG NEET/ NEXT coaching classes	9.2
R29	Tired of studying	7.8
R13	Do not like interaction with classmates	6.5
R28	Do not feel like to study and attend classes	6.5
R39	Family problems	5.6
R12	Mental disturbance in classroom by classmates	4.2
R10	Interested in sports only	3.6
R17	Threatening environment by teachers	3.3
R38	Your parents physical and mental health issues	2.9
R3	Not interested in clinical postings	2.6
R30	You like hanging out with friends during lecture timings	2.6
R1	Not interested in MBBS course	2.3
R34	You feel stressed because of family	2.3
R9	Interested in cultural activities only	2
R44	Other.....	2
R11	Violence in classroom by classmates	1.6
R40	Interested in postgraduate speciality learning only	1.6
R18	Threatening environment by classmates	1.3
R35	You have to take care of your siblings at home	1
R20	Clinical postings timing inconvenient	0.7
R21	Not interested to talk to patients	0.7
R32	You are working for earning money	0.7
R33	Your income is the only source of income for family	0.7

Among reasons for absenteeism in undergraduate students: 'studying for exam; preparatory leave required before every exam' (42.2%) the most common reason for absenteeism, followed by 'feeling exhausted after classes' (38.9%), 'difficult to tolerate summer' (30.1%), 'difficult to travel during rainy season'(30.1%) and 'prefer to study at home in comfortable environment' (29.4%). Other reasons of absenteeism is shown Table 2 and Figure 2.

As preparatory leave for examination is most common reason for absenteeism, we also asked students regarding duration of preparatory leave. Most preferred duration was 1 week (27.1%), followed by two weeks (27.1%), 4 weeks (18.7%), three weeks (13.7%) before examination while 4.6% students said no leave is required as shown in Figure 3. Max no. of students (68.3%) said, assessments/ examinations can be conducted quarterly, followed by monthly (20.6%), annually (7.8%) and weekly (3.3%/) as shown in Figure 4.

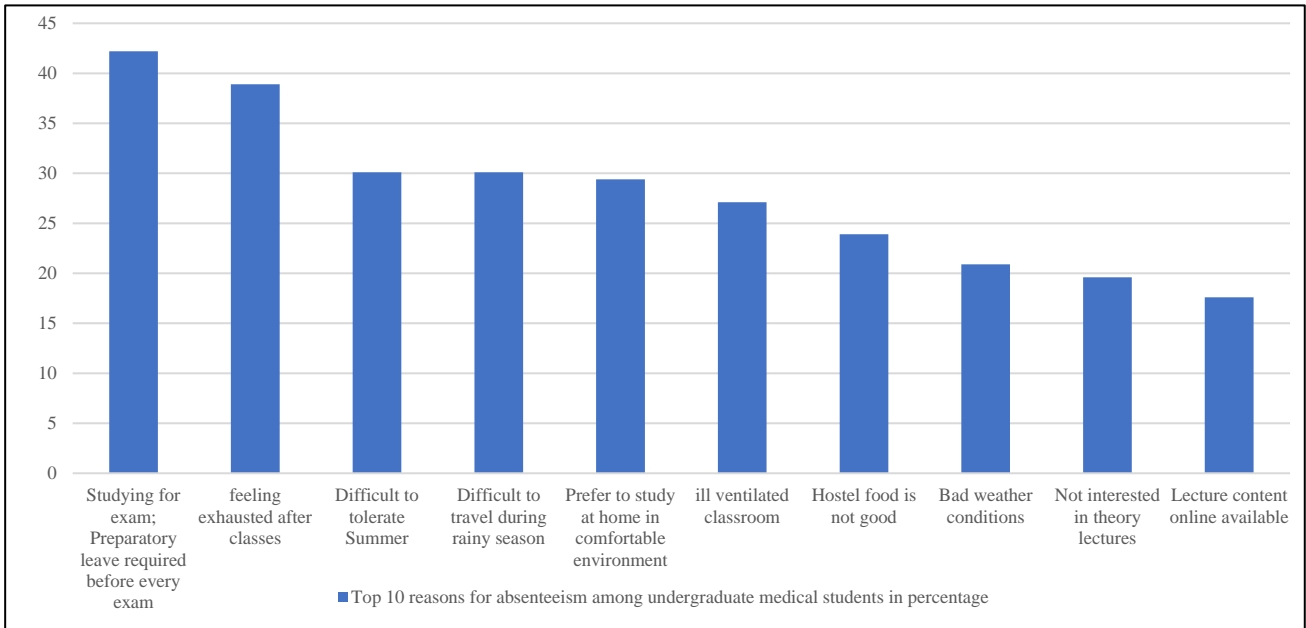


Figure 2: Top 10 reasons for absenteeism among undergraduate medical students in percentage.

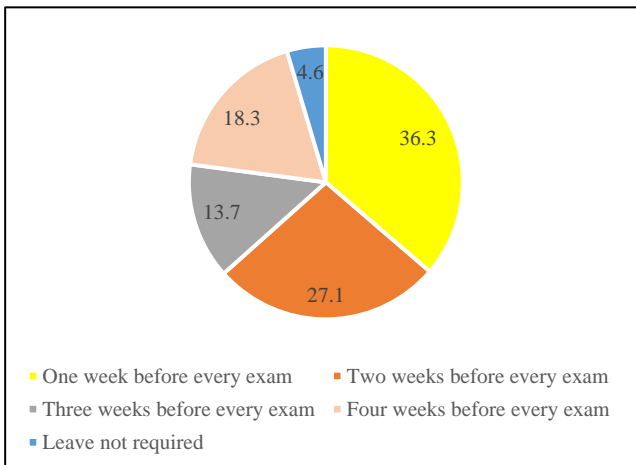


Figure 3: Students perspective on duration of preparatory leave in percentage.

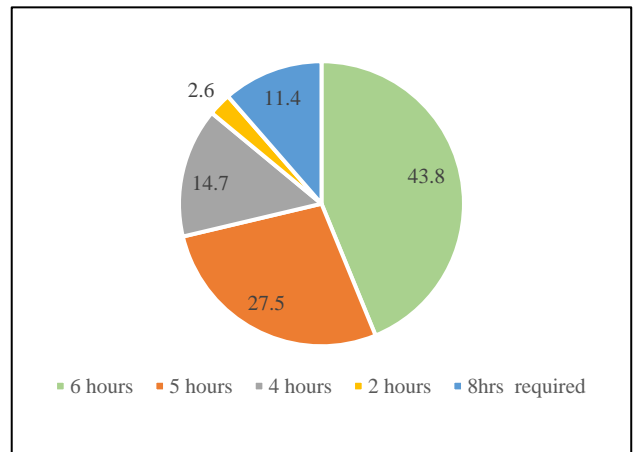


Figure 5: Students perspective on daily teaching hours in percentage.

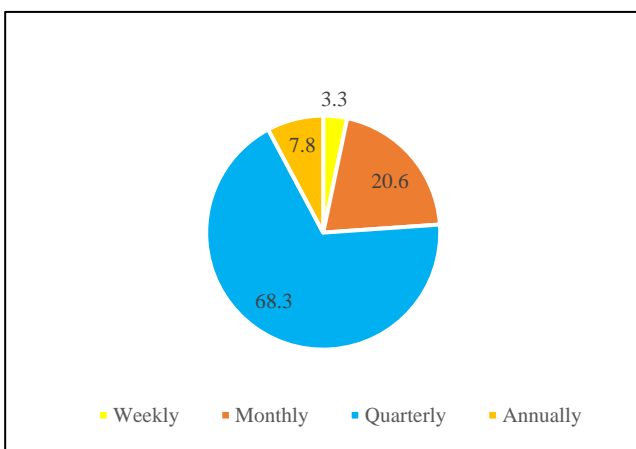


Figure 4: Students perspective on frequency of examinations required per year in percentage.

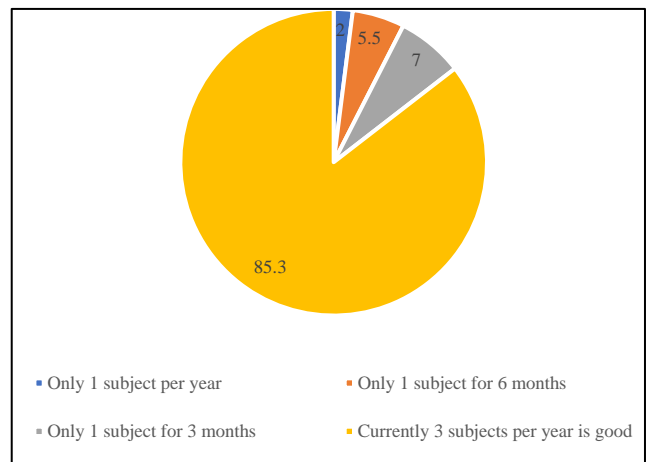


Figure 6 showing students perspective regarding study subjects per year in percentage.

As per students responses, number of daily teaching-learning hours including postings must be reduced to 6 hours suggested by 43.8% students, followed by 5 hours (27.5%), four hours (14.7%) and two hours (2.6%), while 11.4% students feel eight hours is optimum and no change is required as shown in Figure 5.

Maximum number of students (85.3%) were ready to study three subjects per year as per current scenario as shown in Figure 6.

Figure 7: Regarding students' perspective on introduction of clinical subjects (clinical postings subjects), 50.3% students said, 'examination/ assessment must be conducted in respective phase only' while 31% and 17% students said it can be conducted in phase 2 and phase 3 respectively.

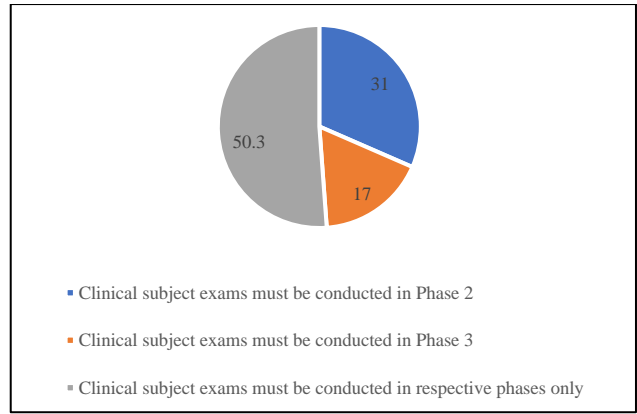


Figure 7: Students perspective on introduction of clinical subjects in percentage.

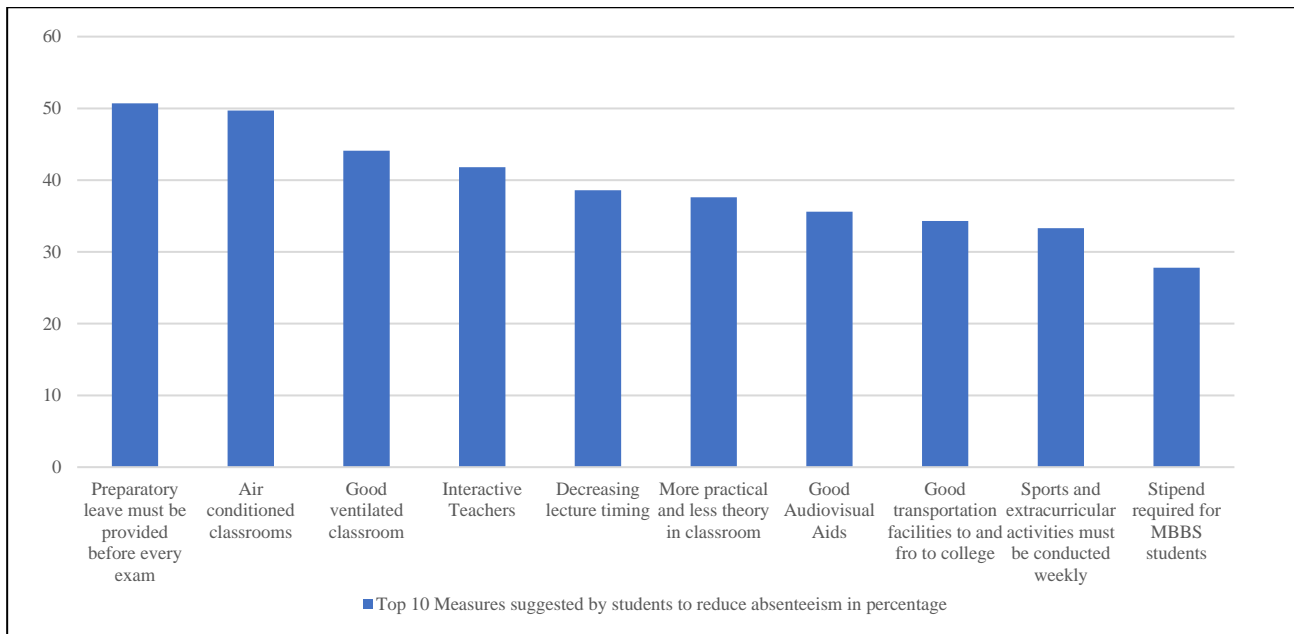


Figure 8: Top 10 measures suggested by students to reduce absenteeism in percentage.

Table 3: Measures suggested by students to reduce absenteeism in decreasing order of frequency in percentage.

Sr. no	Measured suggested by students to reduce absenteeism	Percentages (%)
M27	Preparatory leave must be provided before every exam	50.7
M1	Air-conditioned classrooms	49.7
M2	Good ventilated classroom	44.1
M4	Interactive teachers	41.8
M6	Decreasing lecture timing	41.8
M12	More practical and less theory in classroom	38.6
M3	Good audiovisual aids	37.6
M8	Good transportation facilities to and fro to college	35.6
M17	Sports and extracurricular activities must be conducted weekly	34.3
M18	Stipend required for MBBS students	33.3
M9	Making available more good food options	27.8
M7	Good hostel rooms with AC and all facilities	27.1
M20	Attendance should not be counted for eligibility of MUHS (summative) exams	26.5
M10	Change in teaching pattern required	24.5
		22.2

Continued.

Sr. no	Measured suggested by students to reduce absenteeism	Percentages (%)
M14	More frequent quiz and debates instead of lectures	19.9
M19	Teaching environment need to be friendly	19
M25	Total teaching duration need to be reduced	19
M11	More self study activity like seminar presentation	16.3
M24	MBBS course duration need to be reduced	13.4
M15	Students must be given choice to choose the exam dates which are convenient to them	10.8
M16	Sports and extracurricular activities must be conducted daily	10.5
M21	MBBS and post graduate course needs to be merged together	8.2
M13	More frequent exams instead of lectures	7.2
M23	Postgraduate options must be available from phase 4 onwards without entrance exam	5.9
M22	Postgraduate options must be available from phase 3 onwards without entrance exam	5.2
M26	Broad specialty/post graduate courses must be started after HSC instead of after clearing MBBS	3.6
M5	Increasing lecture timing	2.9

Most common measure suggested by students to decrease absenteeism is 'preparatory leave must be provided before every exam (50.7%)' followed by 'air-conditioned classrooms' (49.7%), 'good ventilated classroom' (44.1%), 'interactive teachers' (41.8%) and 'decreasing lecture timing' (38.6%). Rest of the measures are shown in Table 3 and Figure 8.

Regarding suggestion of students to teachers: To summarize the 306 suggestions: Attendance should not be the eligibility criteria for appearing examinations, sessions must be more interactive, good audiovisual aids and 3D videos required during session and teaching must be conducted in small batches.

Regarding suggestion of students to NMC: to summarize the 306 suggestions: Must ensure provision of better infrastructure to students. Air-conditioned classrooms with advanced audiovisual aids, reduce MBBS course duration, increase number of PG seats. Reduce the number of overall teaching hours (daily, weekly and annually) and reduce eligibility criteria of attendance to 50%.

DISCUSSION

The professional courses as undergraduate medical education need high theoretical and clinical classes attendance as those students will be future doctors and will deal with the health and disease of the public.² Therefore, if a medical student frequently misses the classes and this does not only mean a loss for him/her, but also the whole community, as without getting proper knowledge, clinical skills, and having a good clinical career that satisfies the patient's expectations will be very challenging.² In our study we have tried to gather students' perspectives regarding absenteeism and measures to improve attendance. This study represents the views of undergraduate medical students of various government medical colleges of western region of Maharashtra. In the present study, out of 306 students, 148 (48%) scored more than 90% marks in biology

suggesting their positive attitude towards the studies and were serious about their study course. As 75% students scored more than 75% marks in English (HSC) this indicates that there is no learning difficulty with respect to language. In our study, scores of students reveal that they are very much motivated in studies and have less influence of family issues on scores. The major reasons reported by the study participants of Desalegn et al for missing lectures were preparing for another examination, inconvenient class schedule, lack of interest in the subject matter, dislike of teaching style and the ease of understanding the subject matter without guidance.⁶ Most of the teachers use power point presentations to deliver lectures and changing slides back and forth makes the lecture monotonous and less interactive and students lose interest.³ Gul et al stated academic reasons (38%) for absenteeism were disliking teaching style and inconvenience class schedule was the first reason, while preparing for an examination was the second most frequent cause of absenteeism among students.³ In our study we also noted commonest reason of absenteeism was preparing for examination (42%). Feeling exhausted after classes (38.9%), difficult to tolerate summer (30.1%), difficult to travel during rainy season (30.1%) were common reasons for absenteeism in our study. In Western region of Maharashtra, mostly near coastal regions temperature is usually above 35 degrees celsius during summer with humidity above 70%; while during rainy season humidity reaches above 85% and with continuous heavy rainfall students find difficulty in travelling. Thus, in our study we noted that climatic conditions in Western regions of Maharashtra contribute towards major causes of absenteeism among the medical students. Hussaini stated that, 'climate can have both direct and indirect impacts on students' education results.'⁷ Randell et al stated that 'hot classrooms may prevent children from learning effectively, and teachers from teaching effectively, due to discomfort, exhaustion, or slowed cognition.'⁸ High temperatures may also lead to increased absenteeism in schools.' Thus, in our study we noted majority of reason of absenteeism are related to climate change and high temperature.

In our study, 29.4% students preferred to study at home comfortably instead of attending classes which is the 5th reason of absenteeism. Students of government medical colleges usually come from middle class financial family background with availability of comfortable environment at home for studying. Sharmin et al stated that, ‘the comforts of home are desirable from a lonely and discouraged student at medical colleges. A student remain absent because the class environment is not conducive enough for learning.’⁹ Daubuni et al also noted, poor college infrastructure, poorly ventilated overcrowded lecture halls, prolonged classes, lack of clarity about the topic among lecturers while teaching, unfavorable teaching strategies, poor teaching skills of lecturers, dissatisfaction about lecturers’ teaching methods, and lack of interest in theoretical lectures than the practical and clinical sessions being the prominent reasons of absenteeism.² Our findings with respect to absenteeism are in accordance with Preeti et al, Din et al and Daubuni et al.^{2,10,11} In our study, ‘lecture content available online’ was one of the reasons of absenteeism which is in accordance with Eisen et al and Desalegn et al.^{6,12} Eisen et al noted that, class attendance was not associated with improved academic performance in said course.¹² He also observed that, students who preferred to learn by watching online videos demonstrated a higher level of performance than others and there was no statistically significant relationship between class attendance and performance on the final examination on multivariate analysis.⁹ Desalegn et al also didn’t find a clear and significant association between absenteeism and academic achievement among the study participants.⁶

The impact of students not being engaged in the classroom has many broad-reaching effects, including poor morale of both students and faculty members.¹³ In a study, Garg noted students’ recommendations to increase classroom attendance were regular assessment, decreased duration of lectures, introduction of mentor-mentee program, small group teaching, revision before exams, preparatory leave, interactive and exam-oriented teaching learning and clinical correlation of content.¹⁰ We also noted similar measures suggested by students to improve classroom attendance. As per GMER 2023, and competency based undergraduate curriculum syllabus for pathology from A. Y. 2019-20 (MUHS) “assessment in CBME is ongoing process, no preparatory leave is permitted.” to undergraduate Medical students during the MBBS course, while in our study “preparatory leave required” is the topmost on the list to improve the attendance and “studying for examination” is the commonest reason of absenteeism.^{1,14} Bin Saeed et al and Rao et al observed that ‘A high number of students remain absent in the pre examination period, which could be explained by their allotting of this time for more intensive study before the exams.’^{15,16} Alghamdi et al stated that ‘Absence in the pre-exams period and at the end of the year is may be due to lack of preparedness, so the students prefer to spend time on study rather than attending lectures’.¹⁷

Limitations

The main limitation of this study is that it was not feasible to study the impact of absenteeism on student’s performance as attendance record of students of different colleges were not accessible.

CONCLUSION

Preparing for examination (42%) and feeling exhausted after classes (38.9%) were prominent reasons for absenteeism in government medical colleges of Western region of Maharashtra. Preparatory leave, better infrastructure facilities, interactive teaching and reducing teaching hours might help in improving attendance of students. Active and enthusiastic faculty with innovative ideas is the need of the hour to capture the attention of the students and bring them back to their classrooms. Feedback from students must be repeatedly considered while designing and revising the curriculum to reduce absenteeism. Currently, the curriculum is Student-centric but maybe, it is not student friendly. This trend should be taken seriously as it will have long-term repercussions for health delivery.

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Conflict of interest: None declared

Ethical approval: The study was approved by the Institutional Ethics Committee

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