

**RESEARCH PAPER****Factors Influencing Absenteeism among Nurses of a Tertiary Care Hospital of Lahore****<sup>1</sup>Bushra Ashraf\* and <sup>2</sup>Rehana Ashraf**

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**\*Corresponding Author** [whitepearl2540@gmail.com](mailto:whitepearl2540@gmail.com)**ABSTRACT**

Objective of the study is to assess the factors influencing absenteeism among nurses of a Tertiary Care Hospital of Lahore. Absenteeism in nursing, characterized by an employee's complete absence from work for a day, poses a significant challenge for Nurse Managers. A quantitative cross-sectional study explored absenteeism determinants among nurses in Lahore's public sector. A sample of 114 staff nurses from a tertiary healthcare facility was selected using convenience sampling. The result of study showed that Health problems dominate as the primary factor (40.1%), emphasizing the substantial impact on the situation. Work environment (22.5%) and personal/family issues (26.5%) also play significant roles, highlighting the multifaceted nature of the problem. The study concluded that Health problems, working conditions, personal and family matters, and stress are identified as key factors contributing to absenteeism. To reduce absenteeism among nurses, enhance working conditions and time management training should be provide.

**Keywords:** Emotional Experience, Familial Relationship, Financial, First-Wives, Polygyny**Introduction**

Absenteeism, commonly understood as the act of shirking one's duties or responsibilities, is often seen as an indicator of subpar performance (Abdelrahman & Abdelkader, 2017). Specifically, it refers to the situation in which an employee is entirely absent from the workplace for an entire day (Mothiba et al., 2018). Within the field of nursing, absenteeism presents a significant challenge, given that nursing is inherently built upon the principles of compassion and care. Nurse Managers grapple with this issue on a daily basis, as its ramifications extend beyond just impeding patient care; it also casts a negative shadow on staff morale and ethical considerations (Silva & Merino, 2017).

This issue of nurses' absenteeism in clinical settings reverberates throughout the healthcare delivery system (Davey et al., 2009). Reports from hospital administrators consistently point to nursing staff frequently missing shifts on a weekly basis, and alarmingly, there are instances where nursing staff sign in for morning shifts even when they don't intend to show up (Johnson et al., 2021).

The root causes of absenteeism among staff nurses are multifaceted. They include factors such as overwhelming workloads, stress linked to their professional duties, job dissatisfaction, staff shortages, concerns about their salaries, inflexible schedules, management behaviors, and the presence of illnesses (Al-Sharif et al., 2017). Head Nurses have resorted to issuing warnings to curb continuous absenteeism, aiming to set an example that might help mitigate the problem (Bahalkani et al., 2011). Adding to the complexity of the issue, roughly half of the staff nurses fail to attend weekly training sessions organized by the hospital management to keep them updated (Saini et al., 2011).

It's imperative to recognize that absenteeism is a pervasive concern that extends beyond the nursing profession and is equally relevant across various sectors (Kumar et al., 2021). Organizations rely on their workforce for effective operation, making employee

absenteeism a substantial challenge. This phenomenon can be triggered by various factors, including sickness, emergencies, and accidents, and it poses a considerable problem both on a global scale and in terms of financial implications for organizations (Noura et al., 2020).

Within healthcare institutions, nursing represents a pivotal department, constituting a substantial portion of the workforce (Ali et al., 2021). Nurses are integral to the healthcare system and play a central role in patient care, effectively serving as the face of the hospital. The global concern regarding nurses' absenteeism leads to staff shortages, directly impacting patient care, organizational productivity, and the routine operations of healthcare facilities (Yu et al., 2020).

The disruptive nature of nurses' absenteeism within healthcare settings can be attributed to a multitude of factors, ranging from job dissatisfaction, illness, family responsibilities, and burnout to overwhelming workloads, adverse environmental conditions, and workplace-related challenges (Saruan et al., 2019). Organizational structural aspects, such as working conditions and time pressures, also contribute to nurses' absenteeism. Insufficient compensation can further demotivate nurses and contribute to their absenteeism (Kuster et al., 2021).

This study aims to delve into the impact of workload, physical working conditions, and salary on nurse absenteeism, recognizing that overwork and physical exhaustion due to excessive burdens and challenging working conditions are critical factors leading to nurse absenteeism.

## Literature Review

The challenges faced by nursing professionals in demanding work environments are underscored by high workloads and daily exposure to physical and emotional exhaustion resulting from patient suffering and death (Silva & Merino, 2017). In addressing absenteeism among nurses, the importance of cultivating a healthier and more supportive work environment cannot be overstated, as it correlates with improved patient care quality and enhanced organizational productivity. The substantial burden of responsibilities that nurses carry, involving a diverse array of tasks to meet each patient's needs, contributes to the complexity of their roles (Hwang, 2022). An Egyptian descriptive study aimed to investigate the connection between nurse absenteeism and organizational commitment. The study findings indicate a significant difference in nurses' job commitment concerning health-related factors ( $P=0.01$ ) and a highly significant association with the rules of absenteeism ( $P=0.003$ ) (Al-Sharif et al., 2017).

Nurse absenteeism can be attributed to various factors, including excessive workloads, strained interpersonal relationships, a lack of control over tasks, role ambiguity, perceived unfair management practices, conflicts between family and job commitments, issues related to training and career development, and poor organizational climates (Aloğlu & Güllü, 2022). Furthermore, the level of satisfaction with their salaries directly influences nurse absenteeism, as dissatisfaction can lead to demotivation and increased instances of absenteeism. Addressing these multifaceted challenges is crucial for creating a work environment that promotes nurse well-being, job satisfaction, and ultimately, lower rates of absenteeism. In a descriptive study, Noura et al. (2020) investigated the factors contributing to absenteeism among nurses in a General hospital and compared it with those working in a psychiatric hospital in the Eastern region of Saudi Arabia. The findings revealed that the primary reasons for absenteeism included health problems, work-related stress (47%), personal and family issues (60%), lack of cooperation from supervisors, working different shifts without weekends off, and a lack of support and appreciation from the head of the department (Noura et al., 2020).

## Material and Methods

A quantitative cross-sectional research design was employed to investigate the determinants of absenteeism among nurses in the public sector of Lahore, Pakistan. A sample of 114 staff nurses currently employed in a tertiary healthcare facility in Lahore was chosen through a convenient sampling technique. The study aimed to identify the various factors that contribute to absenteeism among nurses. To gather this data, a self-administered questionnaire was utilized, which had been adapted from previous research (Al-Sharif et al., 2017). This questionnaire contained 25 items and four factors Health problem, working environment, Personal/Family problem, and Stress. It consist of 5-point Likert scale, where participants could express their agreement with statements using responses ranging from "Strongly Disagree" (1) to "Strongly Agree" (5). The questionnaire was designed to explore the potential determinants of absenteeism among nurses. The questionnaires was administered within nurses and they were invited to voluntarily participate and complete them. In adherence to ethical research standards, informed consent was obtained from each participant, and they were assured that their personal information would be held in strict confidence. Furthermore, participants were made aware of their right to withdraw from the study at any point without any consequences. The data obtained from the fully filled questionnaires was processed and analyzed using the statistical software program SPSS version 21.0.

## Results and Discussion

**Table 1**  
**Demographic characteristics of respondents**

Demographic characteristics	Frequency F	Percentage %
<b>Age</b>		
20-25 years	18	15.8
26-30years	40	50.9s
31-35years	44	38.6
36-40years	12	10.5
<b>Mean ±SD</b>	2.44±0.88	
<b>Min-Max</b>	1-4	
<b>1. Gender</b>		
Male	10	8.8
Female	104	91.2
<b>2. Marital Status</b>		
Unmarried	72	63.2
Married	29	25.4
Widow / Divorced	13	11.4
<b>3. Education</b>		
General Nursing and Midwifery	38	33.3
Post RN	37	32.5
BSN	37	32.5
MSN	2	1.8
<b>4. Work Experience</b>		
6 Months	13	11.4
1 Year	40	35.1
2 Year	25	21.9
More than 2 Year	36	31.6

<b>5. No. of working hours</b>		
6 hours	34	29.8
8 hours	25	21.9
10 hours	29	25.4
12 hours	26	22.8
<b>6. Frequency of absenteeism in a month</b>		
Never	35	29.8
Ones	24	21.9
Twice	30	25.4
>Two	27	22.8

The table 1 provides an overview of the demographic profile of a sample population. The most common age range is 26-35 years, with an average age of approximately 15.8 years. Females make up a significant portion of the population at 91.2%, and the majority are unmarried (63.2%). Education is evenly spread across various levels, and work experience varies, with the largest group having one year of experience (35.1%). Working hours vary from 6 to 12 hours per day, and absenteeism is fairly distributed, with 29.8% reporting no absenteeism.

**Table 2**  
**Factors influencing absenteeism.**

<b>Factors</b>	<b>Frequency</b>	<b>Percentage (%)</b>
Health problem	45	40.1%
Working environment	28	22.50 %
Personal/Family problem	32	26.50%
Stress	11	10.90 %

The table 2 provides a comprehensive overview of the factors contributing to a specific issue, with a total of 114 cases considered. Health problems emerge as the most prominent factor, representing 40.1% of the cases, emphasizing the substantial impact of physical well-being on the situation. The working environment is the second most prevalent factor at 22.5%, underlining the significance of work-related conditions. Personal and family problems are also notably influential, accounting for 26.5% of cases, underscoring the role of personal life in this issue. Stress, although less frequent, still contributes significantly, with 10.9% of cases indicating its relevance. This table conveys the multifaceted nature of the problem, highlighting the combined influence of health, work environment, personal, and stress-related factors in the issue at hand.

## **Discussion**

Absenteeism among nurses in healthcare settings is a significant concern that can have detrimental effects on patient care and the overall functioning of the hospital. Understanding the factors that contribute to absenteeism is crucial for developing strategies to address this issue. This article aims to explore the factors influencing absenteeism among nurses in a tertiary care hospital in Lahore, Pakistan.

The study underscores the substantial impact of workplace-related factors on nurses' absenteeism. This may include issues such as a challenging work environment, lack of support, or conflicts among colleagues. The high percentage (22.5%) of nurses perceiving workplace factors as a leading cause of absenteeism highlights the need for hospitals and healthcare institutions to address these concerns. These findings are in line with a study conducted in Egypt, who reported that about 85.5% nurses reported absenteeism due to work related stress (Al-Sharif et al., 2017). Similarly a study conducted in Canada also reported work related factor a major cause of absenteeism among nurses. Improving workplace conditions, enhancing support systems, and conflict resolution strategies could be instrumental in reducing absenteeism (Peters et al., 2019). Addressing these concerns

may involve optimizing staffing levels, providing opportunities for skill development and advancement, and ensuring clear job descriptions and responsibilities (Timmins & Kaliszer, 2002). Empowering nurses with more control over their work hours or allowing for flexible scheduling could potentially mitigate this issue (Magobolo & Dube, 2019).

In the current study, health related problems is a major factor reported by majority of nurses as major cause of absenteeism. These findings are consistent with a study conducted in India, who reported that health related stress is a major cause of absenteeism among nurses (Bhatia et al., 2010)

About 26.5% of nurses identified family-related issues as contributors to absenteeism. Family matters can include personal or familial health concerns, childcare responsibilities, or other family-related challenges. This finding is supported by a study findings conducted in India, who reported family related factors major cause of absenteeism among nurses working in hospital (Ray et al., 2018). Recognizing the importance of work-life balance and offering family-friendly policies can be crucial in accommodating the needs of nursing staff. Providing support for childcare, flexible scheduling, and understanding family-related leave policies can help alleviate this aspect of absenteeism.

The current findings align with previous studies that emphasize the role of workplace factors, workload, and policy adherence in influencing absenteeism rates among nurses. This consistency underscores the need for healthcare institutions to adopt evidence-based strategies to address absenteeism. It also highlights the importance of recognizing that absenteeism is a complex issue influenced by multiple interconnected factors.

## **Conclusion**

The analysis of determinants of absenteeism among nurses in a Lahore tertiary care hospital reveals a diverse nursing staff. Health problems, working conditions, personal and family matters, and stress are identified as key factors contributing to absenteeism. These findings emphasize the multifaceted nature of absenteeism, necessitating holistic strategies that address individual well-being, improve workplace conditions, and provide support for personal and family challenges. By recognizing these diverse factors, healthcare organizations can reduce absenteeism and enhance nursing workforce engagement.

## **Recommendations**

To reduce absenteeism among nurses at Lahore's tertiary care hospital, wellness programs, enhance working conditions, and time management training should be provide. Establish transparent communication channels, clear absence policies, and incentives for regular attendance. Monitor absenteeism patterns, offer mental health support, and promote work-life balance. Conduct periodic surveys for targeted interventions, fostering a healthier and more engaged nursing workforce.

## References

- Abdelrahman, S. M., & Abdelkader, A. M. (2017). The influencing factors of absenteeism among nursing students. *Journal of Nursing Education and Practice*, 7(10), 64-69.
- Al-Sharif, H. A., Kassem, E. A., & Shokry, W. M. A. (2017). Relationship between nurses' absenteeism and their organizational commitment at Menoufyia University Hospitals. *American Journal of Nursing Research*, 5(2), 63-69.
- Ali, A. K., Al-Dubai, S. A. R., Shahin, M. A., Al-Othmali, A. I. M., Abdoh, D. S., & Zeidan, Z. A. (2021). Association between quality of work life and stress among nurses in a tertiary care hospital in Saudi Arabia. *Nursing and Midwifery Studies*, 10(2), 130-135.
- Bahalkani, H. A., Kumar, R., Lakho, A. R., Mahar, B., Mazhar, S. B., & Majeed, A. (2011). Job satisfaction in nurses working in tertiary level health care settings of Islamabad, Pakistan. *Journal of Ayub Medical College Abbottabad*, 23(3), 130-133.
- Bhatia, N., Kishore, J., Anand, T., & Jiloha, R. C. (2010). Occupational stress amongst nurses from two tertiary care hospitals in Delhi. *Australasian Medical Journal (Online)*, 3(11), 731.
- Davey, M. M., Cummings, G., NEWBURN-COOK, C. V., & Lo, E. A. (2009). Predictors of nurse absenteeism in hospitals: a systematic review. *Journal of nursing management*, 17(3), 312-330.
- Johnson, D. H., Osman, F., Bean, J., Stevens, L., Shirley, D., Keating, J. A., Johnson, S., & Safdar, N. (2021). Barriers and facilitators to influenza-like illness absenteeism among healthcare workers in a tertiary-care healthcare system, 2017–2018 influenza season. *Infection Control & Hospital Epidemiology*, 42(10), 1198-1205.
- Kumar, A., Sinha, A., Varma, J. R., Prabhakaran, A. M., Phatak, A. G., & Nimbalkar, S. M. (2021). Burnout and its correlates among nursing staff of intensive care units at a tertiary care center. *Journal of Family Medicine and Primary Care*, 10(1), 443.
- Kuster, S. P., Böni, J., Kouyos, R. D., Huber, M., Schmutz, S., Shah, C., Bischoff-Ferrari, H. A., Distler, O., Battegay, E., & Giovanoli, P. (2021). Absenteeism and presenteeism in healthcare workers due to respiratory illness. *Infection Control & Hospital Epidemiology*, 42(3), 268-273.
- Magobolo, G. N., & Dube, B. M. (2019). Factors influencing high absenteeism rate of student nurses in clinical areas at a nursing college in the Lejweleputswa District. *Curationis*, 42(1), 1-6.
- Mothiba, T. M., Mbombi, M. O., Malema, R. N., & Malatji, M. (2018). The effects of absenteeism on nurses remaining on duty at a tertiary hospital of Limpopo province. *Curationis*, 41(1), 1-5.
- Noura, A., Hawra, A., Ahlam, A., & Roua, H. (2020). Assess the causes of absenteeism among nurses working in Hospitals, Eastern Region, Saudi Arabia. *Journal of Nursing & Healthcare*, 5(3), 1-4.
- Peters, A. B., Quinn, B., & Moreno, R. (2019). Undergraduate nursing clinical absences: A review. *Teaching and Learning in Nursing*, 14(1), 37-42.
- Ray, S., Raju, R., & Singh, S. (2018). Nursing students' absenteeism in class/clinics: Reasons and remedies. *Nursing*, 3(1), 1375-1376.

- Saini, R., Kaur, S., & Das, K. (2011). Assessment of stress and burnout among intensive care nurses at a tertiary care hospital. *J Mental Health Hum Behav*, 16(1), 43-48.
- Saruan, N. A. M., Yusoff, H. M., & Fauzi, M. F. M. (2019). Family responsibilities and involuntary job absenteeism among nurses in teaching hospital. *Malaysian Journal of Public Health Medicine*, 19(2), 38-46.
- Silva, F. F. d., & Merino, E. A. D. (2017). Proposal for management of absenteeism among hospital nurses: a systematic review. *Acta Paulista de Enfermagem*, 30, 546-553.
- Timmins, F., & Kaliszer, M. (2002). Attitudes to absenteeism among diploma nursing students in Ireland—an exploratory descriptive survey. *Nurse Education Today*, 22(7), 578-588.
- Yu, J., Song, Y., Dong, H., Su, X., & Zhang, P. (2020). Factors associated with the general well-being of nurses in a tertiary Chinese hospital: A cross-sectional study. *Journal of nursing management*, 28(3), 540-547.