# Health Absenteeism and Academic Performance: Case of Kwasau Primary School in Minna 

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#### Abstract

This study examine the effect of health absenteeism on academic performances of primary pupils in Kwasau primary school, Minna. This study used a primary data obtained from 60 pupils and applied a multiple reression. Findings shows that child absenteeism from school and labour hours engaged in economic activities have a negative impact on child academic performance. This study therefore recommends parent role as well as school role in terms of medication of pupils by school management.


Keywords: Absenteeism, Health, Public Schools, Academic Performance.

## JEL Classification: J22

## 1. Introduction

The practice of promoting school health was adopted by the World Health Organization (WHO) in accordance with the principles of the 1986 Ottawa Charter with the promulgation of the concept of "School for the Promotion of Health". A school that promotes health is a constant source of strength as a healthy center for life, learning and work WHO, (2012). It was a global initiative that was seen as a promising way towards achieving better education and health outcomes which informed and guided the development of Nigeria's National Health Policy in 2006 St Leger \& Young, (2009). Human capita development is the fundamental bedrock of every economy. Investing more in education should be a priority for countries like Nigeria. Education produces productive, young, healthy and productive workers. In Nigeria, approximately 45 million young people attend primary and secondary schools UNICEF, (2011). To benefit fully from education, children need to be physically, mentally, and socially fit, as health and academic performance are interwoven, because good health promotes learning in children.
Students with poor health always experience low school attendance especially those with health chronic issue Ma'aruf, (2005); Alfa, (2018). Although, other factors that are associated with students absenteeism are consistency in the enforcement of absenteeism discipline, and rate of student progress in learning activities Kia, Teasley, Hatala, Karabenick, \& Kay, (2020). For health absenteeism, physical health such as asthma, dental problem, vision impairment, diarrhea, headache and obesity are among the major causes, while mental health occur to children that experiences fear, depression, social anxiety and other forms of mental health issues makes it very difficult for them to go to school RWJF, (2016). When children are exposed to significant stress, violence or trauma in their homes or environment, it can also trigger their mental health issues that cause them to be absent from school which affect their academic performance in the
long run. In order to curtail poor academic performance from pupils as well as reducing the level of health absenteeism, this study examines the effect of health absenteeism on academic performances.

## 2. Literature Review

The Hirschi's social control (1969) theory was emphasized by this study. The theory sees absenteeism from the angle of emotional attachment from rational people. The emotional attachment is associated with heath status of an individual, which directs one's behavior to the desires and expectations of others who are important. Absenteeism is seen as excused or the lack of use of a child's absence from school Reid, (2005). It is associated with continuous, frequent, unexpected and unexplained persistence in the school of a child of compulsory school-going age Daka, Chilala, Hamatanga, Chirwa, Mumba, Kaoma \& Chikopela, (2021). It occurs when a child does not attend school for any reason or when regular learning is disrupted. Frequent absenteeism jeopardizes the learning process of a child. Absenteeism can be linked to poor academic performance and school dropouts, as absent from school largely leads to academic difficulties, and eventually leads to drop out from school (Smink \& Reimer, 2005; Cash \& Duttweiler, 2005; Matsimoto, 2000; Attwood \& Croll, 2006). Asthma has been reported to be one among the foremost common causes of school absenteeism among chronic health conditions in childhood and increased absenteeism by school children with asthma has been well documented Taras \& Potts-Datena, (2005); Krenitsky- Korn, (2011).
Tolerance and absenteeism can lead to frustration in the sense that when a child repeats class for more than two or three years, he or she will become tired and frustrated Musa, 2014). Truancy and absenteeism can lead a child to become addicted to drugs, which eventually affects their mental health. Bloom, Owen, Rosenbaum, \& Deschenes, (2003). Just like the study of Bahdila, et al. (2020) that examined the association between cocaine use and oral health in US. The study used 2009 to 2014 National Health and Nutrition Examination Survey (NHANES) data, and findings show a positive association between periodontal disease and dental caries elevated the risk of oral disease among select co-usage. But children with asthma are more at risk of absent from school due to persistant attacks (Moonie, Sterling, Figgs \& Castro, 2008). More empirically, Amalu and Abang (2016) findings in Cross River State indicate that financial constraints, apathy, illness, petting family members, and the study environment are the main causes of student absenteeism. Musa (2014) findings from Ogun State revealed that peer group, the socio-economic background of students, poor academic performance were contributing factors to student losses and absenteeism in the schools. Seirawan, Faust and Mulligan (2012) measured the impact of dental disease on the performance of poor children's socioeconomic status, and findings suggest that students with toothache were almost four times more likely to have a lower score and concluded that Oral health affects academic performance in studies. Abdullah (2020) conducted a study to assess the effects of truancy on academic performance of primary school students in the Edati Local Government area of Niger State, and the study revealed that absenteeism hinders effective learning and can lead to poor academic performance. Similarly, Strand and Granlund (2014) found that students who began absent from classes found it difficult to understand mathematics, and their academic performance in this subject declined.

## 3. Methodology

This study used primary data obtained from pupils of ages 10 and 14 , through the aid of class teachers in Kwasau Primary School. The study used a sample of 60 respondents
obtained from a population of 71 pupils, using Krejcie and Morgan (1970) sampling size method. A purposive sampling technique was used to avoid administering questionnaires to the wrong respondents. In line with the studies of RWJF (2016), Habibullah \& Ashraf (2013), Jamal et. al. (2021) and Abdullah (2014); this study measured health absenteeism by number of times a child miss school, academic performance was measured by the score of a child in English and Mathematics, quality of education was measured in terms of number of text books per child. Lack of interest was measured in binary with having interest and zero otherwise, while child labour was measured by number of hours a child is economically engaged after school hours (Alfa. et al, 2012). Ordinary Least Square (OLS) regression analysis was used to examine child absenteeism on academic performance. The model is specified below:

Therefore,
$a c p_{i}=\beta_{0}+\beta_{1}$ habs $_{i}+\beta_{2} q e d u_{i}+\beta_{3}$ lkin $_{i}+\beta_{4}$ chlb $_{i}+\varepsilon_{i}$
Where, acp $=$ academic performance, $\beta_{0}=$ intercept, habs $=$ health absenteeism, qedu= Quality Education, lkin $=$ lack of interest, chlb $=$ child labour, and $\varepsilon_{i}$ is the individual error term.

## 4. Results

Table 1: Descriptive Statistics

| Variables | Mean | Standard Dev. |
| :--- | :---: | :---: |
| Gender | 0.48 | 0.50 |
| Age | 12.05 | 1.28 |
| Health absenteeism | 0.27 | 0.45 |
| Quality education | 0.07 | 0.25 |
| Lack of interest | 0.58 | 0.36 |
| Academic Performance | 36.09 | 1.35 |
| Child labour hours | 3.00 | 2.48 |

Source: Author's Computation
The descriptive result in Table 1 shows that gender has an average value of 0.48 with dominance female respondents. Though the enrolment rate of the school shows female wards are higher than male wards. The age of most respondents is 12 years, which shows that they are still within the age bracket specified by ILO. The average number of wards that are absent due to health issue is 0.27 with a standard deviation of 0.45 . This means, in every 5 pupils in school, at least one person will be absent in school for health and other related purposes. This also affects their quality of education, as majority of the pupils don't have adequate studying materials. The issue concerning this might be due to free education lunched by state government, which warrant government taking full responsibility. This has made a lot of pupils not to have keen interest in education, which eventually affects their academic performance given their average performance to be 36.09 . The performance is being affected by the rate of involvement in economic activities, as 3 hours are used by pupils for economic engagement.
In order to examine the effect of health absenteeism on academic performance, four key variables such as health absenteeism, quality education, lack of interest and child labour are considered to be the determinant of academic performance. The coefficient of health absenteeism is negative and significant to child academic performance, that is being absent from school affects child academic performance. This children in most cases stayed for longer day at home receiving medication tha expected time, as found by

Hidayat, Vansal, Kim, Sullivan and Salba (2012), Seirawan, Faust and Mulligan (2012) and Amalu and Abang (2015). The coefficient for educational material is negative but not significant suggesting that there is no significant effect between quality education and academic performance, which is in line with the study of Ulla, Shaughnessy, Cole, Toyinbo and Moschandreas (2015). However, the coefficient for lack of interest is positive but insignificant revealing that there is no significant effect between lack of interest and academic performance. Although, child interest are always tailored by their parents which in most cases usually decide for them. For child labour, the coefficient is negative and significant, suggesting that children that are engaged in economic activity at home do experience poor performance in school. Even the descriptive statistics, evidence shows that most of this children work for at least 3 hours, which doesn't enable them to attend to their home work properly. The finding is in line with the studies of Goulart (2014), Alfa et. al. (2012).

Table 2: Regression Result

|  | Dependent variable: Academic Performance |  |
| :--- | :--- | :--- |
| Independent Variables | Coefficient |  |
| Health absenteeism | -0.33 |  |
|  | $-(2.62)^{* *}$ |  |
| Quality education | -1.88 |  |
|  | $-(0.00)$ |  |
| Lack of interest | 9.85 |  |
| Child labour | $(0.00)$ |  |
|  | -0.67 |  |
|  | $-(5.24)^{* * *}$ |  |

Note: Significant at 5\% (**); 1\% (***)
Source: Author's Computation

## 5. Conclusion and Recommendations

In examining the effect of health absenteeism on academic performances, this study concludes that health absenteeism has effect on academic performance of a child especially those that are mostly absent from school due to serious health problems, which are more likely to have a poor academic performance. Although, quality of education and lack of interest had no significant effect on academic performance of a child. But child labour has a negative influence on academic performance of a child, especially due to numbers of hours a child worked per day. This study recommends that parents should endevour to send their children back to school once medication is complete, to avoid missing too much classes. This can enable a child to concentrate, learn, understand and digest what they have been taught in the school, thereby ensuring child's good academic performance. The school authority in their capacity can assit by complementing child medication, to enable them resume early. Also, school autho777rities as well as governments agencies needs to enlighten the parents on the danger of child absent from school. This will assist even children that engage in economic activities and usually miss school deliberately.

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