

Factors Contributing to Nurse Absenteeism in Omdurman Teaching Hospital in Khartoum State 2025

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Abstract

Absenteeism is a problem of all worldwide and difficult to find a solution. This research aimed to identify factors that contribute to absenteeism among Nurses at Omdurman Teaching Hospital. **Methods:** This is descriptive cross sectional, hospital based study carried in omdurman teaching hospital which include 91 nurses. randomly selected systemic randomize Data were collected via what's up and the questionnaire focused on the characteristics of the nurse, manager, work environment, and organization in order to identify factors that contribute to nurses 'absenteeism. **Results:** Regarding the character of nurses toward absenteeism, 46(50%) suffered from sickness, and this important factor in absenteeism, showed, 64(70.3%) showed that they did not like the autocratic style of the nurse manager and also the nurse's workload half of them reported it as large extend affect the absentees on other hand. Unfair promotion opportunities most important factor affecting absenteeism, 53(58.2%). A significant relationship between gender and years of experience and absentees p value .000. to the nursing workforce so that nurses will **conclusion and recommendation:** From the results researcher conclude that negative association between several risk factors (socio-economic, demographic, and health-related). One recommendation for further research would be for a job related study to be conducted.

Keywords: Absenteeism, nurses contributing factors Omdurman hospital

Introduction:

Absenteeism is worldwide problem and it is difficult to find a solution (Harbison, 2004) (Johnson, 2006).

Second definition is absence from work for legal cause like sickness absence due to illness, and to a greater extent due to working and social conditions at work (Bajt M, et al., 2015).

Also Absenteeism can be defined as an unplanned, un excusable disruptive incident, which characterized by the lack of physical presence of an employee at work as scheduled, extended breaks, late arrival, early leaving and being at work but not doing her/his job (Johnson, C.Jetakket, et al., 2003).

Absenteeism affect nurses performance directly which affects the organization's out put, Poorly performing employees can decrease their overall performance in both quality and quantity.

To increase personnel work performance, organization eg human resources must address factors that cause poor performance for employees so that they can avoid it (Hemp P. 2004).

Absenteeism is absence from work, sick ness absence due to illness, which is significant scale

with which to measure the status of a person's health and his potency to work. (North F, et al., 1993)

Absenteeism leads to a loss of productivity and to a greater extent due to working and social conditions at work (Bajt M, et al., 2015)

Absenteeism is extremely negatively affected by the presence of stress factors (Buzeti J, et al., 2023)

Poor health and ill-being at work represent higher social costs of absenteeism and presentism (Fikfak MD, et al., 2016)

Health absenteeism is often associated with something that is not good – it is bad and should be avoided (Buzeti J, et al., 2023).

The absenteeism rate in healthcare services has decreased, but the presentism rate has increased. However, in times of economic crisis, experts have warned that it is impossible to study these two phenomena separately. It can be concluded that the rate of absenteeism decreases when the number of illness and duration of absenteeism decrease (Fikfak MD, et al., 2016).

Absenteeism is a phenomenon that is more easily observed, measured, monitored, and eliminated, whereas presenteeism is more

difficult to detect, evaluate, and to assess, because due to reduced work efficiency. It is important to remember that, in addition to attending work, performance is also remarkable (Mlakar P. et al., 2013).

Absence from work, or absenteeism, is described as the lack of presence when expected at work for any cause. Absence from work due to health causes is called sickness absenteeism. (North F, 1993).

As study done by Gaudine & Saks suggest that regular evaluation of employees who are always absent is obliged to amend their own absence behaviour. Absenteeism feedback intervention is an attempt to decrease employee absenteeism. (Gaudine, A.P. et al., 2001)

Finally absenteeism classified as:

- Sickness absence of Employee due to illness.
- Authorized absence for holidays, study leave and special leave.
- Unexcused absence no explanation is given or not accepted.

In this study the researcher put variables that lead to absenteeism four variable so that can measure it and theses variable characteristics of the nurse, manager, workplace and organization. @ inproceedings (Singh, 2012).

As follows:

Characteristics of the nurse namely:

Nursing is defined as a profession that cares and provides support to the well and sick patient in all stages of life. Characteristics of the manager namely:

- A manager is a person who is in charge or controls the activities of others in an institution
- Characteristics of work
- Work environment
- Work environment is defined as
- One's place of employment. This study aimed to determine factors that contribute to absenteeism of nurses in Omdurman teaching hospital 2023

Significance of the study (rationale):

Absenteeism can be defined as an unplanned, unjustifiable, disruptive incident, characterized by

the lack of physical presence of an employee at work as scheduled, extended breaks, late arrival, early leaving and being at work but not doing her/his job.

Absenteeism exacerbates the difficulty of health service delivery in many countries as my country Sudan where the number of nurses available is insufficient to meet all the healthcare

Based on the rationale above the following.

Research question arises:

What are the contributing factors of absenteeism amongst nurses in omdurman teaching hospital

Goal:

The aim of this research was to identify factors that contribute to absenteeism of

nurses in Omdurman Teaching Hospital in Khartoum State 2025.

Specific objectives:

To describe the factors that contributed to absenteeism in terms of the characteristics of the

- Nurse
- Manager
- Work environment
- Organisation.

Methods

Study design:

- This descriptive hospital based study .

Study area and setting:

- Omdurman teaching hospital.

Sample size and sampling:

- Calculated according to formula

Sample size 91

Sampling

Systemic simple random sampling

Data were collected online survey through the questionnaire that was designed using the literature reviewed and modified to be suitable for Sudanese nurses culturally (Vetlik I.2009).

Data collection:

Data collection is the collection of information to meet the specific objectives of the study gathered and coded, arranged for analysis

The content of the study and the researcher was granted permission verbally to collect data . The researcher met with the respondents and explained the purpose of the study.

Data collection tool by self administered questionnaire

The questionnaire and data collection procedure were explained to them. via what's up and the questionnaire focused on the characteristics of the nurse, manager, work environment, and organization to identify factors that contribute to nurses 'absenteeism, participants were allowed to complete the questionnaire.

Statistical analyses:

Data analyses using SPSS (26)

Descriptive statistic for the demographic data frequency and percentage, and inferential statistics for factors that contributing to absenteeism

A descriptive explanation of the relationship between absenteeism and characteristics of the nurse, the workplace, management, as well as explained. The researcher looked for information about factors and characteristics that contribute to absenteeism. using Likert scale in the questionnaire where respondents given statements using a 5-point It is often used to measure respondents' attitudes by asking the extent of what they believe with a particular question or statement, which is about (16) questions for Characteristics of the nurse manager (13) for characteristics of the nurse (16) questions for Characteristics of the work(6) questions for Characteristics of the organization that Nurses are absent from work and ,Likert scale, ranging from 1 to 5, with 1 meaning "To no extend, 2, to limited extend 3"not decided moderate4 and 5To large extend here (The Oxford Minidictionary, 1988:102)

The study done in omdurman teachin hospital in 2025 data collected via what's up

In correlation between sociodemographic data and characteristics of the nurse, the workplace,

management, we use p value as 0.001 consider as significant

Ethical consideration:

Before starting the study ethical approval was obtained ,written consent were taken from participants nurses and head nurses all of them ate registered nurses after explaining the purpose of the study and explained that it has no any risks for them and they have right to withdraw from the study at any time without giving any reasons.

Results:

This is descriptive cross sectional hospital based study which aimed to identify factors that contribute to absenteeism of nurses at Omdurman teaching hospital and find association between socio demographic and absenteeism,91 nurses enrolled in the study

Table (1) showed that half of participants their age between >30-<40 (51%) while only

(19.8 %) their age between 25-30.from the result in table (1) also we found (59.3%) were married and only (19.8%) were single, regard their educational level (45.1%) were diploma certificate, and only (5.5%) are PhD ,their experience more than 5 years (75.8%),their experience

69(75.8%) more than 5 years and the rest 1-5 years' work indifferent department in the hospital.

Table (2) showed the character of nurse toward absenteeism as follow when asked them for nurse character if .suffer from minor physical ailments, e.g. headaches, backache ,41(45.1%) represent large extend 17(18.7%) showed moderate while 6(6.6%) not sure ,when asked them if .suffer from chronic medical conditions 46(50.5%) report to large extend while only 3(3.3%) not sure .from result we found suffer from work-related, e.g. a fractured limb or hurting back the majority report 84(92.3%) ,the rest of question in table (2).

Table (3) showed cherecter manager related absenteeism they do not like the autocratic style of the nurse manager, the nurse manager uses one-way communication e.g. nurses are told what they must do without being involved in the plan of action, the nurse manager shouts at nurses who do not conform with his/her standards/ expectations in the workplace, Nurses' problems

are not satisfactorily solved results 64(70.3%),38(41.8%),46(50.5%),55(60.4%) respectively which represent as large extend while 10(11%),2(2.2%),0, 3(3.3%) report as no extend respectively, and 12(13.2%),7(7.7%),21(23.1%),6(6.6%) to limited extend respectively. The rest in the table (3)

Table (4) Characteristics of the work refer to the degree of freedom and independence of nurses in the workplace. We found their respond for questions are tired of unit routine, their skills are under-utilized, there is an insufficient group of nurses, lack of social relations with peers in the workplace, lack of tolerance for absenteeism in the case of some nurses in the unit, 50(54.9%),49(53.8%),60(65%),56(61.5%),45(49.5%),while no extend 0, 3(3.3%),9(9.9%),0,

9(9.9%) represent as no extend respectively and the rest in table (4).

In table (5) regard organization character we when asked about unfair promotion opportunities, unfair selection of nurses for training, shortages of nursing staff, lack of child care facilities where nurses can keep their children while at work and lack promotion opportunities to the next rank they respond as large extend 53(58.2%),38(41.8%),65(74%),60(65.9%),51(56%) repored as large extend while 4(4.4%),7(7.7%),3(3.3%),4(4.4%),6(6.6%) respectively as no any extend. And the rest in table (5).

In table (7) there is significant of socio demographic data with Organization characteristics.

Table (1): Socio demographic data

no (91)

Item	Frequency	Percent (%)
Age by years		
25-30	18	19.8
>30-<40	47	51.6
>40	26	28.6
Gender		
Male	48	52.7
Female	43	47.3
Marital status		
Single	18	19.8
Married	54	59.3
Divorced	12	13.2
Widowed	7	7.7
Education level		
Diploma certificate	41	45.1
Baccaloria	26	28.6
Master degree	19	20.9
PhD	5	5.5
Years of experience		
1-5 years	22	24.2
more than 5 years	69	75.8
Work department experience		
emergency department	22	24.2
medical ward	28	30.8
surgical ward	20	22.0
intensive care unit	21	23.1
job title		
Head nurse	24	26.4
Staff nurse	67	73.6

Table (2): Respondents of participant for factors related to nurses. no (91)

Characteristics of the nurse Nurse are absent from work because they	To no extend	To limited extend	Not sure	To moderate	To large extend
1.suffer from minor physical ailments, e.g. headaches, backache	14(15.4%)	13(14.3%)	6(6.6%)		41(45.1%)
2.suffer from chronic medical conditions	23(25.3%)	13(14.3%)	3(3.3%)	6(6.6%)	46(50.5%)
3.suffer from stress-related illness, e.g. tiredness	6(6.6%)	1(1.1%)	2(2.2%)	34(37.4%)	48(52.7%)
4.have problems e.g. regarding the abuse of alcohol, or drugs	0	9(9.9%)	6(6.6%)	33(36.3%)	43(47.3%)
5.suffer from work-related, e.g. a fractured limb or hurting back	0	0	7(7.7%)	0	84(92.3%)
6.have financial problems	23(25.3%)	27(29.7%)	3(3.3%)	18(19.8%)	23(25.3%)
7.have to look after family members e.g. mother or sick child	4(4.4%)	5(5.5%)	0	40(44%)	42(46.2%)
8. have to attend funeral of friends e.g. friends outside the workplace	4(4.4%)	17(18.7%)	1(1.1%)	25(27.5%)	44(48.4%)
9.experience domestic conflict e.g. arguments at home, violence resulting in	3(3.3%)	0	2(2.2%)	28(30.8%)	58(63.7%)
10. experience transport problems, e.g. getting to work by bus, taxi or own car	1(1.1%)	7(7.7%)	3(3.3%)	22(24.2%)	65(71.4%)
11. prolong their weekends e.g. when visiting far from home	6(6.6%)	41(45.1%)	1(1.1%)	23(25.3%)	21(23.1%)
12. lack of motivation to go to work e.g. they are lazy to report to work	0	0	0	36(39.6%)	55(60.4%)
13. are disturbed by bad weather e.g. rain	0	25(27.5%)	0	0	66(72.5%)
14. attend to additional jobs for financial gain	11(12.1%)	18(19.8%)	0	30(33%)	32(35.2%)
15. have to attend union meetings elsewhere	11(12.1%)	18(19.8%)	7(7.7%)	16(17.6%)	39(42.9%)
16. want to do what colleagues do in the workplace, e.g. stay away from work regularly	18(19.8%)	39(42.9%)	0	0	55(60.4%)

Table (3): Respondents of participant for factors related to nurse manager. no (91)

Characteristics of the nurse Nurse are absent from work because they	To no extend	To limited extend	Not sure	To moderate	To large extend
1.They do not like the autocratic style of the nurse manager	10(11%)	12(13.2%)	1(1.1%)	4(4.4%)	64(70.3%)
2.The nurse manager uses one-way communication e.g. nurses are told what they must do without being involved in the plan of action	2(2.2%)	7(7.7%)	4(4.4%)	40(44%)	38(41.8%)
3.The nurse manager shouts at nurses who do not conform with his/her standards/ expectations in the workplace	0	21(23.1%)	4(4.4%)	41(45.1%)	46(50.5%)
4.Nurses' problems are not satisfactorily solved	3(3.3%)	6(6.6%)	0	27(29.7%)	55(60.4%)
5.The nurse manager makes decisions alone, in the workplace	11(12.1%)	10(11%)	0	16(17.6%)	45(59.3%)
6. The nurse manager exercises power with coercion in the daily management of nursing	4(4.4%)	7(7.7%)		24(26.4%)	56(61.5%)
7.Nurses are always criticized harshly for making mistakes while performing patient care activities in the workplace, e.g. being criticized for failure to put up a drip	0	22(24.2%)	0	26(28.6%)	43(47.3%)
8.They come into conflict with the nurse manager, e.g. they have quarrels, or different opinion	6(6.6%)	13(14.3%)	0	32(34.2%)	40(44%)
9. The nurse manager always makes negative comments about nurses performance e.g. calling nurses lazy or incompetent.	13(14.3%)	9(9.9%)	0	19(20.9%)	50(54.9%)
10. The laissez-faire management style of the nurse manager leads to junior nurses controlling unit activities, e.g. the manager does not control unit activities or deal with staff issues	14(15.4%)	14(15.4%)	3(3.3%)	30(33%)	30(33%)
11. Conflicts of nurses are not resolved e.g. some nurses request to be off duty every weekend	8(8.8%)	6(6.6%)	4(4.4%)	27(29.7%)	46(50.5%)
12. Nurses need to be complimented on good work done	2(2.2%)	21(23.1%)	2(2.2%)	31(34.1%)	35(38.5%)
13. Nurses experience inadequate support from the nurse manager when performing patient care activities, e.g. guidance	6(6.6%)	21(23.1%)	0	35(38.5%)	29(31.9%)

Table (4): Respondents of participant for factors related to work place no (91)

Characteristics of the work	To no extend	To limited extend	Not sure	To moderate extend	To large extend
1.They are tired of unit routine	0	11(12.1%)	1(1.1%)	29(31.9%)	50(54.9%)
2.Their skills are under-utilized	3(3.3%)	0	1(1.1%)	38(41.8%)	49(53.8%)
3.There is an insufficient group of nurses	9(9.9%)	2(2.2%)	0	20(22%)	60(65%)
4. Lack of social relations with peers in the workplace	0	14(15.4%)	0	21(23.1%)	56(61.5%)
5.Lack of tolerance for absenteeism in the case of some nurses in the unit	9(9.9%)	17(18.7%)	0	20(22%)	45(49.5%)
6. They are delegated a number of duties	0	9(9.9%)	2(2.2%)	30(33%)	50(54.9%)
7. Anxiety of making too many decisions in the absence of the supervisor	5(5.5%)	12(13.1%)	4(4.4%)	25(27.5%)	45(49.5%)
8.they have to perform duties without a job description	9(9.9%)	10(11%)	0	28(30.8%)	44(48.4%)
9. A lack of clear roles in the unit e.g. to do the duties of other multidisciplinary team	2(2.2%)	22(24.2%)	4(4.4%)	23(25.3%)	64(70.3%)
10.Insufficient orientation about the job	3(3.3%)	11(12.1%)	3(3.3%)	29(31.9%)	48(52.7%)
11. Unit lacks flexibility in allowing the off duties which they desire	2(2.2%)	4(4.4%)	4(4.4%)	23(25.3%)	58(63.7%)
12. The nurses workload	3(3.3%)	8(8.8%)	1(1.1%)	20(22%)	59(64.8%)
13. Working hours that is too long	7(7.7%)	14(15.4%)	2(2.2%)	23(25.3%)	45(49.5%)
14. Lack of flexible working schedules	8(8.8%)	9(9.9%)	2(2.2%)	19(20.9%)	53(58.2%)
15.Have problems e.g. regarding the abuse of alcohol, or drugs	4(4.4%)	10(11%)	2(2.2%)	23(25.3%)	52(57.1%)
16 Having to work overtime in order to complete tasks	5(5.5%)	9(9.9%)	1(1.1%)	25(27.5%)	51(56%)

Table (5): Respondents of participant for factors related to organization. no (91)

Characteristics of the organization Nurses are absent from work because Of.....	To no extend	To limit extend	Not sure	To moderate extend	To large extend
1. Unfair promotion opportunities	4(4.4%)	5(5.5%)	6(6.6%)	23(25.3%)	53(58.2%)
2. Unfair selection of nurses for training	7(7.7%)	14(15.4%)	0	32(35.2%)	38(41.8%)
3. Shortages of nursing staff	3(3.3%)	5(5.5%)	1(1.1%)	17(18.7%)	65(74%)
4. Lack of child care facilities where nurses can keep their children while at work	4(4.4%)	3(3.3%)	4(4.4%)	20(22%)	60(65.9%)
5. Lack promotion opportunities to the next rank	6(6.6%)	9(9.9%)	3(3.3%)	22(24.2%)	51(56%)
6. There is irregular feedback about work performance	0	9(9.9%)	2(2.2%)	30(33%)	50(54.9%)
7. lack of fair reward systems for excellent performance	11(12%)	17(18.7%)	1(1.1%)	20(22%)	42(46.2%)
8.They need to receive feedback from meetings attended by the nurse manager	3(3.3%)	7(7.7%)	4(4.4%)	13(14.3%)	64(70.3%)
9. There is inadequate information about changes being implemented in the workplace	8(8.8%)	8(8.8%)	3(3.3%)	20(22%)	52(57.1%)
10. Of absence of policy on working hours and fair implementation to all staff in the institution.	8(8.8%)	18(19.8%)	4(4.4%)	23(25.3%)	38(41.8%)
11. Of absenteeism policy not being applied consistently among nurses	10(11%)	15(16.7%)	0	24(26.4%)	42(46.2%)
12. Of unfair discipline imposed on some of the nurses	9(9.9%)	11(12.1%)	0	20(22%)	51(56%)
13. Of lack of decentralization of decision making to clinical areas e.g. discipline of nurses by top level managers	10(11%)	13(14.3%)	1(1.1%)	35(38.5%)	32(35.2%)
14. Of the existence of bureaucracy in the health care institutions e.g. senior level managers make decisions and control units	4(4.4%)	11(12.1%)	3(3.3%)	22(24.2%)	51(56%)
15. Of staff not being addressed about labor relations issues e.g. types of leaves	1(1.1%)	1(1.1%)	2(2.2%)	42(46.2%)	45(49.5%)
16. Of certain hard working nurses expected consistently to be doing extra duties thus leading to demotivation	6(6.6%)	10(11%)	2(2.2%)	33(36.3%)	40(44%)

Table (6): Mean, SD and p value for characteristics of the nurse, the workplace, management

Item	Mean	SD	P. Value
Nurses attitude	4.6044	.50836	.000
Manager attitude	4.0456	.53343	.000
Work	4.2246	.69015	.000
Org.	4.0797	.51514	.034

Table (7): Correlation of characters and socio demographic data chi square distribution

Items	Demographic variable	P value
Nurse	age	.000
	gender	.307
	Marital status	.181
	Experience	.085
Nurse manager	age	.000
	gender	.006
	Marital status	.044
	Experience	.044
Work place	age	.055
	gender	.000
	Marital status	.000
	Experience	.001
Organization	age	.000
	gender	.070
	Marital status	.000
	Experience	.000

Discussion

This study confirms that there are different definitions of absenteeism that build on the situation in which the study is carried the availability of literate routine data and the factors investigators consider to be most questionable as causes. Even in the same situation, varying different and measures have been used (Peterson U, et al .2011).

Sickness, both minor and serious, is the most common cause of absenteeism of nurses at the workplace which decrease the productivity among nurses (Yende, 2005:22) Sickness absence is unanticipated in our study we found that that most important factor represent as common cause of absenteeism of nurses at the workplace, suffer from minor physical ailments, e.g. headaches, backache (sickness this same as study done Sloveniawhere their results showed that. (Starc, Jasmina et al., 2023).

On other hand our finding came counter active with (Maryam Mollazadeh,et al., 2018), their results showed ,no significant

relationships between median numbers of sickness absenteeism.

From our result the workload of nurses has increased. lack of motivation to go to work e.g. they are lazy to report to work ,unsatisfactory working conditions and shortage of nurses all these factors supported previous study of (Isah et al., 2008).

Managers can find solution for solving nurses' problems and this are considered important issue to prevent or decreasing the absenteeism in the work. Managers should panegyric nurses on work well done so that this point motivate them in their works and be productive. The absence of positive feedback is considered to be a leading cause of absenteeism. A strong, positive organizational climate with positive feedback to the staff, effective communication and good leadership traits should assist in minimizing absenteeism (-@inproceedings (Singh, 2012).

Other important factors in our results that nurses do not like the autocratic style of the

They need to sit with them and find solution for their problems and involve the in the dictions. Also they do not like the manager who shouted for them. if they do not adjust to standards and anticipation in the workplace. It became clear that nurses are looking democratic leadership. these findings are consistent with a research study conducted by (Sellgren et al., 2008) they reported that that the managers' behaviour, power, influence and consideration affects absenteeism (Sellgren, S.F., et al., 2008).

Absenteeism in relation to work our results showed that majority of nurses that enrolled in the study in the study report that heavy duty workload of nurses and the number of duties delegated as the most critical factors of the characteristic of work affecting absenteeism this consider as important factor that increase the percentage of absenteeism. This has a detrimental effect on their performance and leads to burnout and absenteeism. This finding supported with Findings with (Nyathi, M. 2008) support these conclusions drawn from this study.

Organization in relation to absenteeism our results showed that massive shortage of nurses poses a real threat for the future of health care. Nursing shortage is caused by stressful work environments due to work overload, lack of support and an inadequately equipped work environment these consider as important factors that increase the rate of absenteeism

Other factor important factor lack of promotion opportunities all these finding supported with study (Troy, et al., 2007).

Finally our study address significant relation of socio characteristic experience an gender with absenteeism which supported by (Jasmina.2023).

Conclusion and recommendation:

From the results researcher conclude that positive association between several risk factors (socio-economic, demographic, and health-related)

One recommendation for further research would be for a job related study to be conducted, investigating the number of activities that is required for each patient visiting the primary health care centers, as with the one stop approach, more time is required to attend to each patient.

Such a study should provide a basis for better task distribution and delegation.

It is further recommended that a study be conducted to determine the real reasons for real absence, rather than just investigating the perceptions of nurses as to the contributing factors to absenteeism.

Conflict of Interest Disclosures

The authors declare that they have no conflicts of interest

References:

- Bajt M, Klanšek HJ, Britovšek K. Mental Health at Work; 2015.** Available from: https://www.nijz.si/files/publikacijedatoteke/dz_na_delovnem_mestu.pdf [Last accessed on 2023
- Buzeti J, Klun M, Sikošek V Stare J, Umek L, Benčina J, et al.** Healthy and Vital in the Public Sector. Ljubljana: Faculty of Administration; 2016. Available from: <https://skupnostobcin.si/wp-content/uploads/2015/11/brosura-zdravi-in-vitalni-v-javnemsektorju.pdf> [Last accessed on 2023Mar 11
- Fikfak MD, Bric TK, Škerjanec A, Telič JJ, Lazar TU. 2016.** Analysis of workers' health. In: Milek DM, Lazar TU, editors. *Chillies for Work, Textbook for Promoting Health at Work*. Ljubljana: University Clinical Center, Clinical Institute of Occupational, Transport and Sports Medicine; p. 129-64.
- Gaudine, A.P. & Saks, A.M. 2001.** Effects of an absenteeism feedback intervention on employee absence behavior. *Journal of Organizational Behavior*, 22:15-29.
- Harbison, G. 2004.** Employee rights pose lawsuit threat. *E & P Magazine*, 1 June:1-4.
- Hemp P.** Presenteeism: at work—but out of it. *Harv Bus Rev.* 2004; 82(10): 49-58, 155.)
- Inproceedings {Singh 2012 Factors CT, title=** {Factors contributing to absenteeism of nurses in primary care centres in the Ethekwini Municipal District of Kwazulu-Natal}, author={Ragani Singh}, year={2012}, url={https://api.semanticscholar.org/CorpusID: 39104772.

- Isah, E.C., Omorogbe, V.E., Orji, O. & Oyovwe, L. (2008).** Self-Reported Absenteeism Among Hospital Workers in Benin City, Nigeria. *Ghana Medical Journal*, 42(1):2-7.
- Johnson, J. (2006).** Sickies the new epidemic. *The Sunday Times Careers Section*, 5 March:1-12.
- Johnson, C.J., Croghan, E. & Crawford, J. (2003).** The problem and management of sickness absence in the NHS: considerations for the nurse. *Journal of Nursing Management*, 11:336-342
- Mlakar P. Predlog Modela Ukrepov za Zmanjšanje Vplivov Prezentizma v Delovnem Okolju. Magistrsko Delo. Ljubljana: Univerza v Ljubljani, Fakulteta za Upravo; 2013.**
- Mollazadeh, M., Saraei, M., Mehrdad, R., Izadi, N. (2018).** 'Sickness absenteeism of Healthcare Workers in a Teaching Hospital', *Hospital Practices and Research*, 3(1), pp. 6-10. doi: 10.15171/hpr.2018.02
- North F, Syme SL, Feeney A, Head J, Shipley MJ, Marmot MG. (1993).** Explaining socioeconomic differences in sickness absence: the Whitehall II Study. *BMJ*. 1993; 306(6874):361-366. doi:10.1136/bmj.306.6874.361
- Nyathi, M. (2008).** Working conditions that contribute to absenteeism among nurses in a provincial hospital in the Limpopo Province. *Curationis*, 31(1):28-37.
- Peterson U, et al. (2011)** Burnout levels and self-rated health prospectively predict future long-term sickness absence: a study among female health Professionals. *J Occup Environ Med*.53:788-793
- Starc, Jasmina & Fabjan, Tanja. (2023).** Absenteeism and Fluctuation of Nursing Staff in Health-care Settings. *Open Access Macedonian Journal of Medical Sciences*. 11. 326-337. 10.3889/oamjms.2023.11653.
- Sellgren, S.F., Ekvall, G. & Tomson, G. (2008).** Leadership behaviour of nurse managers in relation to job satisfaction and work climate. *Journal of Nursing Management*, 16:578-587.
- Troy, P.H., Wyness, L.A. & McAuliffe, E. (2007).** Nurses experience of recruitment and migration from developing countries: a phenomenological approach. *Human Resources for Health*, 5:5-15.
- Vetlik I. Work Design and Quality of Working Life. In: Svetlik I, Zupan N, editors. (2009).** *Human Resource Management*. Ljubljana: Faculty of Social Sciences; 2009.
- Yende, P.M. (2005).** Utilizing employee assistance programme to reduce absenteeism in the workplace. *Short Dissertation*. Johannesburg: University of Johannesburg:1-74.