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# ADHD symptoms and psychosocial challenges: a North-West University case study

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**Introduction:** Attention Deficit Hyperactivity Disorder (ADHD), a neurodevelopmental psychological disorder characterised by inattention, hyperactivity, and impulsivity, poses significant challenges to individuals, especially within higher education contexts. The psychosocial impacts of ADHD symptoms on university students remain inadequately understood.

**Methods:** This exploratory qualitative case study aimed to investigate the psychosocial challenges faced by students with ADHD symptoms at North-West University (NWU). A purposive sample of 12 participants was recruited through digital advertisements posted on NWU's student Facebook pages. Data were collected via online semi-structured interviews and analysed using thematic analysis.

**Results:** Findings revealed that students experienced significant anxiety, depression, feelings of isolation and withdrawal, and difficulties with the extended duration of lectures. These psychosocial challenges notably affected their overall academic experience and well-being.

**Discussion:** The study emphasises the urgent need for policy amendments and practical adaptations at higher education institutions like NWU. Recommendations include restructuring lecture schedules to incorporate shorter durations and regular breaks, and enhancing university resources dedicated to supporting students with ADHD symptoms. Limitations of this study include a small sample size, its cross-sectional nature, and reliance on self-reported data. Future research should address these limitations to provide deeper insights into the experiences of university students with ADHD symptoms.

KEYWORDS

ADHD, case study, psychosocial well-being, students, symptoms

## 1 Introduction

Attention Deficit Hyperactivity Disorder (ADHD) is one of the most researched psychological disorders in recent years. However, there are various areas that are underexplored, particularly regarding the experiential dimensions of the disorder. One notable gap in the literature involves the need for direct contributions from individuals living with ADHD (Gaynes et al., 2014). This study addresses this significant gap by exploring and describing the personal experiences of students living with ADHD symptoms at North-West University (NWU). The NWU is a South African university with three campuses, serving a diverse student population, thus providing a unique setting for exploring these lived experiences.

Although a considerable body of international research has documented how ADHD impacts college students, much of this work focuses on academic challenges such as impaired concentration, poor organisational skills, and difficulties with time management, which significantly affect academic performance (Gordon and Fabiano, 2019; Green and Rabiner, 2012). Furthermore, ADHD has also been associated with negative psychosocial outcomes, including strained peer relationships, lower self-esteem, heightened anxiety, and increased risk for stimulant misuse (Green and Rabiner, 2012). Despite these important insights, this literature primarily emerges from studies conducted in Western or high-income countries, predominantly North America and Europe. Consequently, findings are not necessarily transferable to different socio-cultural contexts, highlighting a significant limitation: the relative scarcity of research on college students with ADHD in the Global South, particularly South Africa.

The South African higher education context provides a distinctive setting to explore the experiences of students with ADHD due to its unique combination of socio-economic, institutional, and cultural factors. The NWU, the site of this study, embodies this context clearly through its diverse student body across three campuses (Potchefstroom, Mahikeng, and Vanderbijlpark), each located within socioeconomically and culturally distinct regions. NWU's student population is not only diverse in terms of cultural and racial backgrounds but also varied in socio-economic status, accessibility to resources, and familiarity with mental health services (North-West University, 2021a,b). Furthermore, the NWU recognises ADHD formally as a disability, having implemented supportive policies designed to remove barriers to academic success for students living with this condition (North-West University, 2021a,b). Despite these institutional efforts, the effectiveness and reach of these interventions, along with students' subjective experiences of accessing support, remain under-explored.

Given these contextual factors, it becomes important to understand how students themselves navigate their educational journeys amid the constraints posed by their symptoms, institutional structures, and societal expectations. Internationally, research has revealed that university students with ADHD often rely on informal coping strategies, such as seeking social support, structured academic environments, and therapeutic interventions (de Oliveira and Dias, 2017; Evans et al., 2014). However, in the context of South African universities, such strategies may differ significantly due to cultural attitudes toward mental health, varying degrees of stigma, and differing levels of mental health literacy. There is also limited information regarding the effectiveness or availability of structured psychosocial treatments in South African universities, leaving students to rely largely on individual or familial resources to manage their condition (Bukhari et al., 2024; Evans et al., 2014). This further underscores the necessity of a nuanced investigation into local student experiences.

Qualitative research methods are particularly valuable for filling this knowledge gap by providing a detailed, rich understanding of how students themselves perceive, experience, and manage their ADHD symptoms within their unique socio-cultural context. Through in-depth qualitative approaches, students are given a voice to narrate their own lived realities, illuminating personal experiences that may remain invisible within quantitative studies (Gaynes et al., 2014). Exploring lived experiences allows researchers to understand deeply how institutional policies translate into practical outcomes, how cultural perceptions of disability shape student identity and self-management strategies, and how social interactions influence the

psychosocial well-being of students. These insights are crucial for developing contextually appropriate interventions that could ultimately enhance psychosocial support for students with ADHD.

Therefore, this study seeks to address these identified gaps by qualitatively exploring and describing the personal experiences of students living with ADHD symptoms at North-West University. More specifically, the study aims to understand the psychosocial hurdles students encounter, how institutional policies either facilitate or hinder their academic success and social integration, and to identify strategies that students themselves adopt to navigate these challenges. By centering students' lived narratives, this research will not only contribute significantly to the local literature but also offer valuable perspectives for educators, policymakers, and mental health professionals aiming to support the well-being and academic success of students with ADHD in South Africa.

This study followed on the work of Kwon et al. (2018) and de Oliveira and Dias (2017) who conducted their studies on students with self-reported symptoms of ADHD. Kwon et al. (2018) found that students with self-reported symptoms of ADHD were struggling to cope with their repeated negative thoughts and having poor time management. Much like the sample size in this study, Kwon et al. (2018) interviewed 12 participants comprising five men and seven women. On the other hand, the study conducted by de Oliveira and Dias (2017) with 28 college students on a self-reported questionnaire reported that they had problems with concentration in class.

## 2 Problem statement

ADHD has been one of the most widely investigated conditions for a while (Goulardins et al., 2015). However, there are various areas that are underexplored, particularly corresponding to the experiential parts of living with the condition. Numerous questions remain unanswered about ADHD in the student population. DuPaul et al. (2017) state in their study that college students with ADHD experienced academic deficits and that there is a greater risk for college students with ADHD when it comes to academic and psychological difficulties. Furthermore, these students with ADHD also stand the risk of misusing stimulants.

Although studies have been conducted with school populations in other African countries (Woyessa et al., 2019) and South Africa (Boshomane et al., 2020; De Jongh and Wium, 2021), there is limited literature on ADHD and its impact on South African university students. No studies could be found with a specific focus on the psychosocial well-being of students living with ADHD in South Africa. It is important to note that South Africa is a diverse nation made up of different languages, cultures, religions, races, ethnicities, which may have an influence on the personal experience of individuals and ultimately their psychosocial well-being compared to other countries (De Wet and Kelly, 2021). Thus, it is important to understand ADHD, how to recognise it, and how it should be treated within this unique context. It is against the backdrop of the provided literature that this article sets out to use a case study design to explore the challenges affecting the well-being of students living with symptoms of ADHD at North-West University (NWU). Central to this objective, the article addresses the research question: What are the psychosocial challenges experienced by students living with

symptoms of ADHD at NWU, and how do these challenges influence their academic performance, social relations and mental well-being?

#### 3 Research methods

In this section, researchers present the research methods they used in this study.

## 3.1 Qualitative research approach

Qualitative data collection was employed in this study because the researchers wanted to obtain in-depth information from subjective experiences of the participants. According to Smith and Shinebourne (2012), qualitative research is essentially a systematic, interactive, and subjective approach used to describe life experiences and give meaning to them, providing information that is represented in narratives or verbal forms. Through the application of the qualitative research approach, the researchers gained a detailed understanding of the psychosocial challenges that affect the well-being of students living with symptoms of ADHD at NWU. Furthermore, a qualitative research approach was chosen due to its flexibility (Tian et al., 2016) and its ability to obtain first-hand information from participants.

## 3.2 Research design

A case study design was used. According to Creswell (2014, p. 241), case study is a "design in which the researcher explores in depth a pro-gram, event, activity, process, or one or more individuals. The case(s) are bound by time and activity, and researchers collect detailed information using a variety of data collection procedures over a sustained period of time." Moreover, Yin (2014) further articulated that case study design can be exploratory, explanatory, and descriptive depending on the study aim or questions. To that end, the study aim was exploratory in nature, the researchers opted for exploratory case study design to explore in-depth the challenges that affect the well-being of students living with symptoms of ADHD at NWU.

#### 3.3 Population

The population and focus of the study were NWU students from all three campuses living with symptoms of ADHD. The NWU is a South African university made up of three campuses in Potchefstroom and Mahikeng, which are located in the North West province, and the Vanderbijlpark campus, which is located in Gauteng province. The diversity of NWU provides a blended status, thus making it one of the largest universities in South Africa. The NWU is a multiracial university with a diverse student population (North-West University, 2017). The total number of on and off-campus students enrolled at the North-West University by 2017 was 72,994. The Potchefstroom campus had 52,360 students, the Mahikeng campus had 12,709 students, and the Vanderbijlpark campus had 7,925 students. The male students accounted for 34% and females accounted for 66% of the student population (North-West University, 2017). The total number of on and off-campus

students enrolled at North-West University by 2020 was 58,356. At the beginning of 2021, the number of undergraduate students was 49,007 and postgraduate students 9,058 and the number of occasional students were 291 (North-West University, 2021a,b).

## 3.4 Sampling technique and size

A purposive (judgmental) sampling technique was utilised, a method based on the subjective judgment of the researcher to select suitable participants for the study (Etikan et al., 2016). We included students from NWU who were aged 18 years or older living with ADHD symptoms. We excluded students who were not affiliated with NWU, students diagnosed with other co-morbid psychological disorders, or learning disabilities.

Participants were recruited through an advert which was placed on the university notice boards. The advert included the symptoms of ADHD wherein the participants had to check if they have those symptoms or not. Those who identified themselves having those symptoms used the number available on the advert to contact the independent person who was responsible for the recruitment and giving the participants informed consents. Students had to be proficiently fluent in English or Setswana, as both informed consent and interviews were conducted in these languages. The language choices align with the predominant teaching and learning language at NWU (English), as well as the student demographics at the Mahikeng campus, which predominantly comprises Setswana-speaking students. Additionally, participants were required to willingly provide written informed consent.

The final sample consisted of 12 Black NWU students. Of these students, 6 (50%) were identified as females and 6 (50%) as males. Students average age was 22.58 (SD = 1.73), and mostly in their second level of study (n = 7, 58%; equal to second-year university students), followed by first level (n = 4, 33%; equal to first-year university students) and one student (8%) was in third level (equal to third-year university students). These students were interviewed until reaching saturation or conceptual death. According to Nelson (2016) conceptual depth (Nelson, 2016) or data saturation (Braun and Clarke, 2021) refers to a point wherein no new substantive information emerges. Again, in the review done by Braun and Clarke (2021) on to saturate or not saturate, it was established that other researchers saturate with as few as 6 participants.

#### 3.5 Data collection method

The data collection occurred electronically through semistructured online interviews. The interview schedule consisted of open-ended questions designed to allow flexibility and elicit detailed, in-depth responses reflecting the participants' personal experiences. This approach facilitated a comprehensive understanding of the psychosocial well-being of students experiencing ADHD symptoms. Interview questions explored participants' subjective experiences, including psychosocial challenges, barriers within the university environment, and recommendations for enhancing university support. Examples of the questions included: "As a student experiencing ADHD symptoms, what challenges have you faced regarding your psychosocial well-being, and how have you managed these challenges?" and "What recommendations can you suggest to

the university to enhance the psychosocial well-being of students experiencing ADHD symptoms?"

#### 3.5.1 Data gathering process

To recruit participants, the researcher distributed an advertisement on the NWU student Facebook pages and eFundi. The advertisement had a Google link, which, when clicked, led participants to a detailed form which gave clarity about the research, as well as allowed participants to fill in their names, email addresses, and contact details. After indicating their willingness to participate, an independent person contacted the participants by cell phone and/or email. The independent person was an NWU psychology student who was an intern clinical psychologist doing his Master's in Clinical Psychology at the time of the data collection process. The independent person was trained by the researcher to understand the study.

The independent person sent the consent forms by email to allow participants to familiarise themselves with the consent form. Potential participants were given a week to evaluate and familiarise themselves with the informed consent form and decide on their participation. The independent person and participants set an appropriate date and time (by phone/email) for both parties to meet virtually to explain and discuss the content of the consent form and sign them. From 6 to 17 June 2022, the independent person and participants individually signed the consent forms, each in front of a witness on the days they agreed on. After signing the consent forms, participants were requested to take a picture of the signed consent form and send it to the independent person electronically. After receiving the consent forms from the participants, both the researcher and the individual participants set a date for a Google Meet interview.

#### 3.5.2 Data collection setting

Participants were asked to find a quiet and private location when conducting the online interviews to ensure privacy and improve trustworthiness. They were also encouraged to ensure that they have stable connectivity. There were limited if any, financial implications for the participants, depending on whether they stayed in NWU residences or not. Students who stayed at NWU residences were able to use the university's wi-fi, while others who needed connectivity data requested it from researchers. Before taking part in the study, participants were told to request data vouchers from the independent person if they needed them for semi-structured interviews; the independent person informed the researchers via their emails. This information regarding the need for data was stated in the consent forms. From there the researchers and participants scheduled a date and time when they would meet for the online semi-structured interview. To compensate for the participant's time and energy, they all received a R15.00 airtime voucher via email within 24 hours after completing the interview.

#### 3.6 Data analysis methods

Data were analysed manually using thematic analysis (Braun and Clarke, 2021). Thematic analysis is a qualitative method involving the identification, analysis, and reporting of themes within data (Alhojailan, 2012). This analytical method was suitable for the present study as it allowed the researchers to systematically interpret the rich qualitative data collected through interviews. The first step involved

the lead researcher thoroughly familiarising himself with the transcribed interview data in Microsoft Word. Following this initial familiarisation, preliminary codes were systematically identified and categorised, which included feelings of anxiety and impulsivity, isolation and withdrawal, and challenges related to long lecture periods.

To enhance rigour and reliability, the lead researcher (an intern clinical psychologist trained in qualitative methods) conducted the initial coding. Subsequently, this coding was independently reviewed and vetted by a Health Professions Council of South Africa (HPCSA) registered research psychologist experienced in qualitative analysis. Regular discussions between the lead researcher and the co-coder occurred to ensure consistency, accuracy, and minimise researcher bias. Through collaborative discussions, preliminary themes were developed from these initial codes. The initial themes identified were anxiety, depression, low mood, isolation and withdrawal, and long lecture periods. After further critical reflection and discussions among all researchers, the themes were refined to anxiety, impulsivity, isolation and withdrawal, and long lecture periods, providing greater conceptual clarity and coherence. Ultimately, a reflexive thematic analysis approach (Braun et al., 2023) was adopted, which integrated an ecosystems theory framework contextualise interpret to and findings comprehensively.

#### 3.7 Ethical considerations

The study received ethical clearance from the North-West University Health Research Ethics Committee (HREC) with reference NWU-00214-21-A1. After approval of the application by HREC, permission was obtained from the Research Data Gatekeeper Committee (RDGC) (NWU-GK-21-059).

#### 4 Findings

# 4.1 Anxiety

Many participants expressed intense anxiety concerning their academic capabilities, driven primarily by difficulty sustaining attention during lectures, completing assignments, and adequately preparing for examinations. For example, Participant 10 provided an explicit description of how anxiety significantly impaired their academic functioning:

"My anxiety is time-consuming because I focus so much on it, and it greatly affects my focus on subsequent activities, which I end up not completing and performing below standard. It's like a cycle—my anxiety about failing makes it even harder to concentrate, so then I perform poorly and become even more anxious about future tasks."

This statement powerfully illustrates how anxiety and attention difficulties interact to compound challenges for students experiencing ADHD symptoms, creating a perpetuating cycle of underachievement and emotional distress. Anxiety also strongly impacted social interactions, reinforcing avoidance behaviours and significantly affecting participants' abilities to form and maintain social

connections. Participant 9 described clearly the relationship between anxiety and social avoidance:

"I do not like being around other people or even going out as a result of my anxiety. It's overwhelming; I worry constantly about what others think, if I'll say something inappropriate or seem distracted, so it's easier to stay away altogether."

Such experiences of anxiety-induced isolation underscore the significant social implications of ADHD-related anxiety, limiting students' ability to fully participate in social activities, ultimately contributing to further isolation and diminished psychosocial well-being.

Additionally, participants articulated using maladaptive coping mechanisms to manage anxiety arising from their ADHD symptoms. Notably, Participant 1 explicitly highlighted substance use (cigarette smoking) as an anxiety management strategy:

"I smoke cigarettes to manage my anxiety, and I would not cope at all if I did not smoke during the day. I smoke five cigarettes on average and 15–20 on a busy day, especially around exams or heavy assignment periods."

This explicit link between ADHD-related anxiety and maladaptive coping behaviours such as smoking underscores the severity of anxiety's impact on these students' daily lives. It highlights the urgent need for targeted interventions that address not only ADHD symptom management but also healthy coping strategies for related anxiety.

# 4.2 Impulsivity

Impulsivity was consistently described as a significant source of distress among participants, affecting their social interactions, self-perception, and overall psychosocial adjustment. Participants explicitly linked impulsivity to negative perceptions from peers and others, often describing impulsive behaviours as being misinterpreted or misunderstood by those around them. Participant 4 vividly articulated how impulsivity negatively influenced their social interactions:

"My impulsive speaking makes me appear as a destructive individual and a playful joker, and it is hard for people to take me seriously. Sometimes I speak without thinking, and people misunderstand me. It creates tension, and people distance themselves from me."

This narrative demonstrates how impulsivity directly contributes to social difficulties by shaping negative social perceptions, leading to strained relationships and ongoing social isolation. Participant 8 further reinforced this connection between impulsivity and social withdrawal, highlighting a deliberate choice to isolate as a coping strategy:

"To avoid having to deal with the backlash of being impulsive, I prefer to do things alone. I have learned that when I act impulsively, I often regret it later, especially in social settings, so now I choose to isolate myself as a protective measure."

This behaviour underscores a defensive response to repeated negative experiences resulting from impulsivity, further illustrating the profound impact impulsivity has on social functioning and emotional health.

#### 4.3 Isolation and withdrawal

Isolation and withdrawal emerged prominently among participants as significant coping mechanisms adopted in response to their struggles with ADHD symptoms. Participants described choosing to withdraw from social interactions to avoid discomfort, negative judgments, or potential conflict arising from their ADHD-related behaviours. These behaviours often involved inattentiveness during conversations, impulsive remarks, or restlessness, which participants reported were frequently misunderstood by peers, leading to social discomfort and strained relationships. Participant 4 vividly captured this experience:

"I appear as if I am bored with people, or they get bored with me; therefore, I would rather be by myself. It feels safer to isolate because when I'm around people, my inattentiveness or impulsive speaking causes misunderstandings. It's exhausting and stressful trying to explain myself every time without a formal diagnostic report from a psychologist... that report is expensive and we cannot afford it."

Participant 5 similarly described difficulties in forming and sustaining meaningful relationships due to isolation tendencies, stating:

"Most of the time, I am alone. Therefore, it is difficult for me to say exactly how my inattention affects my relationships. But I know I withdraw because I often do not know how to maintain good conversations or interactions, and it feels safer just to keep to myself."

#### Participant 9 added that:

"I avoid social situations because my anxiety is severe—I constantly worry about saying or doing something impulsively or appearing distracted, and this anxiety stops me from engaging socially altogether. Isolation feels easier, even if it's lonely."

This participant's narrative reveals how perceived rejection or misunderstanding resulting from their ADHD symptoms prompts deliberate isolation as a protective strategy. This pattern suggests that social isolation, although initially helpful in reducing immediate stress, may paradoxically reinforce feelings of loneliness and alienation over time.

#### 4.4 Long lecture periods

Participants frequently identified long lecture durations as a significant barrier impacting their academic performance and psychosocial well-being. They consistently expressed difficulties maintaining attention, concentration, and engagement during NWU's standard lecture length of 1 h and 30 min, which notably exceeds their attention capacity. Participant 12 clearly described their difficulty in

maintaining attention throughout the entirety of standard lectures, explaining:

"I can maintain attention on average for 30 min. After that, my mind wanders and it's almost impossible to bring myself back fully into the lecture."

This experience aligns closely with literature highlighting typical attention spans and underscores the direct impact of ADHD symptoms on the participants' capacity to engage fully in academic activities. Participant 6 similarly noted significant attention disruptions related explicitly to lecture duration:

"I lose attention out of the blue whilst doing schoolwork and regain it back after I rest. The longer the lecture goes on, the harder it becomes for me to maintain focus, and eventually, I stop following completely."

This statement highlights a clear relationship between prolonged cognitive demands in lectures and attentional fatigue associated with ADHD symptoms. Participants provided concrete suggestions to address these attention-related challenges, emphasising structural changes to the lecture schedule. For instance, Participant 1 explicitly recommended:

"The university has an option of increasing the number of classes and reducing the amount of time spent in one lecture class. Shorter lectures or breaks between sessions could really help us stay engaged and manage our attention better."

Other participants endorsed introducing brief, structured breaks to restore attention and enhance focus. This aligns with evidence from previous studies suggesting micro-breaks or intermittent breaks significantly improve attentional restoration and overall cognitive performance, particularly beneficial for students with attention-related challenges such as ADHD.

# 5 Discussion

This study was aimed at elucidating the psychosocial hurdles that students living with ADHD symptoms confront at NWU. In this study, students living with symptoms of ADHD were found to experience anxiety partly due to fear of poor performance and being around people at NWU. Overall, the theme of anxiety among students presenting with ADHD symptoms revealed a deeply intertwined relationship between their cognitive struggles, emotional experiences, social functioning, and academic pressures. These participant narratives clearly illustrate the significant role anxiety plays in their overall psychosocial well-being, offering critical insights for the development of targeted support and intervention programmes within university settings. This supports previous findings by Knouse and Fleming (2016), who indicated that university students experience anxiety due to high expectations from their families and themselves regarding academic performance. This pressure often leads to anxiety symptoms driven by a fear of failure (Beiter et al., 2015). To manage their anxiety, some students reported hyperactive behaviours, such as pacing or restlessness, while others developed maladaptive coping strategies, including smoking, although this was not universally prevalent.

Additionally, participants described significant emotional distress resulting from their impulsive behaviours, which contributed to diminished self-esteem and increased feelings of regret or guilt. This reaffirmed the findings by Fleming and McMahon (2012) who noted that individuals diagnosed with ADHD often have lower self-esteem and poorer social skills compared to their peers, resulting in lower graduation rates (Fried et al., 2016). Moreover, in this study several students articulated experiencing self-critical thoughts and heightened emotional distress following impulsive incidents, especially when these incidents involved interpersonal conflicts or misunderstandings. These experiences clearly illustrate the emotional toll of impulsivity, reinforcing how impulsive actions intensify negative selfperceptions and emotional instability. Swift et al. (2013) reported that students experience emotional turmoil due to their behaviours and associated consequences, leading to self-blame.

Collectively, participants' narratives regarding impulsivity revealed it as a multifaceted challenge deeply impacting their social relationships, emotional health, and overall psychosocial wellbeing. These findings emphasise the necessity for targeted interventions and support structures specifically aimed at improving impulse control and fostering healthier interpersonal skills among students experiencing ADHD symptoms. Psychological implications of ADHD symptoms also include experiencing low moods and decreased interest (Patros et al., 2013). A primary source of these experiences is academic life itself (Combs et al., 2015). Given these explicit participant accounts, institutional interventions that focus specifically on impulsecontrol training, interpersonal skill-building, and peer education regarding ADHD-related behaviours could substantially enhance social functioning and reduce isolation among affected students. Fortunately, NWU has a Student Counselling and Development division that provides students with psychosocial support and promotes their overall well-being. The division is accessible to everyone including students with mental health challenges such as anxiety (North-West University, 2022).

The Student Counselling and Development division was established to address the high levels of isolation and withdrawal among students facing mental health challenges (North-West University, 2022). The study findings suggest that some of the students living with symptoms of ADHD prefer to be alone due to how their symptoms are perceived by others. This sense of isolation may be further exacerbated by ADHD stigma within their communities. One of the participants in the study conducted by Grove (2021) indicated that stigma around ADHD persists in university settings and students with ADHD feel uncomfortable about it and do not want to talk about it. Due to students' discomfort within institutional settings and their unwillingness to interact with peers about their condition, they often experience low self-esteem and are reluctant to seek support from the institution. This study supports the findings of Grove (2021) and further suggests that students with ADHD, or even those showing symptoms, continue to experience stigma. Building on the work done by Grove (2021), some of the respondents' in Voges's (2021) study indicated that they have financial challenges that make it difficult for them to access treatment or ADHD formal assessment. The study findings reaffirmed the

views shared by Voges (2021) as even students with symptoms of ADHD indicated that due to lack of finance, they cannot get a formal assessment report leading them to treatment. These socio-cultural and economic factors deepened feelings of isolation amongst the students living with symptoms of ADHD. Students described anticipatory anxiety around interactions where their ADHD symptoms might be particularly noticeable or problematic, thus prompting them to withdraw proactively. The current study reaffirms these earlier findings, noting that isolation and withdrawal functioned as coping strategies, particularly when students are rejected by their peers and experience stigma (Voges, 2021).

The study findings suggested that some of the students living with symptoms of ADHD had to deal with the burden of managing academic responsibilities without adequate support. Martin (2014) and Gordon and Fabiano (2019) highlighted high dropout rates among students with ADHD, attributable to increased academic stress. Conversely, Prevatt (2016) found that those who continue education despite ADHD symptoms often have lower grades, inadequate study strategies, and less participation in class activities. Furthermore, students with ADHD were reported to have difficulties recalling important information, paying attention, and maintaining focus during lessons (Kwon et al., 2018). However, students at NWU reported being fearful to report their ADHD symptoms to their lecturer without formal diagnosis. These findings contribute to the broader existing literature, highlighting that students must provide a formal diagnosis in order to receive support from the institution. This is a burden to students from black communities who are struggling to afford psychological assessment fees (Hinshaw and Scheffler, 2014). This provides new insight into how South African universities and families could be educated about the fear of disclosing ADHD symptoms and the financial challenges involved in accessing formal diagnostic assessments. Increasing awareness and education in this regard may help address student drop-out rates in higher education institutions. Martin (2014) and Gordon and Fabiano (2019) highlighted high dropout rates among students with ADHD, attributable to increased academic stress. Conversely, Prevatt (2016) found that those who continue education despite ADHD symptoms often have lower grades, inadequate study strategies, and less participation in class activities. Furthermore, students with ADHD were reported to have difficulties recalling important information, paying attention, and maintaining focus during lessons (Kwon et al., 2018). This aligns with the findings of this study, where participants described significant concentration and recall difficulties.

Participants emphasised structural factors, particularly long lecture periods, as major barriers to academic performance. The consistent narratives among participants clearly illustrate how current lecture structures contribute to psychosocial distress and reduced academic performance for students experiencing ADHD symptoms. Addressing these structural elements through shorter lecture periods or intentional breaks could significantly enhance the academic effectiveness and psychological well-being of these students. Students explicitly linked their attention difficulties to NWU's standard lecture duration (1 h 30 min), suggesting that shorter classes or the introduction of regular breaks could significantly improve attention and academic engagement. This aligns with prior literature indicating the effectiveness of microbreaks for restoring attention (Lee et al., 2015; Sari et al., 2021).

Adjustments to lecture durations could therefore meaningfully enhance learning effectiveness and reduce the psychosocial burden experienced by students with ADHD. Having prolonged lecture hours negatively impacts students with ADHD symptoms. NWU's current standard lecture duration significantly exceeds the typical student attention span, which averages about 20 min (Sari et al., 2021). Participants suggested incorporating 30-min breaks between classes to restore attention, aligning with Lee et al.'s (2015) findings on the efficacy of micro-breaks. Introducing breaks could enhance lecture quality by maintaining student interest and engagement, thereby increasing overall learning effectiveness. NWU does not specify the exact duration of lectures but indicates that NWU strives to provide an inclusive learning with contact, blended and distance learning environments (North-West University, 2023). Evidently, Section 1.11 of the General Academic Rules (North-West University, 2023) outlines instances in which students may be exempted from attending class, but it does not include provisions for students with mental health challenges.

## 5.1 Limitations of the study

While providing critical insights into the lived experiences of university students presenting with ADHD symptoms, this study is not without limitations. The qualitative nature of the research, coupled with a relatively small sample size of 12 participants, limits the generalisability of the findings beyond the immediate context of NWU. Additionally, the exclusive reliance on self-reported data may introduce biases related to participants' subjective interpretations or recall inaccuracies concerning their experiences and ADHD-related challenges.

Future studies could address these limitations by employing larger and more diverse participant samples, potentially across multiple universities, to enhance the generalisability of findings. Moreover, incorporating mixed-method approaches, including validated psychometric assessments, structured clinical interviews, or longitudinal methodologies, would significantly strengthen data accuracy and provide more robust evidence regarding ADHD's impact on students' psychosocial and academic functioning over time.

#### 6 Recommendations

Based on the findings of this research, clear implications emerge for policy and practice within higher education institutions, specifically at NWU, to support students exhibiting ADHD symptoms more effectively. Firstly, there is a demonstrated need to review and adjust lecture structures, particularly regarding duration. Implementing shorter lecture periods or systematically incorporating brief, structured breaks can directly address attentional challenges and reduce academic-related anxiety among students experiencing ADHD symptoms.

Secondly, universities should actively promote a supportive academic environment that acknowledges and accommodates diverse cognitive and emotional needs related to ADHD. This could involve flexible and varied assessment methods, provision of targeted academic resources such as tutoring or mentoring, enhanced counselling services tailored specifically for ADHD-related challenges,

and explicit lecturer training on ADHD and neurodiversity to foster inclusive classroom practices.

Finally, the evident lack of awareness and understanding of ADHD among both students and staff necessitates targeted educational initiatives. Comprehensive mental health campaigns or workshops focusing explicitly on ADHD symptom recognition, stigma reduction, and effective coping strategies are recommended. These initiatives could significantly enhance psychosocial support for students, promoting both their academic success and overall well-being.

#### 7 Conclusion

The psychosocial challenges faced by university students experiencing symptoms of ADHD profoundly amplify their daily academic and social struggles compared to their peers without ADHD symptoms. This study has demonstrated that ADHD symptoms, particularly anxiety, impulsivity, and inattentiveness, significantly compromise students' psychological well-being, negatively influencing their academic performance and interpersonal relationships.

Anxiety emerged as a dominant concern, deeply intertwined with academic demands and social pressures, resulting in maladaptive coping mechanisms such as increased substance use. Impulsivity was found to contribute to interpersonal misunderstandings, emotional distress, and negative self-perceptions, further compounding social isolation. Consequently, isolation and withdrawal became prevalent coping strategies, adopted to manage social discomfort and perceived judgment from peers and faculty. Additionally, structural academic factors, notably prolonged lecture durations, exacerbated attention-related difficulties, intensifying psychosocial distress among affected students. Participants clearly recommended shorter lecture durations or intermittent breaks to accommodate their attentional capacities, thus improving engagement and reducing academic-related anxiety.

Overall, these findings highlight the necessity of a holistic and systemic approach to supporting students with ADHD symptoms within higher education. Rather than merely addressing isolated challenges, institutions must reconceptualise their educational environments as dynamic spaces where diverse cognitive and emotional experiences are acknowledged and integrated. In doing so, universities have the potential not only to enhance individual student well-being and academic success but also to foster inclusive communities that celebrate neurodiversity, ultimately redefining institutional responsiveness to mental health and learning differences.

# Data availability statement

The raw data supporting the conclusions of this article will be made available by the authors, without undue reservation.

#### **Ethics statement**

The studies involving humans were approved by North-West University Health Research Ethics Committee. The studies were conducted in accordance with the local legislation and institutional

requirements. The participants provided their written informed consent to participate in this study.

#### **Author contributions**

MM: Conceptualization, Data curation, Formal analysis, Methodology, Visualization, Writing – original draft. CM: Formal analysis, Software, Supervision, Validation, Visualization, Writing – review & editing. FM: Data curation, Formal analysis, Methodology, Supervision, Validation, Writing – review & editing. HG: Conceptualization, Methodology, Supervision, Project administration, Writing – review & editing.

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#### Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

#### Generative Al statement

The authors declare that no Gen AI was used in the creation of this manuscript.

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