

# National Transitions to Adulthood Strategy:

Analysis of engagement  
on the statement of intent

May 2024

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# Introduction

In the 2021 [Programme for Government](#), Scottish Ministers committed to introducing Scotland's first National Transitions to Adulthood Strategy in this Parliamentary term, to ensure there is a joined up approach so that all disabled young people can experience a positive and supported transition to young adult life. This was reaffirmed in the First Minister's [Policy Prospectus](#), published in April 2023.

In March 2023, an [external strategic working group](#) was set up to support the development of the strategy. This group, comprising key representatives of parents/carers, the third sector, local authorities, education, employment, health and social care co-developed a [statement of intent](#) which set out the proposed vision, scope and priorities for the strategy. This was published on 28 September 2023.

Alongside the statement of intent, an online Microsoft Forms survey seeking feedback on the statement of intent from young people, parents/carers and others with a role or interest in transitions was also published. The survey was open between 28 September 2023 and 30 November 2023.

In total, there were 151 online survey responses, of which 144 were submitted via Microsoft Forms and 7 via email. In addition to the online survey, 9 engagement events were held (6 online and 3 in person) to seek feedback on the statement of intent. [Table 1](#) and [Table 2](#), which can be found in the Annex, provide the profile of respondents and events held.

In responding to the online survey via Microsoft Forms, participants indicated their agreement to their anonymous responses being shared in our published analysis of responses. Therefore, the quotes contained within this report are only from responses submitted via Microsoft Forms.

It is important to note that public consultation of this kind means anyone can express their views. This self-selection means the views of respondents do not necessarily represent the views of the wider population. However, the views which were received will contribute to future considerations and decisions on the development of the strategy.

All of the responses received have been analysed and this report provides an overview of those findings. The Scottish Government would like to thank everyone who took the time to respond to the statement of intent through the survey, email or by attending - or facilitating - an engagement event.

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# We asked

Respondents across all engagement platforms were invited to answer the following four closed questions by selecting one of five response options<sup>1</sup>:

- Do you agree that the meaning we have given to ‘transition to adulthood’ is the correct one for the strategy?
- Do you agree that the meaning we have given to ‘disabled young people’ is the correct one for the strategy?
- Do you agree that the vision is correct for the strategy?
- Do you agree that the priorities are the correct ones for the strategy?

Following each of the questions above, respondents had the option to explain their answer. For the online survey, this was via an open text response. Some respondents used the open text box to reaffirm their response to the preceding closed question, for example, by writing ‘agree’. Other respondents used the open text box to expand on their answer to the preceding closed question.

Respondents across all engagement platforms were also invited to answer an additional open text box question:

- Do you have any other comments on the statement of intent?

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<sup>1</sup> Response options were: Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree

# You said

All responses have been reviewed in full. The responses to the closed questions were analysed by calculating the total counts for each response option. A thematic analysis has been carried out for each open text response, with responses allocated to common themes.

In reporting on the analysis of open questions, the following descriptors have been used to report on the number of respondents to each question raising a particular issue or theme:

- 'A small number' - up to 5 respondents
- 'A few' - between 6 and 9 respondents
- 'A small minority' - more than 9 respondents but less than 10%
- 'A significant minority' - between approximately 10-24% of respondents
- 'A large minority' - more than a quarter of respondents but less than half
- 'A majority' - more than half

This document reports on responses to each of the questions in turn, beginning with quantitative analysis of the closed questions, followed by any themes identified through analysis of open text responses.

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# Question 1

**Do you agree that the meaning we have given to ‘transition to adulthood’ is the correct one for the strategy?**

There were 150 responses to this question. As shown in [Table 3](#) at the Annex, the vast majority of respondents either ‘strongly agreed’ (59 respondents; 39%) or ‘agreed’ (86 respondents; 57%) that the meaning given to ‘transition to adulthood’ is the correct one for the strategy. Only a very small minority of respondents ‘disagreed’ (2 respondents; 1%) and none ‘strongly disagreed’.

For the follow up question (‘Please explain your answer’), a total of 112 responses were received. A significant minority of respondents used this opportunity to make a number of general comments supporting the proposed definition of ‘transition to adulthood’.

No transition is a set thing even if there is a date that ‘marks’ the move – it is a process and the definition acknowledges this.

Six overarching themes were identified through other open text responses to this question. They were:

- Flexibility within the age range
- Transitions as an ongoing process
- Transitions practices
- Access to services and support
- Role of parents/carers
- Specific conditions

## Flexibility within the age range

Whilst the majority of respondents agreed or strongly agreed with the proposed age range of 14-25 years old within the definition of 'transition to adulthood', a significant minority stressed that transitions support must flexibly accommodate individuals' needs, particularly where a young person's stage of development may not align with their chronological age.

A significant minority of respondents also proposed a variety of alternative age ranges, however there was no clear consensus on which was most appropriate. The overriding view from responses was that the time at which any disabled young person might require support for transitions would vary, and that support should start earlier or later depending on an individual's needs. There was also some concern that a fixed age range could unintentionally create a "cut off" of support and that support should extend beyond the age range, if required.

It is very much a process and has to be flexible dependent on the young person's needs.

## Transitions as an ongoing process

A large minority of respondents agreed that the transition to adulthood is an ongoing process or journey, and should not be seen as a single event. Respondents reflected on the range of areas for which a young person may simultaneously require transition support, for example in health, social care, independent living and further education. That the Scottish Government views the transition to adulthood as an ongoing process and not a single event, as is reflected in the statement of intent, was welcomed by a significant minority of respondents.

I fully support that this is a period and a process.

Transitions is undoubtedly a process and not a single event like leaving school.

## **Transitions practices**

Within this theme, a small minority of respondents took the opportunity to emphasise that planning for transitions should start early, and that it should involve the range of partners who will support a young person throughout their transitions journey. It was felt to be crucial that a robust plan, which explored all available options, was in place for disabled young people well in advance of leaving school or moving between children's and adult's services.

In the context of the proposed age range, a few respondents commented that the time at which transitions planning begins varies across sectors. To address this, a possible solution of more joined up practice and training for professionals was suggested. A small number of respondents also indicated there needs to be less siloed working, to bring greater consistency to transitions approaches across the services with which young people interact.

## **Access to services and support**

Within their response to this question, a small number of respondents indicated that access to suitable support and services was key to successful transitions. This theme was also echoed in responses to other questions, with a majority of overall respondents commenting that the ambition of the statement of intent is reliant on disabled young people being able to access suitable support and services.

Whilst a significant minority of respondents to this particular question acknowledged that they could have received better support if information had been provided to them, responses overall generally indicated that it is felt there is not enough choice or availability of support and options across Scotland for disabled young people to transition to.

Particular challenges relating to the transition between children and adult's services were also highlighted. In some cases, respondents described a 'cliff edge' of support, where a young person was no longer eligible for support under children's services - for example, because they had left school but were not yet 18, and subsequently found themselves ineligible for adult service support.

## **Role of parents/carers**

The role of parents/carers emerged as a theme in responses to this question, and others. A few respondents felt the strategy should strengthen the role of parents/carers as key partners in their young person's transitions journey, and that their own support needs should be considered alongside the support needs of their young person during transition. Emphasising the role of the parent carer was felt to be especially important where a young person might lack capacity, with the issue of guardianship explicitly mentioned by a small number of respondents.

## **Specific conditions**

Finally, a few respondents made explicit reference to particular conditions, with autism and complex needs specifically named. This appeared primarily in the context where a young person may not experience cognitive development at the same rate as their chronological age.

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# Question 2

## Do you agree that the meaning we have given to 'disabled young people' is the correct one for the strategy?

There were 150 responses to this question. As shown in [Table 4](#) at the Annex, the vast majority of respondents either 'strongly agreed' (57 respondents; 38%) or 'agreed' (78 respondents; 52%) that the meaning given to 'disabled young people' is the correct one for the strategy. A very small minority either 'disagreed' (3 respondents; 2%) or 'strongly disagreed' (2 respondents; 1%).

A total of 103 responses were received for the follow up question ('Please explain your answer'). A large minority of respondents made general comments in support of the proposed definition under 'disabled young people'.

The use of the definition set out within the Equality Action [Act] (2010) seems appropriate and this definition encompasses people with a wide spectrum of disabilities, including complex health needs such as those with life shortening conditions.

However, there were a small number of respondents who commented on whether a young person would necessarily identify as 'disabled'. Examples given included neurodiverse and deaf young people. There were also some reflections on perceived negative connotations associated with the terminology of 'disabled'. Similar to the proposed definition of 'transition to adulthood', some respondents acknowledged that no single definition would cover all individual preferences.

The meaning you have given is broad and inclusive. We particularly like the recognition that some people may not define themselves as disabled.

Five overarching themes were identified through responses to this question. They were:

- Access to services and support
- Interaction with other policies and legislation
- Role of parents/carers
- Intersectionality
- Language

### **Access to services and support**

A significant minority of respondents reflected that the ability to self-identify as disabled under this definition is not compatible with many support services' eligibility requirements which are reliant on a formal diagnosis. Lengthy waiting lists, in turn, were seen to hamper the ability to secure such diagnoses. A few noted that the ability to self-identify as disabled under the Equality Act 2010 definition could have implications for services in relation to capacity and workforce training and planning.

A small number of respondents also noted particular challenges in relation to the transition between children's and adult's services, where eligibility criteria - and resultant access to support and services - may be different (despite the support and services young people actually need remaining the same). A small number of respondents felt that services should be held accountable for providing support for transitions.

### **Interaction with other policies and legislation**

A few respondents cited a range of existing policy and legislation which they suggested merited greater reference within the strategy, and suggested that the proposed definition of 'disabled young people' should be broadened to ensure greater alignment with other policy, legislation and treaties such as:

- The Education (Additional Support for Learning) (Scotland) Act 2004
  - The United Nations Convention on the Rights of the Child (UNCRC)
  - The Children (Scotland) Act 1995
  - Legislation and policies relating to care experienced young people
-

## Role of parents/carers

Again a small number of respondents reflected in the response to this question that the role of parents/carers must also be considered, particularly with reference to young people who may have complex needs. Respondents commented that adult incapacity, power of attorney and guardianship should be considered as part of the strategy.

## Intersectionality

A few respondents highlighted that being disabled should not imply an homogenous group. The theme of intersectionality arose in relation to particular conditions and differences, invisible or hidden disabilities, mental health, and other protected characteristics such as race, gender and sexual orientation. A small minority of respondents also highlighted that neurodivergent young people may not identify with the terminology of 'disabled', and a few respondents also highlighted the need for better mental health support for disabled young people.

## Language

There were mixed views around the use of the social model of disability versus the medical model, with a few respondents welcoming the social model and a small number favouring the medical model. The social model, as proposed by the statement of intent, holds that people are disabled by barriers in society whereas the medical model understands people are disabled by their condition.

We support the need to work on a pan-impairment basis that is rooted in the social model of disability, focusing on the barriers disabled young people face as a result of any impairment. A lack of formal medical diagnosis should not prevent a young person from accessing the support they need.

A small minority noted that the consistency of language used across services was important, with respondents noting that the terminologies used and understanding of the term 'disabled' can vary, which in turn can create barriers for young people navigating transitions. Disability, Additional Support Needs (ASN), and Special Educational Needs were all referenced in relation to this, with some respondents expressing the confusion can result in young people missing out on support they need. A few respondents suggested that ASN, as used by the Education (Additional Support for Learning) (Scotland) Act 2004, should also apply to the strategy.

A few respondents noted clarity was required with regards to the phrase 'long-term' within the Equality Act 2010 definition of disability. For example, some reflected the language of 'long term' may create barriers to accessing support, where a young person has only recently received a diagnosis.

# Question 3

## Do you agree that the vision is correct for the strategy?

There were 150 responses to this closed question. As demonstrated in [Table 5](#) at the Annex, the vast majority of respondents either 'strongly agreed' (59 respondents; 39%) or 'agreed' (70 respondents; 47%) that the vision is correct for the strategy. Only a very small minority of respondents 'disagreed' (4 respondents; 3%) or 'strongly disagreed' (2 respondents; 1%).

106 respondents provided additional information for the follow up question ('Please explain your answer'). A large minority of these respondents were supportive of the proposed vision. However, a few respondents expressed concerns on the relevance of the vision to all disabled young people and the practicalities and challenges of realising it.

This definition is appropriate and describes an empowering vision.

This entirely misses out a group of disabled young people who lack the capacity to make decisions for themselves.

Through responses to this question, the following four overarching themes emerged:

- Aspiration of the vision statement
- The vision versus reality
- Interaction with other policies and other legislation
- Role of parents/carers

### **Aspiration of the vision statement**

A small number of respondents welcomed the aspiration of the vision statement, however a significant minority noted it did not reflect the needs of young people who lack capacity for decision making or to independently identify their own goals.

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A significant minority proposed a range of alternatives to the language used within the vision statement, including 'safe', 'respected', and 'path to the future' (instead of 'success'). A few respondents also mentioned that there may be challenges to measuring 'happy', as proposed by the vision statement, and suggested alternatives such as 'resilient', 'aspirational' or 'confident'.

### The vision versus reality

A significant minority of respondents expressed that the realisation of the vision would be dependent on sufficient resources and suitable support options being available to young people, including opportunities for them to transition to. It was generally felt that more resources are required to support disabled young people in order for the vision to become a reality.

This is very aspirational and what we would want. My experience as a parent and professional in education is that this is significantly hampered by lack of resource and flexibility of options for planning etc.

My young person and his peer group in his class are leaving school with no ability to gain further education or attend any suitable activities...Without the provision of opportunity it is a waste of a vision and time.

Where support was available to young people, a small number of respondents noted it lacked choice, or could change suddenly due to factors such as local authority availability or transitioning between children's and adult's services. This was particularly noted by a small number of respondents as being the case for young people with complex support needs, and for those living in rural areas. A small number of respondents highlighted sector specific challenges, particularly in health, where they felt there were no equivalent adult services to transition to.

Being as healthy as is possible, supported by appropriately trained health and social care professionals, identifying and mapping adult equivalents to their paediatric multidisciplinary team, first and foremost needs to be recognised.

I don't have anyone to transition my patients to though - I have no equivalent in adult services.

Improved provision of information was noted as important by a small number of respondents so disabled young people know what they can expect to receive. It was felt that clearer guidance about how they can access available support, as early as possible, would assist disabled young people to make informed decisions about their future.

**Interaction with other policies and other legislation**

A small number of respondents felt that there should be greater emphasis within the vision statement on upholding children's rights, as outlined in The United Nations Convention on the Rights of the Child (UNCRC).

**Role of parents/carers**

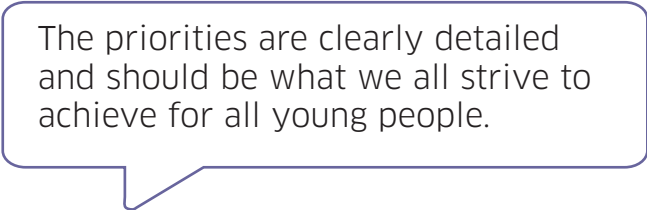
A significant minority felt that the vision should also recognise the role of parents/carers. This was seen as particularly vital for young people with complex needs, who may not have the capacity to make decisions for themselves.

# Question 4

## Do you agree that the priorities are the correct ones for the strategy?

There were 146 responses to this question. As demonstrated in [Table 6](#) at the Annex, the vast majority of respondents either 'strongly agreed' (56 respondents; 38%) or 'agreed' (71 respondents; 49%) that the priorities are the correct ones for the strategy. Only a small minority either 'disagreed' (5 respondents; 3%) or 'strongly disagreed' (2 respondents; 1%).

A total of 130 responses were received for the follow up question ('Please explain your answer'). Whilst a significant minority indicated their support for the proposed priorities as set out, a few respondents felt it was difficult to comment on the priorities without understanding how they would be delivered in practice.



The priorities are clearly detailed and should be what we all strive to achieve for all young people.

The following seven overarching themes were identified from responses to this question:

- Envisioned priorities versus reality
  - Choice, control and empowerment for the young person (relevance to Priority 1)
  - Clear and coherent information (relevance to Priority 2)
  - Coordination of individual support and communication across sectors (relevance to Priority 3)
  - Consistency of practice and support across Scotland (relevance to Priority 4)
  - Collection of data to measure progress and improvements (relevance to Priority 5)
  - Other
-

## Envisioned priorities versus reality

A significant minority of respondents commented that the deliverability of the proposed priorities would be reliant on the availability of suitable support and services, of which it was felt there currently are not enough, and urged that the strategy also consider improved access to support and services. A similar proportion of respondents expressed that the deliverability of the priorities would be reliant on additional funding and resources.

We support all the statements in the “priorities” section, however, the transitions strategy needs to support how these priorities can be more than just a ‘wish list’.

The principles here are right, however I think the choices we can give children and young people are limited due to resources.

There needs to be an additional focus on availability of options for young people as these are very limited.

## Choice, control and empowerment for the young person

Early transitions planning was seen to be key to achieving this proposed priority, as was ensuring all relevant key partners were engaged in this process. There were, however, some challenges highlighted in relation to engaging all of the necessary partners - namely adult service practitioners and, in some instances, young people themselves.

Consistent with the theme of envisioned priorities versus reality, a large minority of respondents felt that the deliverability of this priority was inextricably linked to the availability of suitable options for young people to access, and choice and flexibility within these. Access to suitable options was said to be a challenge especially felt by young people with complex needs. Respondents described some other factors which contributed to their perceived lack of suitable options including local availability, budget allocation and siloed working between sectors.

In order to achieve these outcomes there has to be choice in services. At the moment there are few services, no choice and it is reducing.

## Clear and coherent information

A significant minority of respondents commented on the importance of young people and their families having access to clear and accessible information. A small number suggested this would support them to be more involved in the transitions process and increase access to available support.

## Coordination of individual support and communication across sectors

The issue of multi-agency working in practice was a point of interest, with a significant minority of respondents keen to see better collaboration and communication across sectors. Towards this aim, suggestions included lead professionals, transitions coordinators, and greater involvement in transitions discussions of third sector partners who support young people and their families.

In relation to this priority, particular challenges in relation to the transition to adult services were again highlighted - with discrete specialisms and siloed working, a lack of continuity of support between children's and adult's services, and a lack of adult service representation during transitions planning all noted as barriers to young people experiencing a positive transition.

Support for parents/carers was again mentioned by a few respondents, especially with parents often assuming the mantle of a transitions coordinator for their young person. It was felt the support and information needs of parents/carers should be given greater consideration within the strategy. A small number of respondents also expressed particular care must be taken to ensure young people who are being home educated continue to receive transitions support.

## Consistency of practice and support across Scotland

Whilst this priority, as set out in the statement of intent, describes transitions training to improve consistency of support through the transitions journey, a few respondents took the opportunity to comment on their perceived lack of consistency in local availability of services. Respondents described a 'postcode lottery' of support which was said to be especially felt when moving between local authorities or health boards.

However, a small number of respondents agreed that the strategy should focus on consistency of support for transitions, rather than consistency of service availability. Access to suitable learning opportunities and training was seen as an enabler of smoother transitions for young people and their families. Better training to understand and support individual conditions was also viewed positively.

I think that we need to be careful to differentiate support from service provision as I do not think it is within the scope of the strategy to determine the latter.

## **Collection of data to measure progress and improvements**

A significant minority of respondents agreed that data collection was vital for ensuring young people are being supported in the right way to achieve positive outcomes. Of interest to some were the practicalities of how relational and experiential data would be collected and reported on, with others noting that already available data sets should be simplified, better organised and more accessible.

## **Other**

A few respondents mentioned the importance of recourse if young people's rights are not being upheld. Towards this, respondents suggested that options for access to independent advocacy should be clear to young people. It was felt this should be separate to the advocacy support parents/carers receive and should enable disabled young people to have their voices heard and rights upheld.

Similar to issues raised in response to other questions, a few respondents felt the priorities should include a commitment to improving post-school destinations and the availability of support options for disabled young people.

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# Question 5

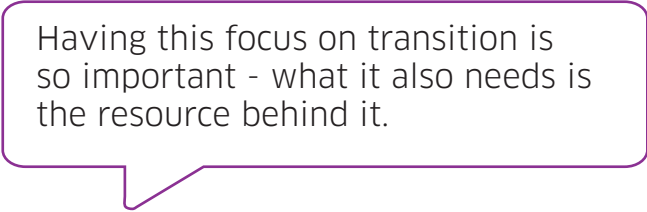
## Do you have any other comments on the statement of intent?

From the 108 responses received on this final open question (the only available response type for this particular question), the overarching themes which emerged echo much of what has been expressed in responses to previous questions. The following main three themes were identified:

- Aspiration versus reality
- Access to services and support
- Involving young people and parents/carers

### **Aspiration versus reality**

As within responses to previous questions, a small minority of respondents expressed dubiety around reconciling the ambition of the statement of intent with the current reality, and wanted greater clarification on 'how' the vision and priorities would be implemented in practice. This was within the context of a perceived lack of appropriate support options, post-school destinations, local services, resources and funding constraints.



Having this focus on transition is so important - what it also needs is the resource behind it.

### **Access to services and support**

The concerns highlighted above were seen to be especially prominent for young people with complex needs and/or life-shortening conditions. It was generally felt there aren't enough suitable supports and services for these groups of young people.

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A small minority of respondents felt that the deliverability of the ambition of the statement of intent must appropriately reflect the current mechanisms of service delivery, and would be reliant on engagement and strategic buy in at a local level.

A fundamental lack of services for young people with complex health needs to transition into, which in turn is the result of a lack of suitable resource, creates risks around basics such as safety and dignity. If the scale of challenge isn't recognised or defined as the strategy is developed, can the strategy provide the solutions?

Again, the particular challenges presented by moving from children's to adult's services were highlighted, with fragmented services and lack of equivalent support noted as impeding positive transitions. There were explicit concerns raised by a small number of respondents in relation to the transition to adult health and social care sectors.

### **Involving young people and parents/carers**

A few respondents took the opportunity to further emphasise the need to involve young people - both in the development of the strategy and in delivering the ambition of the statement of intent. Disabled People's Organisations (DPOs) were mentioned twice in the context of supporting the meaningful involvement of young people.

It was once again suggested that the role of - and support for - parents/carers as key advocates for their young people, must be acknowledged.

### **Summary Conclusion**

This report has presented an overview of all of the themes emerging through open text responses to each question presented. Within these, there are a number of (sub) themes which recur across multiple questions. For the purpose of this summary conclusion, we highlight the four (sub) themes which emerged in responses to three or more questions. These were:

- Role of parents/carers
  - Access to services and support
  - Young people with complex needs
  - Transitions between children's and adult's services
-

## **Role of parents/carers**

The role of parents/carers as key advocates and partners in their young person's transition to adulthood was highlighted, and respondents felt that the role of parents/carers should be strengthened within the strategy. This was felt to be particularly important for young people with complex needs or who may otherwise lack capacity for decision making.

Respondents noted any implications for guardianship should also be reflected within the strategy. Respondents also highlighted that parents/carers' own support needs should be considered alongside the support needs of their young person.

## **Access to services and support**

Respondents commented that delivering on the ambition of the statement of intent would be dependent on disabled young people being able to access suitable support and services. Whilst some respondents acknowledged they could have received better support if information had been provided to them, it was generally felt there is not enough choice or availability of support and options across Scotland for disabled young people to transition to. This included in health, social care and further education.

## **Young people with complex needs**

The term 'complex needs' emerged frequently, although no fixed definition of this term was apparent. Respondents used 'complex needs' to describe young people who:

- Have complex or multiple healthcare needs; and/or
- Have significant care needs; and/or
- Have a life-shortening condition; and/or
- Require support for transitions across multiple sectors e.g. education, health, independent living and social care; and/or
- Have a profound learning disability; and/or
- Otherwise lack capacity for decision making.

Some respondents felt that the ambition of the statement of intent did not sufficiently reflect the aspiration or needs of young people with 'complex needs'.

## **Transitions between children's and adult's Services**

Respondents highlighted the challenges presented by the transition between children's and adult's services, particularly in relation to health transitions. Respondents described a sharp drop – and in some cases gaps – in support, and reflected on challenges impeding smooth transitions such as securing adult service representation during transitions planning.

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# We will

We published our statement of intent and accompanying survey to sense check the scope, vision and priorities proposed for the strategy. We will now use the feedback obtained to develop the strategy.

As part of developing the outcomes (the improvements we want to see) and the actions (how we will get there), we aim to engage with more disabled young people, parents/carers and professionals or others with a role or interest in transitions in spring/summer of 2024. This next phase of engagement proposes to take a solution-focused approach, building on existing good practice to consider possible actions for the strategy. In doing so, we will take account of the key feedback themes outlined in this report.

# Annex

**Table 1: Respondent profile**

Type of respondent	Number
Disabled young person	8
Parents/carers of a disabled young person	49
Individual with a role or interest in supporting disabled young people's transition to adulthood	40
Organisation with a role or interest in supporting disabled young people's transition to adulthood	51
None of the above	3
<b>All respondents to survey</b>	<b>151</b>

**Table 2: Event profile**

Type of event (by audience)	Number
Disabled young person	2
Parents/carers of a disabled young person	2
Individual with a role or interest in supporting disabled young people's transition to adulthood	1
Professionals with a role or interest in supporting disabled young people's transition to adulthood	4
<b>Total number of events attended</b>	<b>9</b>

**Table 3: Level of agreement on whether the meaning given to ‘transitions to adulthood’ is the correct one for the strategy.**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Disabled young person	5	3	-	-	-
Parents/carers of a disabled young person	20	28	1	-	-
Individual with a role or interest in supporting disabled young people's transition to adulthood	21	17	1	1	-
Organisation with a role or interest in supporting disabled young people's transition to adulthood	13	35	1	1	-
None of the above	-	3	-	-	-
<b>All respondents to question</b>	<b>59</b>	<b>86</b>	<b>3</b>	<b>2</b>	<b>-</b>
<b>% of all respondents to question</b>	<b>39%</b>	<b>57%</b>	<b>2%</b>	<b>1%</b>	<b>-</b>

**Table 4: Level of agreement on whether the meaning given to ‘disabled young people’ is the correct one for the strategy.**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Disabled young person	5	3	-	-	-
Parents/carers of a disabled young person	20	27	1	-	1
Individual with a role or interest in supporting disabled young people's transition to adulthood	17	19	3	1	-
Organisation with a role or interest in supporting disabled young people's transition to adulthood	14	28	6	1	1
None of the above	1	1	-	1	-
<b>All respondents to question</b>	<b>57</b>	<b>78</b>	<b>10</b>	<b>3</b>	<b>2</b>
<b>% of all respondents to question</b>	<b>38%</b>	<b>52%</b>	<b>7%</b>	<b>2%</b>	<b>1%</b>

**Table 5: Level of agreement on whether the vision is correct for the strategy**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Disabled young person	5	3	-	-	-
Parents/carers of a disabled young person	22	20	4	1	2
Individual with a role or interest in supporting disabled young people's transition to adulthood	13	20	5	2	-
Organisation with a role or interest in supporting disabled young people's transition to adulthood	18	25	6	1	-
None of the above	1	2	-	-	-
<b>All respondents to question</b>	<b>59</b>	<b>70</b>	<b>15</b>	<b>4</b>	<b>2</b>
<b>% of all respondents to question</b>	<b>39%</b>	<b>47%</b>	<b>10%</b>	<b>3%</b>	<b>1%</b>

**Table 6: Level of agreement on whether the priorities are the correct ones for the strategy**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Disabled young person	4	-	-	-	-
Parents/carers of a disabled young person	20	22	5	-	2
Individual with a role or interest in supporting disabled young people's transition to adulthood	15	20	3	2	-
Organisation with a role or interest in supporting disabled young people's transition to adulthood	17	27	3	3	-
None of the above	-	2	1	-	-
<b>All respondents to question</b>	<b>56</b>	<b>71</b>	<b>12</b>	<b>5</b>	<b>2</b>
<b>% of all respondents to question</b>	<b>38%</b>	<b>49%</b>	<b>8%</b>	<b>3%</b>	<b>1%</b>



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Any enquiries regarding this publication should be sent to us at

The Scottish Government  
St Andrew's House  
Edinburgh  
EH1 3DG

ISBN: 978-1-83521-744-3

Published by The Scottish Government, May 2024

Produced for The Scottish Government by APS Group Scotland, 21 Tennant Street, Edinburgh EH6 5NA  
PPDAS1393894 (05/24)

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