Students in Scotland: Neurodiversity, mental health and disability
Introduction

Salvesen Mindroom Centre has paid increasing attention to the experience of students who are neurodivergent, or who may have a learning difficulty, transitioning out of compulsory education. The research reported here was conducted to understand the experience and profile of those students who enter higher and further Education (HFE) in Scotland, in order to enrich our transitions work, and to identify areas of inequality where further research is needed.

This research findings presented here are based on an analysis of quantitative data from the Scottish Funding Council, including two datasets of students enrolled in Scottish colleges and universities in the 2019/2020 academic year.

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**Findings**

Among college students with disabilities, ‘multiple disabilities’ was the most common disability type at 28% (13,870). Dyslexia was the second most common at 23% (11,540) and mental health conditions were third at 20% (10,000).

For university students with disabilities, specific learning difficulties were the most common at 32% (12,530), then mental health conditions at 28% (10,680) and multiple disabilities at 11% (4,405). More college students than university students reported having multiple disabilities. However, mental health conditions and learning difficulties were prominent in both groups.

![Pie Chart of Disability Type of College Students](image1)

![Pie Chart of Disability Type of University Students](image2)

**Types of Disabilities Among College Students in Scotland 2019/2020**

- Dyslexia: 23.4%
- Deaf / Hearing Impairment: 14.7%
- Mental Health Condition: 20.3%
- Multiple Disabilities: 28.1%
- Blind/Visual Impairment: 10.3%
- Wheelchair User / Mobility Impairment: 9.4%
- Unseen Disability: 10.4%
- Not Listed: 14.7%

**Disabilities Types Among University Students in Scotland 2019/2020**

- Not Listed: 32%
- Mental Health Condition: 28%
- Social / Communication Impairment: 11%
- Blind / Visual Impairment: 11%
- Two + Disabilities: 11%
- Long-Standing Illness: 11%
- Physical / Mobility Impairment: 11%
- Learning Difficulty: 11%
- Deaf / Hearing Impairment: 11%

Figure 1: Pie Chart of Disability Type of College Students; Source: Scottish Funding Council

Figure 2: Pie Chart of Disability Type of University Students; Source: Scottish Funding Council
Concerning gender and sex, there was no difference in the percentage of men and women who declared a disability in college, as 16% (24,210) of males and 16% (26,975) of females declared a disability. However, more college students identifying with ‘other’ gender reported a disability (28%) (455).

In universities, the sex divide in disability status is similar to the trend seen in colleges, with 12% (13,740) of men and 15% (24,725) of women declaring a disability in university. Again, however, students identifying with ‘other’ sex had a higher incidence of reporting disabilities at 21% (175).

Overall, students identifying with other-gender or sex had higher rates of disclosing disabilities in both college and university.

Findings
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In addition, specific disabilities feature in some genders more than others. For example, 16% (260) of college students who identified with other gender reported having a mental health condition, in comparison to 3.87% (5,795) of men and 7.18% (11,695) of women. On the other hand, 65.9% (5,675) of those with social or communication impairments in college are male. Very similar trends are seen among university students - women make the majority of those enrolled in university, yet they comprise only 33% (530) of students with social or communication impairments. Conversely, females comprise 73% (7,845) of those with mental health conditions, whereas males only account for 26% (2,765) of those with mental health conditions in university. It should also be noted that mental health conditions were the most commonly declared disability among other-sex university students: 39% (70) of other-sex students who declared a disability, declared a mental health condition.

Additionally, in both universities and colleges, white students declared disabilities at a higher rate than ethnic minority students. In college, 18% (49,055) of white students and 9% (2,205) of ethnic minority students declared a disability. In university, the figures stand at 17% (33,500) of white students and 7% (3,195) of ethnic minority students.
Findings

Regarding course subject, 27% (13,625) of students with disabilities in college were in personal and family care courses. Meanwhile, 18% (255) of university students with social or communication impairments did computer science degrees. In addition, higher proportions of students without disabilities studied business compared to students with mental health conditions, social or communication impairments, and more than one disability.

The findings concerning the receipt of the Disabled Students’ Allowance come from the university data only. Only a small percentage of university students receive the DSA. Overall, 19% (5,320) of Scottish-domicile students with disabilities reported receiving the DSA, 72% (20,145) reported not receiving it, and 9% (2,570) of students did not declare either way.

Those with specific learning difficulties have the highest percentage of students receiving DSA at 30% (2,650), compared to those with a long-standing illness, where only 7% (190) of those students receive the DSA.
Finally, the factors correlated with the Scottish Credit and Qualification Framework (SCQF) level of the course the students were enrolled on was modelled with a linear regression.

Learning difficulties and mental health conditions were positively associated with SCQF level, meaning students with these impairments are predicted to be on higher SCQF level courses than students without one of these impairments.

On the other hand, learning disabilities, having any disabilities or multiple disabilities, social and communication impairments were negatively associated with SCQF level.
Findings

The difference in SCQF course-level of students who declared disabilities and those who did not, decreased as students came from more privileged backgrounds.

Among students in the highest quintile of the Scottish Index of Multiple Deprivation (SIMD), there was no statistically significant difference between students who declared a disability and those who did not in the SCQF level of their course.
Further research should be conducted in the following areas:

1. What percentage of students do not disclose their disabilities to HFE institutions and why do they not do so?
2. How can higher rates of disclosure be encouraged?
3. The relationship between gender, HFE, and mental health conditions.
4. Why is there a gap in the rate of disability disclosure between white students and ethnic minority students?
5. Why are more students with disabilities not receiving the DSA?
6. Why does having certain disabilities influence students’ enrolment in lower SCQF level courses?
7. How can the gap in SCQF-level aim between students with and without disabilities from disadvantaged backgrounds be closed?