Children with disability and Special Educational needs (SEN)

Gloucestershire County Council

Pupil Wellbeing Survey

2026

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Executive summary

This report draws on findings from the 2026 Gloucestershire Pupil Wellbeing Survey (PWS) to examine the experiences of children and young people with special educational needs and disabilities (SEND), including those with disabilities, identified SEN or Education, Health and Care Plans (EHCPs), and students who identify as neurodivergent. Across most domains, the analysis points to a consistent pattern of poorer outcomes for these groups relative to their peers, with the most pronounced inequalities often observed among neurodivergent students and, in some areas, students with disabilities. The findings indicate that SEND should be understood not only as an educational inclusion issue, but as a cross-cutting determinant of health, wellbeing, safeguarding risk and future life chances.

Survey participation was broad, covering around 70% of students in participating year groups, but some SEND groups are likely to be under-represented, particularly students in special settings and those with the most complex needs. Self-reported SEND also differs from administrative records: 12.6% of students reported SEN/EHCP in the survey, compared with 21.6% recorded in the January 2026 School Census. This suggests that the findings may understate the extent of need. Even so, the direction of travel is clear: reported SEN/EHCP has increased over time, mirroring national trends, and students with SEND are disproportionately likely to report indicators associated with disadvantage, including eligibility for free school meals.

The strongest and most consistent findings relate to mental health and emotional wellbeing. Students with disabilities, SEN/EHCP and particularly neurodivergent students were significantly more likely to report low mental wellbeing, lower happiness, reduced feelings of being valued, and markedly higher rates of self-harm. Many were more likely to have accessed support, but also more likely to report barriers to receiving it, including cancelled appointments, waiting lists, difficulty attending appointments, and not feeling understood by adults. These findings suggest that demand for support is high, but that access and responsiveness remain uneven. Alongside this, SEND students were also less likely to report healthy behaviours associated with resilience and good outcomes, including sufficient sleep, regular physical activity, good oral health, and healthy diets, and were more likely to consume sugary drinks, energy drinks and unhealthy snacks.

The analysis identifies a substantial safeguarding and vulnerability gradient. Students with SEND were more likely to report feeling unsafe at home, in their neighbourhood and at their education setting, more likely to experience bullying, more likely to have witnessed or experienced domestic abuse and more likely to report four or more adverse childhood experiences. In educational settings many reported poorer education experiences, including lower enjoyment of school, reduced feelings of safety and belonging, and lower confidence that they receive the help they need with learning. They were also more likely to report being in trouble at school, experiencing isolation, suspension or exclusion, and missing substantial periods of education, often linked to mental health, bullying and school disengagement. These patterns indicate that SEND vulnerability is cumulative and intersects with attendance, behaviour, safeguarding and inclusion agendas.

A notable nuance in the analysis is that students attending special settings often report more positive experiences than SEND students in mainstream settings, including in relation to education enjoyment, feeling safe, belonging, and receiving appropriate help. While these findings should be interpreted cautiously because of the small special setting sample, they may indicate the value of environments in which provision is more explicitly adapted to need.

The analysis points to the importance of a whole-system response strengthening inclusive practice in mainstream settings; improving the accessibility and timeliness of mental health and early help support; addressing the overlap between SEND, deprivation and safeguarding; and ensuring that attendance, behaviour, RSHE, oral health and healthy lifestyle interventions are designed with SEND students in mind. The lack of meaningful narrowing of the gap between those with SEN and their less vulnerable peers in the last 10 years suggests that reducing inequalities for children and young people with SEND will require coordinated

action across education, public health, children's social care and wider partnership services.

Introduction

Having a special educational need or a disability (SEND) can affect a child's experience of education. Barriers to education that could be experienced by students with SEND include:

- The impact that the funding challenges bring
- Equitable access to available opportunities, facilities and support
- Lack of inclusivity
- Bullying/communication with peers
- Lack of timely access to specialist support

These can be mitigated by good communication with parents, building positive relationships with and between students and empowering students with SEND to ask for the help they need.

Students with SEND can be more vulnerable to some health-harming behaviours and be less able to enjoy healthy lifestyle choices. This report looks at the experiences of students with SEND in Gloucestershire.

The Pupil Wellbeing Survey

The Pupil Wellbeing Survey (PWS) and Online Pupil Survey™ (OPS) is a biennial survey that has been undertaken with Gloucestershire students since 2006. Children and young people participate in Years 4, 5 and 6 in primary settings; Years 8 and 10 in secondary settings; and Years 12 and 13 in post-16 settings such as sixth forms and colleges. A large proportion of mainstream, special and independent settings, colleges and educational establishments take part, representing approximately 70.0% of students in participating year groups in 2026. The PWS asks a wide variety of questions about children's characteristics, behaviours and lived experience that could have an impact on their overall wellbeing. The 2026 PWS was undertaken between January and April 2026.

Limitations and caveats of the survey

Not all children and young people who are resident in Gloucestershire attend educational establishments in the county and similarly not all children and young people attending educational establishments in Gloucestershire are residents in the county. It is therefore important to remember this analysis is based on the student population not the resident population.

Gloucestershire is a grammar authority and has a number of notable independent settings, and several mainstream settings very close to the county's boundary; these all attract students from out of county. This results in the education population (particularly at secondary phase) having slightly different characteristics, especially ethnicity, to the resident young people's population. 12.3% of Gloucestershire's resident population (2021 Census) were estimated to be from diverse ethnic communities; however, 23.1% of Gloucestershire's education population were students from diverse ethnic communities in January 2026 and 23.4% of the PWS cohort were students from diverse ethnic communities in the 2026 survey.

Although a large proportion of the county's educational settings took part in the survey, some only had low numbers of students completing the survey; in contrast, others had high numbers. Although this doesn't impact the overall county analysis, as demographics are represented as expected at this geography, analysis by district and education phase might only have certain demographic groups represented due to low student take-up (for example, low numbers completing the survey in Tewkesbury at FE level). Where FE provision is situated also impacts the survey, as older students travel further to access FE provision.

Analysis of deprivation

Settings have been categorised into statistical neighbour groups which cluster settings with

students of a similar socio-economic profile within the same type of setting (a similar level of deprivation, affluence or personal/family characteristics).

We use Ministry of Housing, Communities and Local Government (MHCLG) Indices of Multiple Deprivation (IMD) to determine the relative deprivation of students. The IMD is based on the home postcode of students (collected in the School Census). This is aggregated to give an overall IMD score for the setting, reflecting the deprivation levels experienced by students. The settings are then split into quintiles based on their scores: quintile 1 is the most deprived and quintile 5 is the least deprived in Gloucestershire.

In addition:

- Grammar/selective settings are compared to other grammar/selective settings in their phase without reference to the IMD.
- Independent settings are compared to other independent settings in their phase without reference to the IMD.
- Post-16 only/Further Education (FE) colleges are compared to all other post-16 only colleges without reference to the IMD.
- Special settings are compared to all other schools of this type in the same phase without reference to the IMD.
- Vocational and alternative settings are compared to other settings in the same phase without reference to IMD.

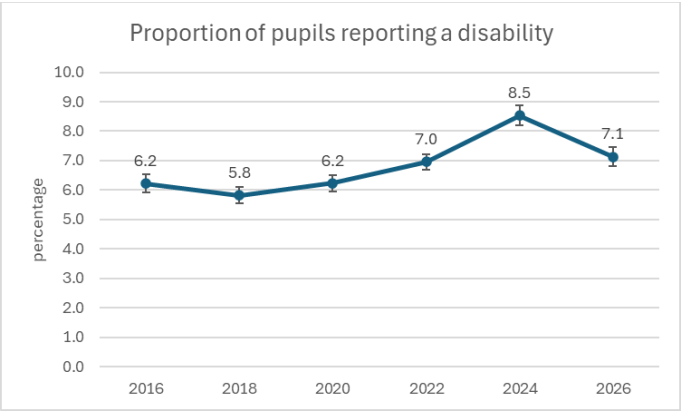
Prevalence of Special Educational Need (SEN) and Disability

Key takeaways:

Self-report vs official data differ:

- Students' perceptions don't always match formal classifications.
- Physical disability reporting is higher in the PWS survey when compared to student census data.
- Learning needs are under-reported by students compared to school data.
- Neurodiversity is widely identified with, including by students without a formal disability.
- Although students with special educational needs and disabilities come from all backgrounds, they are more likely to be male, more likely to be White British, and more likely to come from lower-income families, especially those in special schools.

In the 2026 survey 7.1% of students said they had a disability (2,105 students), this was significantly lower than in 2024 but in line with 2022.



Reported disability increases with age and is highest in post-16 students (8.8% in 2026).

Older students in secondary and post-16 education are asked to report the type of disability they have. Since 2020, about 3.0% of all students have consistently reported having a physical disability. However, when looking only at students who said they have any disability, those with a physical disability make up a larger share—around one third—with this proportion reaching 35.7% in 2026.

5.7% of all secondary and post-16 students reported a learning disability in 2026, this increased during and post the pandemic period but has reduced to be in line with the 2020 figure (5.2%). As a proportion of those reporting a disability around 3 in 4 (70.6%) reported a learning disability.

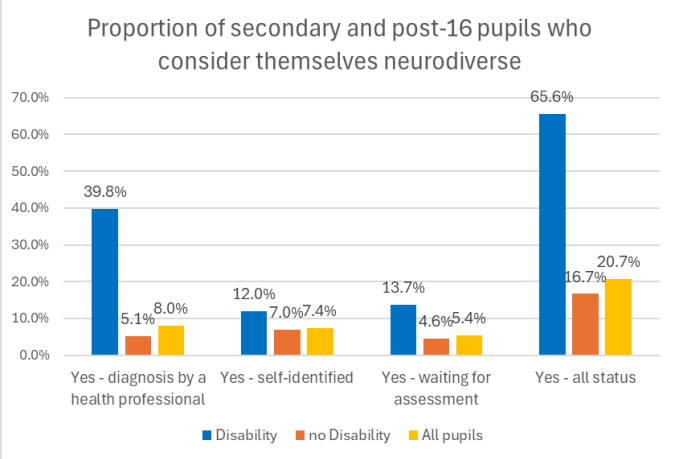
In the January 2026 School Census 0.7% of students had a recorded physical disability (including *Visual impairment* and *Hearing impairment*) as their primary need, however many children have learning disabilities that severely impact their physical health (*Profound & Multiple Learning Difficulty* and *Severe Learning Difficulty*), when these are included, it suggests 1.3% of students are likely to have a physical disability, slightly lower than the proportion in the survey. Although the most severely disabled students are unlikely to have completed the survey, and therefore there is likely to be higher self-reported physical disability in the survey.

In the January 2026 Stchool Census 14.3% have a non-physical special educational need identified as their primary need (excluding *Social Emotional and Mental Health*). This is higher than those reporting a Learning disability in the 2026 PWS (5.7%).

Students might not see their need as a *learning disability* which might account for the lower proportion.

In 2026 older students were also asked if they considered themselves neurodiverse; overall, 20.7% agreed. 8.0% said they had been diagnosed by a health professional, 7.4% said they had self-diagnosed and 5.4% said they were on the waiting list to be assessed.

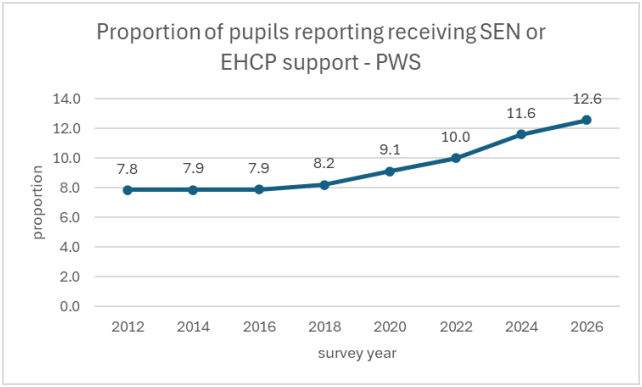
It is interesting that 65.6% of those who reported they had a disability also reported they considered themselves to be neurodiverse. 16.7% of those who did not report a disability considered themselves neurodiverse.



In the January 2026 School Census, 4.2% of students had a primary need that aligns with neurodivergence (*Autistic Spectrum Disorder* and *Specific Learning Disability*); however, it is important to understand that not all neurodivergent diagnoses have individual primary need categories in the census, for example ADHD.

In the survey 12.6% reported they had *Special Educational Needs* (SEN) or an *Education, Health and Care Plan* (EHCP), in the January 2026 Student Census 21.6% of students have recorded SEN support or an EHCP. This suggests students with special educational needs are under-represented in the survey, although some students, especially younger students, may not be aware of their special educational needs and the support they receive.

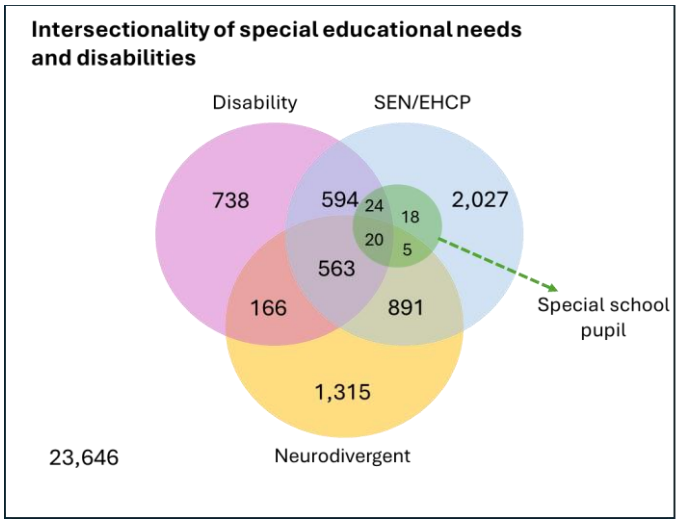
The proportion of students reporting SEN/ EHCP has been increasing since 2018, this aligns with the known national increase in SEN and EHCP since 2015.



0.2% (67) of survey responses in 2026 were from students at *special schools*; this includes maintained and independent special schools. A further 0.9% were at vocational or alternative provision settings.

The low number of students from special settings completing the survey may be due to the nature of their need precluding them from doing so. A review of the special setting version of the survey will be undertaken in the following year to explore the best way to increase responses from special setting students.

There is some intersectionality between the different special educational needs and disabilities categories, as shown in the diagram below. All students at special schools have an EHCP.



Whilst there will be some crossover between groups, data in this report will be given separately for students in special schools, students with SEN/EHCP, students who consider themselves neurodiverse and students with a disability. Values relating to special setting students should be treated with caution due to the cohort size.

Students at a special setting (70.0%), those with a disability (54.8%) and students with an SEN/EHCP (54.9%) were significantly more likely to be biologically male than the survey cohort (49.4%). A significantly higher proportion of female students reported being neurodivergent (53.5%).

Students at special settings (87.3%), those with SEN/EHCP (77.9%), students with a disability (78.6%) and neurodivergent students (77.6%) were significantly more likely to be from a white British background than their less vulnerable peers (75.6%, 73.0%, 72.3%, 69.5% respectively).

Students with SEN/EHCP, disability and neurodivergent students appear to be represented equally across mainstream deprivation quintiles. However, those with SEN/EHCP (*OR 2.0*), those with a disability (*OR 2.1*) and neurodivergent students (*OR 2.1*) were twice as likely to report they were eligible for free school meals (FSM). Students at special settings were seven times (*OR 7.3*) more likely to report they were eligible for FSM. This could suggest that whilst students with special educational needs live across diverse socio-economic areas, as individuals they are more likely to come from low-income families.

Healthy living

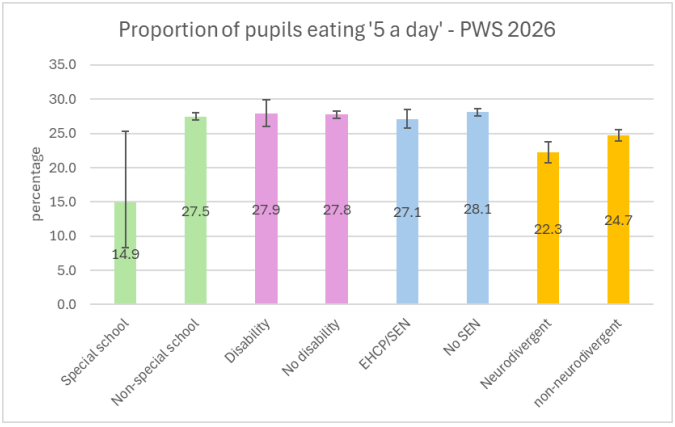
Key takeaway:

- Students with SEN, disabilities, or neurodivergence are less active and face more barriers to exercise, but there are encouraging signs of gradual improvement over time for those with SEN/EHCP.

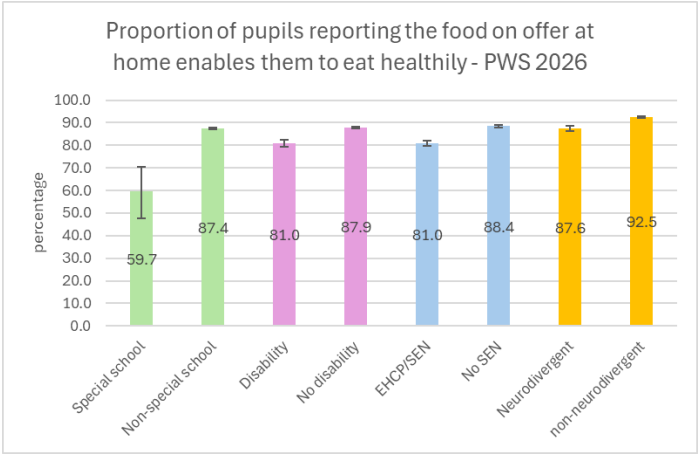
Healthy eating

Eating healthily can help support growth and development as well as forming good habits for adulthood. The NHS recommends eating 5 portions of fruit and veg per day – '5 a day'.

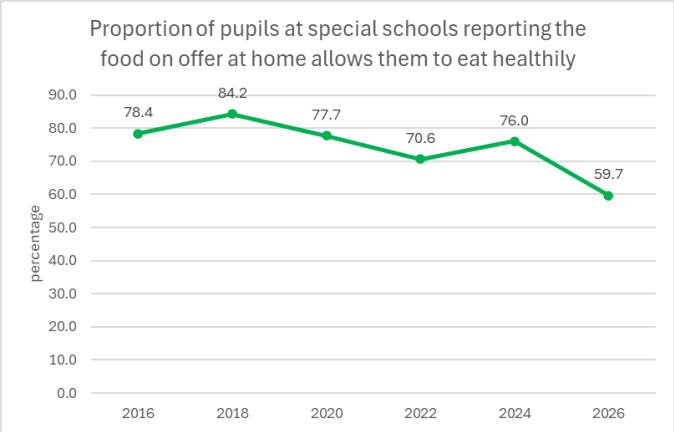
The proportion of students who reported they had a disability and reported eating '5 a day' (27.9%) was in line with those with no disability (27.8%). Students with SEN/EHCP were also in line with those with no SEN in reporting that they ate 5 a day (27.1% vs. 28.1%). However, students from special schools (14.9%) and neurodivergent students (22.3%) were significantly less likely to report eating '5 a day' than their less vulnerable peers (27.5% and 24.7% respectively).



Being able to eat healthily relies on healthy choices being available to students. Students at special settings, those with a disability, those with SEN/EHCP and neurodivergent students were all significantly less likely to report the food available at home allowed them to eat healthily compared to their less vulnerable peers.



The proportion of students at special settings reporting they had healthy food available at home has been reducing since a peak in 2018.

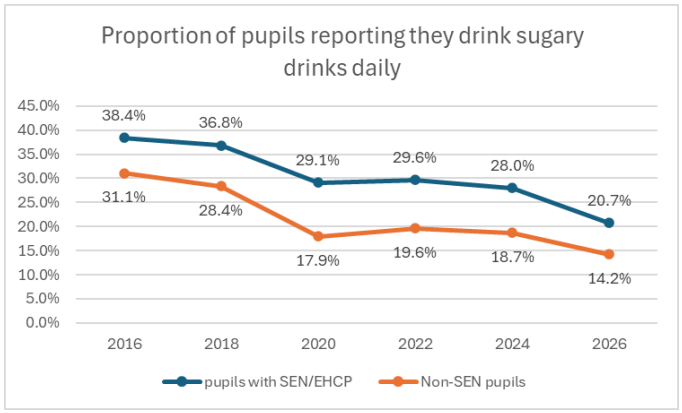


There is no significant difference between neurodivergent students (53.9%) reporting that they eat unhealthy snacks at least daily and their less vulnerable peers. Whilst not statistically significant, students at special settings (60.7%) had a higher proportion of students reporting that they eat unhealthy snacks at least daily.

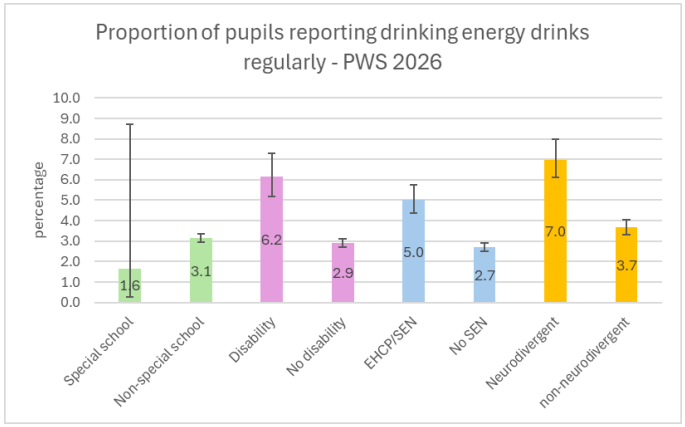
Those with a disability (55.1%) and those with SEN/EHCP (54.8%) were significantly more likely to report eating unhealthy snacks at least daily compared to their less vulnerable peers (51.4% and 51.1% respectively).

Students at special settings (34.4%), those with a disability (22.7%), those with SEN/EHCP (20.7%) and neurodivergent students (21.8%) were significantly more likely to report drinking sugary drinks at least daily than their less vulnerable peers (15.2%, 14.7%, 14.2%, and 15.7% respectively).

Whilst there has been a reduction in students reporting drinking sugary drinks daily there is still a significant gap between those with SEN/EHCP and non-SEN students.



Students with a disability and those with SEN/EHCP were also significantly more likely to report drinking energy drinks daily than their less vulnerable peers.



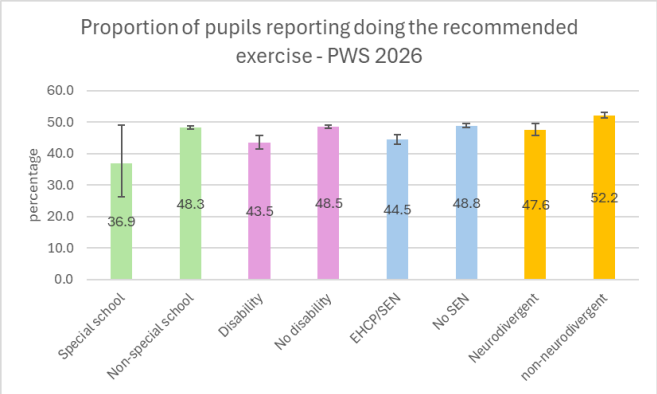
Exercise

Key takeaway:

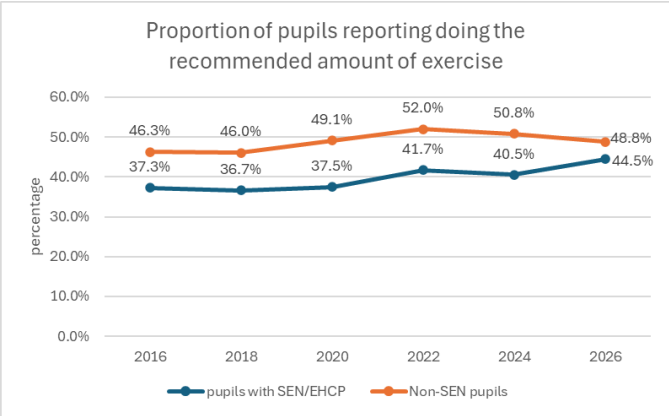
- Students with SEN, disabilities, or neurodivergence are less active and face more barriers to exercise, but there are encouraging signs of gradual improvement over time for those with SEN/EHCP.

It is important for health and wellbeing to be physically active; this may be more challenging for children with a disability.

Students with a disability (43.5%), those with SEN/EHCP (44.5%) and neurodivergent students (47.6%) were significantly less likely to report that they did the recommended hours of exercise per week than their less vulnerable peers: 48.5%, 48.8% and 52.2% respectively. They were also significantly less likely to say they found it easy to be physically active.



However, exercise levels have been slowly increasing for students with SEN/EHCP since 2016 in contrast to those with no SEN/EHCP.

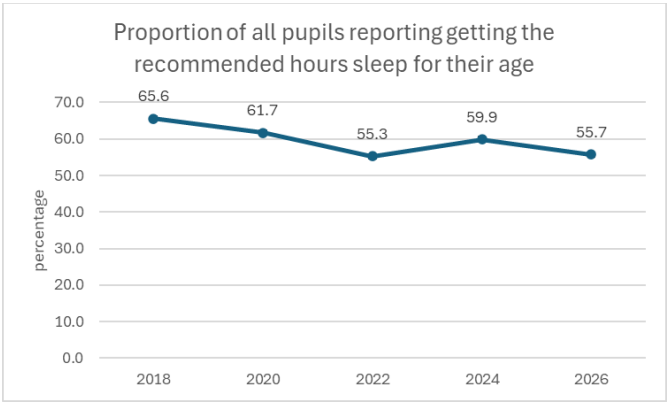


Sleep

Key takeaway:

Sleep among students is declining overall, with lower levels among those with disabilities, SEN, and neurodivergence—highlighting potential inequalities linked to wellbeing, despite slightly higher (but uncertain) levels in special schools.

In 2018 60.7% of all students reported getting the recommended hours sleep, since then it has been steadily declining and in 2026 had dropped significantly to 52.0%.



Students with a disability (50.2%), those with SEN/EHCP (52.3%) and neurodivergent students (44.0%) were significantly less likely to report getting the recommended amount of sleep. Sleep has been closely correlated to mental wellbeing.

Students at special settings (68.6%) were more likely to report getting the recommended sleep than those at non-special settings (55.7%), although not statistically significantly.

Oral health

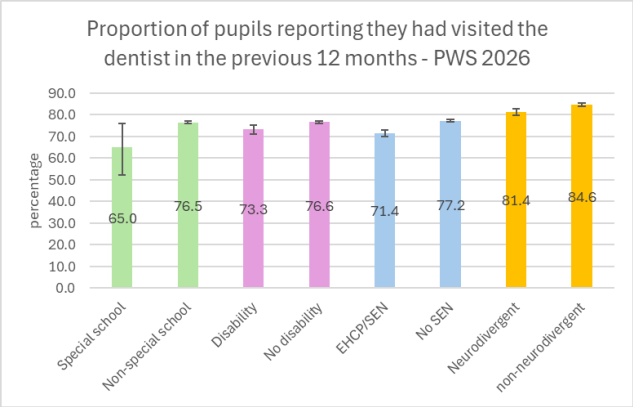
In 2026 all students were asked about their oral health and accessing oral hygiene services[1].

Students at special settings (86.4%), those with a disability (91.2%), those with SEN/EHCP (91.3%) and neurodivergent students (93.1%) were significantly less likely to report cleaning their teeth at least once a day than their less vulnerable peers (95.8%, 96.2%, 96.5% and 97.7%).

Students at special settings (65.0%), those with a disability (73.3%), those with SEN/EHCP (71.4%)

[1] Previously these questions had only been asked to primary students.

and neurodivergent students (81.4%) were significantly less likely to report they had seen the dentist in the previous 12 months.



Mental Health and wellbeing

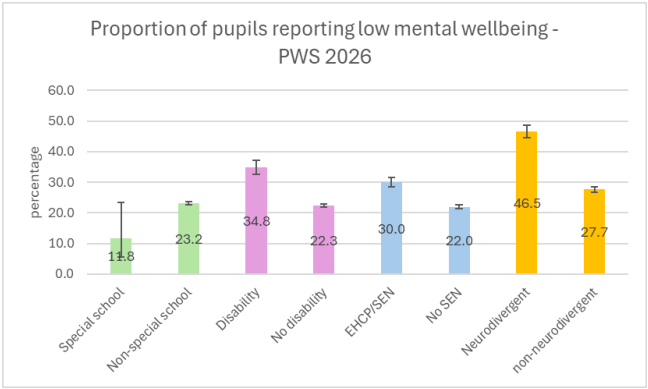
Key takeaways:

- Students with SEN, disabilities, and particularly neurodivergent students experience significantly poorer mental wellbeing, lower happiness, and higher risk of self-harm, alongside ongoing barriers to accessing support despite greater need. Overall conclusions:
- Clear inequalities in mental health exist, especially for neurodivergent students
- Wellbeing has not improved post-pandemic for students with SEN/EHCP
- Access to support is uneven, with barriers still common
- Higher risk behaviours (self-harm) highlight the need for early and effective intervention
- Feeling undervalued and unsupported is a key contributing factor

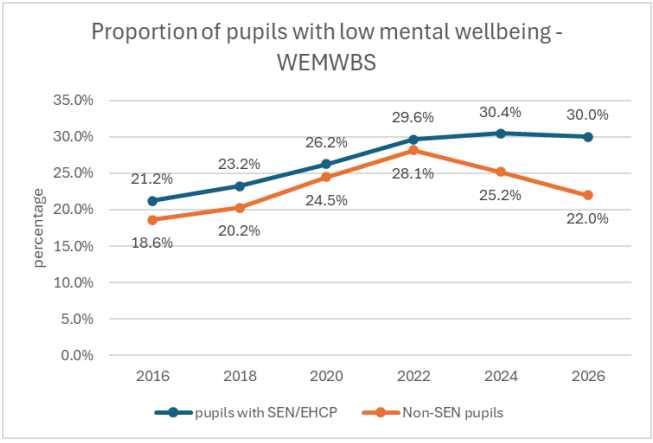
WEWMBS

In the PWS we use several measures to assess students' mental wellbeing. One of these is the Warwick and Edinburgh Mental Wellbeing Scale (WEMWBS), an internationally recognised wellbeing measure. We use categorised scores to represent students with low, average and high mental wellbeing, the low mental wellbeing (LMW) score has been aligned with the NHS diagnosis of probable clinical anxiety and/or depression.

Students with a disability (34.8%), those with SEN/EHCP (30.0%) and neurodivergent students (46.5%) were significantly more likely to report LMW than those with no disability (22.3%), those with no SEN (22.0%) and neurotypical students (27.7%). Those who attended special settings were in line with their less vulnerable comparator peers.



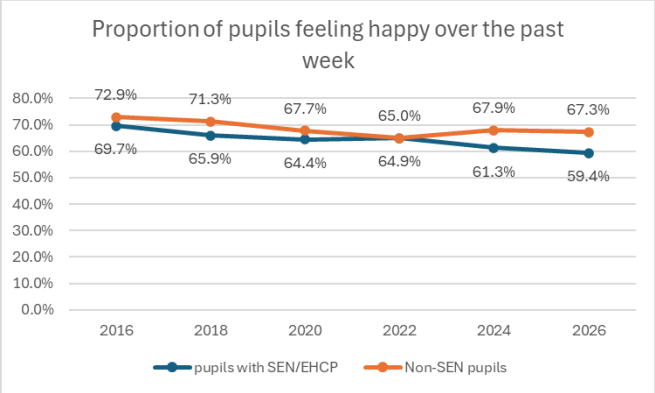
Whilst students with no SEN have seen a significant reduction in the proportion of students with low mental wellbeing since the pandemic, students with SEN/EHCP have sustained a high percentage of low mental wellbeing since the pandemic.



Happiness

The proportion of children reporting they felt *Quite happy/Happy most of the time* in the last week was significantly higher in students at special settings (81.0% vs. 66.1%); however, students with a disability (54.8% vs. 66.9%), students with SEN/EHCP (59.4% vs. 67.3%) and neurodivergent students (45.5% vs. 63.5%) were significantly less likely to say they felt *Quite happy/Happy most of the time* than those with no disability, no SEN and neurotypical students.

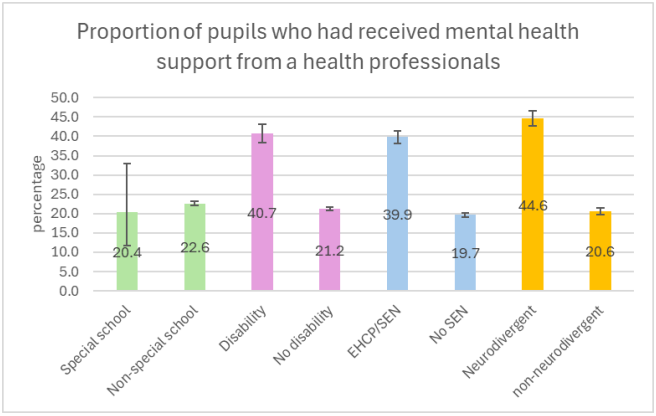
Historically there has been a gap in reported happiness between students with SEN/EHCP and those with no SEN. A narrowing in the gap observed during the pandemic is due to a reduction in happiness in those with no SEN rather than an improvement in those with SEN/EHCP.



Students with a disability, SEN/EHCP and neurodivergent students were significantly less likely to feel valued by peers and adults around them than their less vulnerable peers. Neurodivergent students were the least likely to feel valued by their peers or adults around them (48.3%).

Support for mental health

Neurodivergent students (44.6%), students with a disability (40.7%) and those with SEN/EHCP (39.9%) were significantly more likely to say they had received support for mental health.



Students were asked which professionals had helped them, students with EHCP/SEN were significantly more likely to say they accessed mental health support from:

- 'On your Mind' support finder (*OR 2.7*)
- Educational Psychologist (*OR 2.7*)
- CanDo (Self Harm helpline) (*OR 2.1*)
- Young Gloucestershire (*OR 2.0*)

Neurodivergent students were significantly more likely to say they accessed mental health support from:

- Educational Psychologist (*OR 2.2*)
- ChatHealth (*OR 2.3*)
- Young Gloucestershire (*OR 2.0*)

1 in 5 students who were not receiving professional mental health support felt they needed it. Students with SEN/EHCP were more likely to say they didn't receive professional mental health support because; *My appointment was cancelled*. Students with a disability were more likely to say they didn't receive professional mental health support because; *Still on waiting list* and *My appointment was cancelled*. Neurodivergent students were more likely to say they didn't receive professional mental health support because; *Still on waiting list, I tried but adults didn't take me seriously or understand,* and *It was too difficult to get to my appointment*.

Students with a disability (*OR 2.2*) or SEN/EHCP (*OR 2.1*) were twice as likely to report they self-harmed, and neurodivergent students (*OR 3.0*) were 3 times more likely to report they self-harmed than their less vulnerable peers.

Health harming behaviours

Key takeaways:

- Risk behaviours are generally declining or stabilising: Smoking and alcohol use have decreased over time, as has the proportion of young people trying vapes.
- Inequalities are persistent: Students with disabilities, SEN/EHCP, and neurodivergence consistently show higher engagement across all risk behaviours.
- Differences are widening in some areas (e.g. screen time, drug use

Smoking cigarettes

The proportion of students that had ever tried smoking has been declining from 15.2% in 2012 to 6.2% in 2026. Students with a disability were twice as likely to report trying smoking and three times as likely to be regular smokers than those without a disability (3.3% vs. 1.1%). Students with SEN/EHCP were significantly more likely to report trying cigarettes and twice as likely to report being regular smokers than those with no SEN/EHCP (2.3% vs. 1.0%).

Neurodivergent students were significantly more likely to report trying cigarettes and twice as likely to report smoking regularly compared to neurotypical students (4.5% vs. 2.0%).

Vaping

In 2016 (when questions about vaping were introduced) 1 in 10 students said they had ever vaped this increased during the pandemic years, peaking in 2022 when 1 in 6 students said they had ever vaped. In 2026 1 in 10 students reported trying vaping.

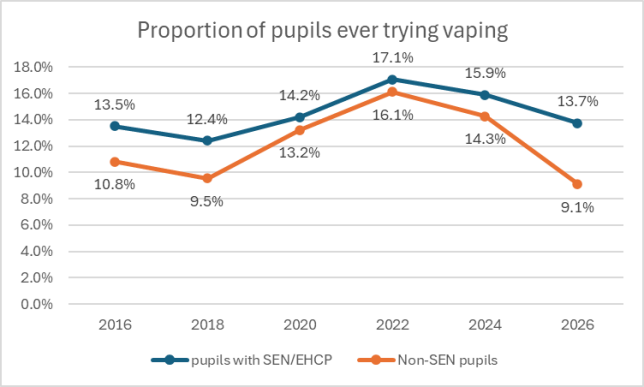
Students with a disability, those with SEN/EHCP and neurodivergent students were significantly more likely to have tried vaping and significantly more likely to vape regularly than their less vulnerable peers. There was no significant difference in those at special schools.

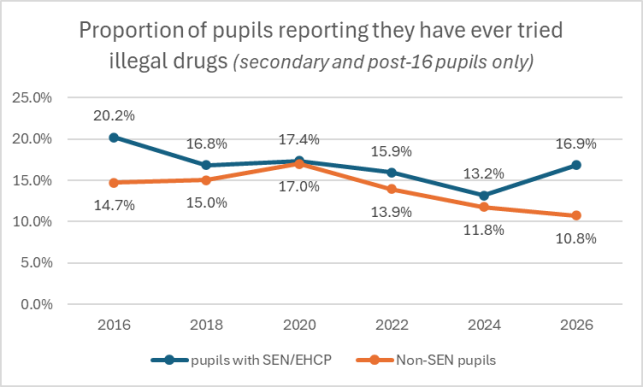
Vaping status PWS 2026 - all phases		
	Tried vaping %	Vaped *Often/most days* %
Pupils at special schools	3.0	1.5
Pupils at non-special schools	6.2	4.0
Pupils with a disability	14.9	7.2
Pupils without a disability	9.9	3.8
Pupils with SEN/EHCP	13.7	5.8
Pupils with no SEN	9.1	3.4
Neurodivergent pupils*	27.1	13.4
Neurotypical pupils	17.1	6.8
** secondary and post-16 pupils only*		

Despite the legal age for buying vapes in the UK being set at 18, between 1 in 10 and 1 in 6 of all students said they had tried vaping. Historically, students with SEN/EHCP have been more likely to report they have ever tried vaping.

There was an increase in students reporting they had tried vaping aligned with the introduction of disposable vapes becoming widely available in the UK from around 2020 onwards[2]. The proportion of students with no SEN reporting they have ever tried vaping has reduced significantly between 2024 and 2026, this hasn't been observed to the same extent in students with SEN/EHCP. The government banned disposable vapes from 1st June 2025.

[2] https://www.sciencedirect.com/science/article/pii/S2666776224000917





Drinking alcohol

The proportion of students saying they have *never* tried alcohol has increased from 45% in 2012 to 61.6% in 2026.

Students at special settings (18.2%) were significantly less likely to report trying alcohol than their less vulnerable peers (38.5%). In contrast, students with a disability (46.0%) and neurodivergent students (68.9%) were significantly more likely to report trying alcohol than their less vulnerable peers (38.0% and 56.7% respectively). Students with a disability (6.6%), SEN/EHCP (6.0%) and neurodivergent students (12.6%) were also significantly more likely to report drinking alcohol regularly (*Quite often/Most days*).

Drugs

11.9% of secondary and post-16 students reported ever trying drugs; Cannabis was the drug they were most likely to have tried.

There was no significant difference in the proportion of students at special settings reporting trying drugs and their less vulnerable peers. Students with a disability (16.7%), SEN/EHCP (16.9%) and neurodivergent students (17.9%) were significantly more likely to report trying drugs than their less vulnerable peers (11.7%, 10.8% and 10.6% respectively).

Historically, students with SEN/EHCP were more likely to say they had tried illegal drugs than those with no SEN. There has been an increase between 2024 and 2026 in the proportion of SEN/EHCP students reporting trying illegal drugs that is not observed in those with no SEN.

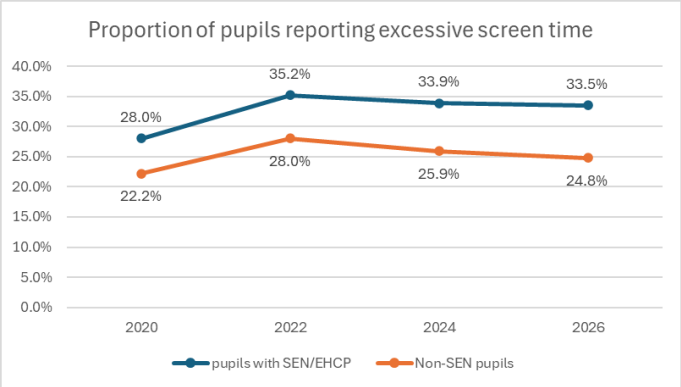
Excessive screen time

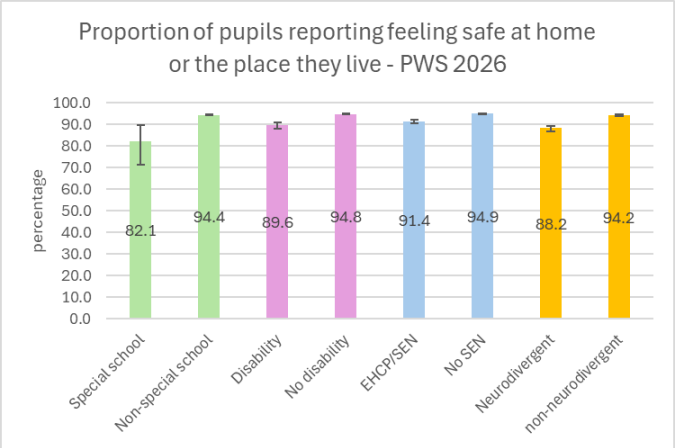
In the UK, the average media/screen usage of a teenager is estimated to be 6–7 hours per day. The mean screen time in PWS 2026 was 4–6 hours for students at both secondary and post-16 phases and between 0–3 hours for primary-phase students. Excessive media/screen time has been classified in the survey as students reporting 7+ hours of media/screen time per day.

In 2026 1 in 4 (26.1%) students reported excessive media/screen time, similar to 2024.

1 in 3 students with disability (35.2%), those with SEN/EHCP (33.6%) and 43.7% of neurodivergent students reported excessive screentime, significantly higher than their less vulnerable peers, students at special schools were also higher (34.3%) although not significantly.

The gap between SEN/EHCP and non-SEN students reporting excessive screentime has widened slightly since 2022. This is predominantly due to a reduction in students with no SEN reporting they have excessive screentime.





Feeling safe

Key takeaways:

- More vulnerable groups report feeling consistently less safe and face higher risks of harm.
- Exposure to domestic abuse and bullying amongst those with a disability, SEN/EHCP or neurodiversity remains significantly higher than their less vulnerable peers.

Safe at home and safe in neighbourhood

The proportion of students saying they feel safe where they live has been increasing since 2012 from 86.0% to 94.4% in 2026. However, for students at special settings (82.1%), those with a disability (89.6%), those with SEN/EHCP (91.4%) and neurodivergent students (88.2%) the proportion who reported they felt safe at home was significantly lower than less vulnerable students.

They were also significantly less likely to report feeling safe outside in the neighbourhood they lived in than less vulnerable students.

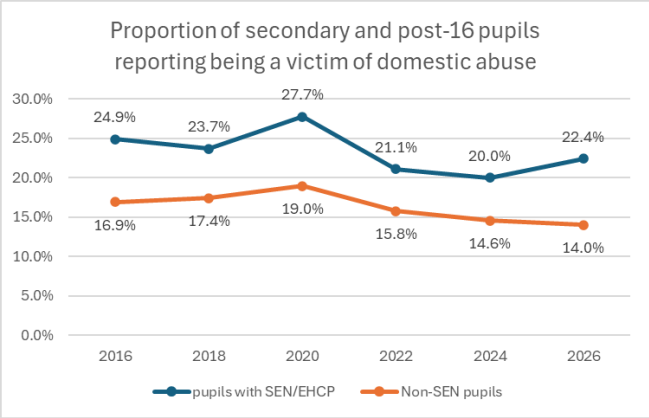
Domestic Abuse

In 2026 just under a quarter (23.4%) of secondary and post-16 students reported ever witnessing domestic abuse, coercive control or teen relationship abuse (subsequently referred to collectively as 'domestic abuse') which was in line with observed values since 2020.

Around 1 in 6 students in 2026 reported ever being a victim of domestic abuse, this is in line with previous surveys.

Students with a disability (32.1%), those with SEN/EHCP (30.8%) and neurodivergent students (34.4%) were significantly more likely to report they had ever *witnessed* domestic abuse. 1 in 4 students with a disability (22.4%), students with SEN/EHCP (22.4%) and neurodivergent students (25.2%) reported *being a victim* of domestic abuse, significantly higher than their less vulnerable peers.

Historically, students with SEN/EHCP have been more likely to report being a victim of domestic abuse.



Students at special settings were less likely to have witnessed or experienced domestic abuse.

Bullying

In 2024, 1 in 5 (21.7%) of all students said they had experienced serious bullying in the past year, and 5.6% of students reported being a regular victim of bullying in the previous year. This has declined since 2012 when it was 9.9%. Students with a disability (11.0%) were twice as likely to report being regularly bullied than their non-disabled peers (5.2%), those with SEN/EHCP (9.0%) and neurodivergent students (7.5%) were also significantly more likely to report regular bullying. Those at special schools were less likely to report regular bullying (3.0%), although not significantly.

Of those who had been bullied a quarter of those with a disability (24.1%), and 1 in 6 of those with SEN/EHCP (16.1%) and neurodivergent students (15.9%) reported they felt they were bullied because of their disability or learning needs.

Relationships

Key takeaways:

- Protective factors, e.g. family stability, support, friendships are weaker for vulnerable students, contributing to wider inequalities.
- Social connection is declining for all students, but gaps are widening most for those with SEN, disabilities, and neurodivergence.
- Much higher proportions identifying as LGB or gender diverse across disability, SEN/EHCP, and neurodivergence.
- Higher exposures to risk factors (e.g. ACEs, exploitation) are concentrated in vulnerable groups.

Living situation

Just under three quarters (72.0%) of students reported that they live full-time with both their parents, which is similar to the number in 2024 (71.9%). 12.2% of students reported living part-time with both their parents in separate houses, 12.3% reported living in a single parent family.

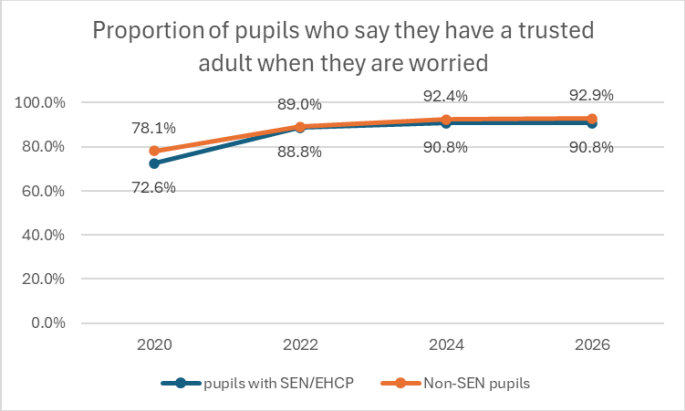
Students with a disability (64.3%), those with SEN/EHCP (65.2%) and neurodivergent students (60.1%) were significantly less likely to live with both parents. Students with a disability (5.3%), those with SEN/EHCP (5.4%) and neurodivergent students (6.0%) significantly were more likely to report living somewhere other than with their parents than their less vulnerable peers (3.5%).

Support in a time of need

Most young people say they have a trusted adult to go to for help when they are worried (92.6%); this has increased since 2024 (84.3%).

However, students with a disability (88.8%), those with SEN/EHCP (90.8%) and neurodivergent students (85.7%) were significantly less likely to report having someone to turn to for help when they were worried than their less vulnerable peers (92.9%, 92.9% and 92.1% respectively). Students at special settings were significantly more likely to say they had someone to turn to for help when they were worried.

Historically, although they appear similar, students with SEN have been less likely to have a trusted adult to turn to when they are worried.

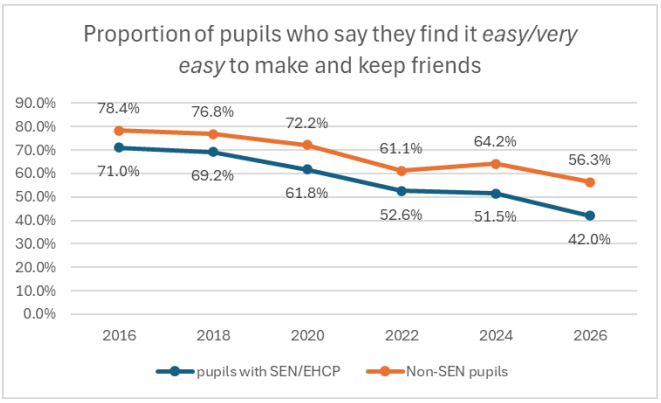


Making and keeping friends

The proportion of students saying they find it easy to make and keep friends has been in decline since 2012 (71.4%) however there has been a stark drop that started pre-pandemic reducing from 69.4% in 2018 to 54.4% in 2026.

Students with any SEN need in mainstream settings were significantly less likely to say they found it easy to make and keep friends, than students with no SEN. This was similar in students with SEN/EHCP (42.0% vs. 56.3%), those with a disability (40.1% vs. 55.4%) and neurodivergent students (38.7% vs. 56.5%).

The chart below shows the steady decline in students saying they find it easy to make and keep friends. Whilst there appears to have been a gap between those with SEN/EHCP and those with no SEN for some time, the gap is widening.



Students at special settings were also less likely to say they found it easy to make and keep friends but not statistically significantly.

Sexuality and gender

Students with a disability (50.6%) were significantly more likely to report identifying as LGB than any other group. Although students with SEN/EHCP (40.6%) and neurodivergent students (44.4%) were also significantly more likely to identify as LGB than non-SEN peers. International research[3] suggests that a larger proportion of disabled than non-disabled people are sexual minorities.

Students with a disability (7.9%), those with SEN/EHCP (6.0%) and neurodivergent students (6.8%) were significantly more likely to report being trans, gender fluid or non-binary than comparator less vulnerable students (2.7%).

3 https://www.tandfonline.com/doi/abs/10.1080/09687599.2019.1689925

Sexual health

Just over half of all students (56.2%) said the relationships, sex and health education (RSHE) they received was relevant and useful. Students at special schools were significantly more likely to agree with this statement (78.8%), but those with a disability (50.5%), those with SEN/EHCP (52.4%) and neurodivergent students (42.3%) were significantly less likely to say the relationships, sex and health education (RSHE) they received was relevant and useful.

The vast majority of students said they understood consent in a healthy relationship (95.9%). However, students with a disability (92.1%) and those with SEN/EHCP (92.9%) were significantly less likely to say they understood consent. This may be influenced by the higher proportion of males in these cohorts who historically have been less likely to report they understand consent than females.

In 2026 12.9% of students (in Year 8 and above) reported engaging in sexual intercourse; this was lower than in 2020 (17.4%) and 2022 (14.2%) and in line with 2024 (12.5%).

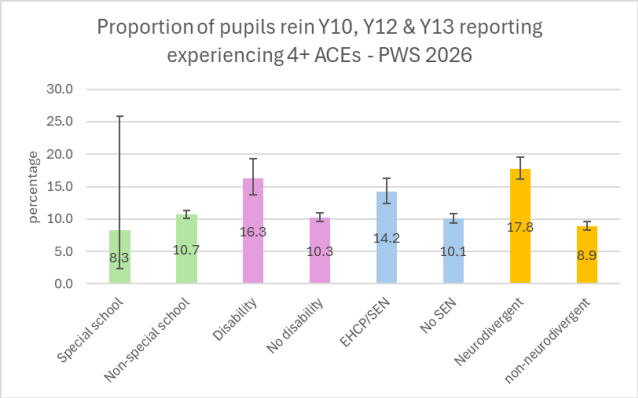
Neurodivergent students were significantly more likely to report engaging in sexual intercourse (15.9%) than any other SEN group and students with no SEN.

In 2026 secondary and post-16 students were asked if an adult had ever taken advantage of an imbalance of power to coerce, manipulate or deceive them into sexual activity, online or in person. Around 1 in 20 students (4.7%) said an adult had ever taken advantage of an imbalance of power to coerce, manipulate or deceive them into sexual activity, online or in person.

Students with any SEN need in mainstream settings, those with SEN/EHCP (8.3%), those with disability (8.3%) and neurodivergent students (8.8%) were all significantly more likely to say an adult had ever taken advantage of an imbalance of power to coerce, manipulate or deceive them into sexual activity, online or in person.

Adverse Childhood Experiences - ACEs

Experiencing 4 or more ACEs has been linked with worse health and life outcomes. In 2026 students in Year 10, Year 12 and Year 13 were asked to tick which ACEs they had experienced in a change to the previous methodology. Overall, 1 in 10 (10.7%) students reported 4 or more ACEs, there was no significant difference in students at special settings (8.3%) and their less vulnerable peers. However, students with a disability (16.3%), those with SEN/EHCP (14.2%) and neurodivergent students (17.8%) were significantly more likely to report experiencing 4+ ACEs than their less vulnerable peers.



School experience

Key takeaways:

- Most students are broadly positive about school, but experience is significantly worse for those with a disability, SEN/EHCP or neurodivergence.
- Special schools consistently show more positive outcomes, while students with disabilities, SEN/EHCP and neurodivergence in mainstream settings report poorer experiences across nearly all measures.
- Engagement, safety, belonging and support are strongly interconnected.

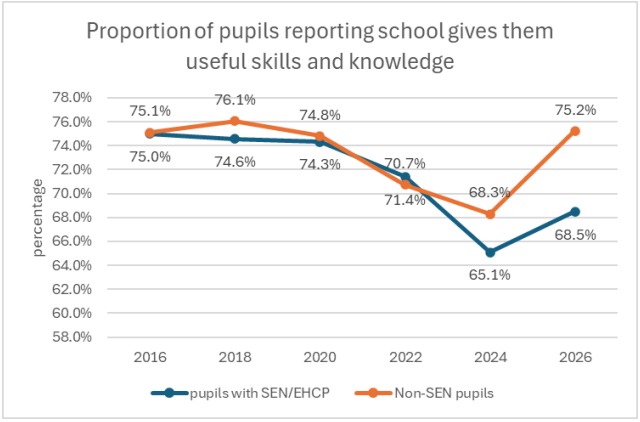
Enjoying Education

Almost two-thirds of all students (61.9%) report they enjoy school; those at special settings were significantly more likely to say they enjoyed school (78.1%); however, a lower proportion of those with a disability (50.4%), those with SEN/EHCP (54.2%) and neurodivergent students (45.4%) reported they enjoyed school.

Students at special settings (82.8%) were more likely to report feeling happy at school *quite often/most of the time*. Those with a disability (43.5%), those with SEN/EHCP (48.2%) and neurodivergent students (31.3%) were significantly less likely to report that they felt happy at school.

Most students report their setting gives them useful skills and knowledge (74.3%), a higher proportion of students at special schools (84.4%) reported they felt their setting gave them useful skills and knowledge. Students with a disability (63.2%), those with SEN/EHCP (68.5%) and neurodivergent students (54.9%) were significantly less likely to report school gave them useful skills and knowledge.

Historically, the proportion of students reporting their setting gives them useful skills and knowledge for those with SEN/EHCP and non-SEN students had been similar. However, following a reduction in the proportion observed in both groups in 2024, whilst those with no SEN have recovered to levels seen pre-pandemic, those with SEN/EHCP have only seen modest recovery.



Feeling safe at school

8 in 10 of all students report they feel safe in school (80.3%). Students at special settings (94.8%) were significantly more likely to report they felt safe at school. Students with an SEN/EHCP (73.5%), those with a disability (70.4%) and neurodivergent students (65.7%) were significantly less likely to report they felt safe at school.

Getting help at school

Around two-thirds of students reported they got the help they needed at school with learning (68.7%), however, students with a disability (56.4%), those with SEN/EHCP (62.7%) and neurodivergent students (46.9%) were significantly less likely to report they got all the help they needed from school with learning. Students at special settings were significantly more likely to say they got enough help at school with learning (88.7%).

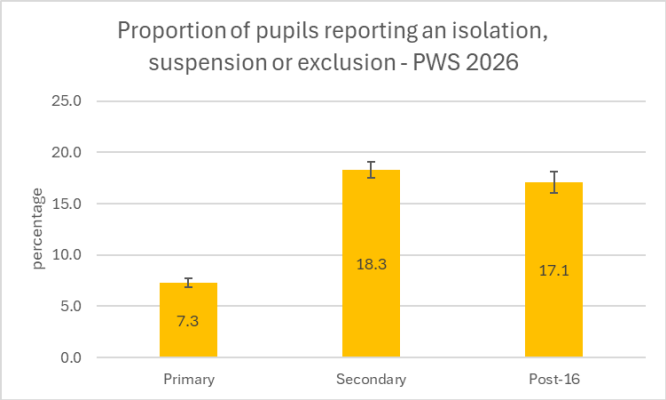
Isolation, suspension and exclusion, and absenteeism

Students in quintile 1 (most deprived) settings were the most likely to report often being in trouble (12.4%) and those in selective settings (5.3%) and post-16 colleges were the least likely (4.3%). Being

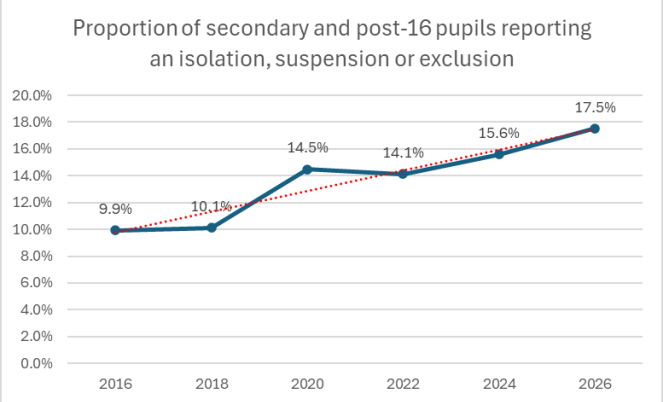
in trouble appears to be linked to deprivation, with the proportion reducing as deprivation decreases.

Students with disability (17.0%), those with SEN/EHCP (16.6%) and neurodivergent students (16.5%) were around twice as likely to report often being in trouble at school than their less vulnerable peers.

In 2026 primary students were asked about isolation, suspension and exclusion for the first time. In 2026 12.3% of all students reported having an isolation, suspension or exclusion. However, isolation, suspensions and exclusions are dominated by secondary and post-16 students.

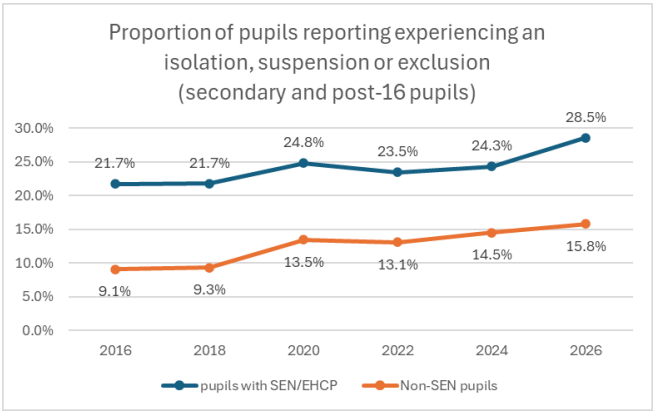


Trend data is therefore better to look at only for secondary and post-16 students, this shows a continuing upwards trend.



Experience of an isolation, suspension or exclusion appears to be linked to deprivation. In mainstream secondary settings experiencing an isolation, suspension or exclusion appears to reduce as deprivation decreases with students in quintile 5 schools and selective settings having the lowest reported level of isolation, suspension or exclusions. Experience of an isolation, suspension or exclusion was significantly higher for students with a disability (22.5%), those with SEN/EHCP (21.2%) and neurodivergent (27.9%) students.

When looking only at secondary and post-16 students, historically students with SEN/EHCP have been more likely to have an isolation, suspension or exclusion, but this has followed a similar trend to those with no SEN.



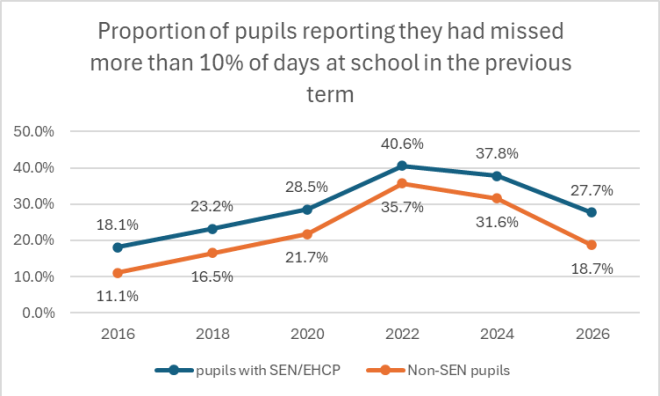
Students were asked how many school days (each school day includes 2 sessions) they had missed in the previous term (in the 2026 survey this would have been autumn term 2025). Students may miss education due to both authorised and unauthorised reasons.

Persistent absence is a measure used by the Department for Education to track when a student's overall unauthorised absence equates to 10% or more of their possible sessions. In the survey it isn't possible to determine if student-reported absence is authorised or unauthorised, and so a comparison to nationally published figures isn't appropriate. The most recent nationally published data shows 17.2% of Gloucestershire students were persistently absent in 2024/25[4].

In the 2026 survey 1 in 5 students (20.1%) reported being absent from education for 10% or more of sessions in the previous term (authorised and unauthorised), compared to over 1 in 3 students (31.8%) in the 2024 survey (Autumn term 2023).

A significantly higher proportion of students with a disability (31.0%), those with SEN/EHCP (27.7%) and neurodivergent students (33.9%) reported being absent from education for 10% or more of sessions in the previous term. There was no significant difference for students in special settings (27.8%).

The gap between SEN/EHCP students and non-SEN students has remained similar since 2016, despite trend changes.



Students with SEND were also more likely to report they had been absent for 16 days or more in the previous term (special setting– 7.7% vs 3.8% non-special school, disability – 8.9% vs 3.5% non-disability, SEN/EHCP – 7.2% vs 3.3% non-SEN, neurodivergent – 9.1% vs. 3.9% neurotypical).

Students with a disability were significantly more likely to say they missed education for the following reasons:

- Mental health/anxiety (*OR 2.2*)
- Avoiding bullying (*OR 2.3*)
- Truancy/skiving (*OR 2.4*)
- Hanging out with friends (*OR 3.0*)

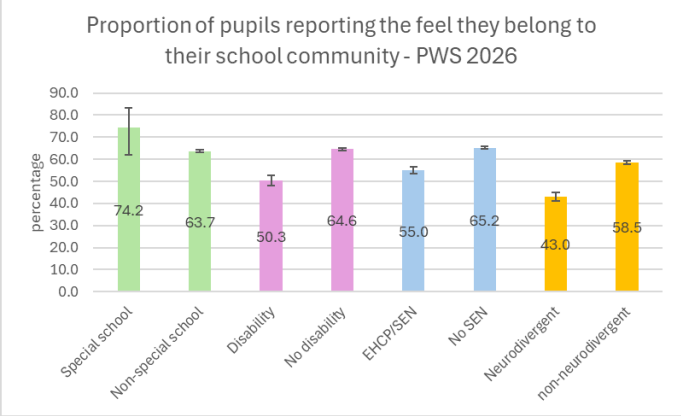
Students with SEN/EHCP were significantly more likely to say they missed school for the following reasons:

- Mental health/anxiety (*OR 2.1*)
- Avoiding bullying (*OR 2.0*)
- Truancy/skiving (*OR 2.0*)
- Hanging out with friends (*OR 2.0*)

Neurodivergent students were significantly more likely to say they missed education for the following reasons:

- Mental health/anxiety (*OR 3.1*)
- Staying at home because don't want to go to school (*OR 2.3*)
- My home situation prevents me from going to school (*OR 2.1*)
- Avoiding bullying (*OR 2.9*)
- Don't like school (*OR 2.6*)
- Don't like particular lessons (*OR 2.3*)
- Truancy/skiving (*OR 2.4*)
- Hanging out with friends (*OR 2.7*)
- Too tired to go (*OR 2.4*)

In 2026 students were asked if they felt they belonged to their school community, two-thirds (63.7%) said they felt they belonged *Often/All of the time*. Whilst students at special settings were more likely to feel like they belonged to their school community, the opposite was observed in students with a disability, those with SEN/EHCP and neurodivergent students.



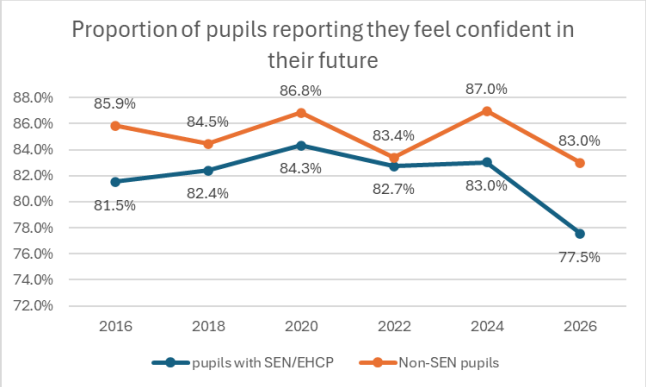
Future aspirations

Key takeaways:

- Confidence, aspirations, and perceived achievement are all lower among vulnerable groups.
- Gaps are consistent and persistent over time, particularly for SEN/EHCP students.

The proportion of students with a disability (73.5%), those with SEN/EHCP (77.5%) and neurodivergent students (66.3%) reporting they felt confident about their future was significantly lower than their less vulnerable peers (82.9%, 83.0% and 79.6% respectively). No difference was seen between students in special settings (82.5%) and non-special setting students (82.3%).

Historically, students with SEN were less likely to report feeling confident in their future than their less vulnerable peers.



Over three-quarters of secondary and post-16 students felt the education/careers advice they had received had been useful in helping them plan their future. Students in special settings (80.6%) were in line with the county average in feeling education/careers advice had been useful.

However, students with SEN in mainstream settings; those with a disability (73.2%), those with SEN/EHCP (75.3%) and neurodivergent students (72.5%) were significantly less likely to say the education/careers advice they had received had been useful in helping them plan their future.

Students in secondary settings were asked what they plan to do after Year 11; overall, 17.2% planned to do an apprenticeship, 59.7% planned to go to college/sixth form, 21.3% said they didn't know and 1.7% said nothing. Students with SEN/EHCP were significantly more likely to say they planned to do nothing after Year 11 (*OR 2.1*).

Students in post-16 settings were asked what they planned to do next.

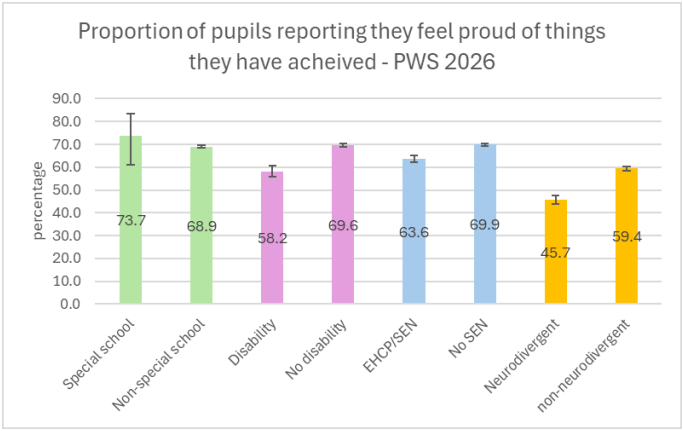
- 15.9% said an apprenticeship
- 14.7% said paid work
- 0.5% said voluntary work
- 52.8% said university
- 15.6% didn't know
- 0.8% said nothing

Students with a disability (*OR 3.3*), those with SEN/EHCP (*OR 3.1*) and neurodivergent students (*OR 3.2*) were significantly more likely to say nothing.

Students with a disability (*OR 4.1*) and neurodivergent students (*OR 2.2*) were also significantly more likely to say voluntary work.

Students with a disability, those with SEN/EHCP and neurodivergent students were also significantly less likely to report they planned to go to university.

Students with a disability (58.2%), those with SEN/EHCP (63.6%) and neurodivergent students (45.7%) were significantly less likely to report they felt proud of what they had achieved in their life, than less vulnerable students. There was no significant difference between students at special settings (73.7%) and those at non special settings (68.9%).



Historically, there has been a gap between the proportion of SEN/EHCP students reporting they felt proud and their less vulnerable peers. This only narrowed during the pandemic period and this was

influenced by a reduction of students with no SEN reporting they felt proud.