



Travelling with Confidence

Final Project Report

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Executive Summary

This report presents comprehensive evaluation findings from the travel and disability awareness elements of Travelling with Confidence (TWC) programme, a mobility training initiative delivered by Devon Communities Together in partnership with Disability Together (formerly Living Options Devon). The programme operated from June 2024 to November 2025, reaching 103 participants across 9 delivery partner organisations in Devon.

AT A GLANCE



Aims of the project

1. Increase skills and confidence in planning and undertaking public transport journeys for people with disabilities
2. Improve public transport staff awareness of the challenges for disabled travellers
3. Co-design training with service users
4. Increase public awareness of the challenges for disabled travellers

Confidence

- Two-thirds of participants reported improved confidence.
- Journey planning confidence rose 12.8 points (38% to 51%),
- Confidence using transport rose 11.2 points (49% to 61%).

Social benefits

Ability to spend time with friends increased 10.7 points (47% to 58%)



Practical skills

Two-thirds of participants said that they gained new skills



Transport staff awareness

- All those trained agreed that the training increased their awareness
- 56% said they would change how they interact with passengers as a result of the training

Learnings

- **Doing beats talking:** confidence grows through actual travel, not classroom learning.
- **Group work accelerates progress:** and working together promotes social bonding
- **Planning is harder than travelling:** and digital platforms exacerbate this
- **Support staff need support:** to move from helping to enabling
- **One size fits nobody:** a wide range of needs requires multiple learning pathways



Recommendations

Increase practical learning element

- Restructure to 70:30 Practical-to-Classroom with Parallel Pathways

Create parallel learning pathways

- ‘Tech-first’ to accommodate those able to deal with digital and online planning
- ‘Low-tech’ for those who find it harder to access digital systems

Train Staff to Enable, Not Do-For

- Including pre-training content for staff/carers; live observation (not helping) by staff/carers; Post-training organizational action planning

Strengthen the Evidence Base

- Streamline evaluation and include longer term follow up studies



Most Significant Change (MSC)

The Most Significant Change (MSC) methodology is a participatory evaluation approach that captures qualitative stories of change from project participants and stakeholders. Rather than relying solely on quantitative metrics, MSC involves collecting personal narratives about how a project has impacted people's lives, then systematically filtering these stories through various organisational levels to identify which changes represent the most significant or meaningful outcomes.

These stories informed the conclusions and recommendations of the report.

Three Illustrative Stories

The examples below illustrate the types of change described across the MSC set.

Group Learning Accelerates Bonding and Social Confidence

Story 1: Young Person Building Confidence

"B reports a significant increase in confidence, particularly in talking to people. The environment was less strict than school, making it easier to open up... The initial nerves faded quickly, and the positive group atmosphere made a big difference."

Confidence Grows Through Doing, Not Classroom Learning

Story 2: First Time Train User

"He was very nervous about using the train – he has never been on one before. In the station he was extremely worried it would be very loud. However, it wasn't too bad and the experience was quite calm. He thinks he might even get a train again."

Flexible, Person-Centered Delivery Is Essential

Story 3: Carer Group Transformation

"W wants to encourage the group to travel. 'When you do everything for the group you don't see what they are capable of.' By including the group in planning, W will be developing everyone's skills and making the group more of a community."

See [Appendix 2](#) for the full stories and analysis

Detailed Analytical Report

Key Quantitative Findings at a Glance

Outcome Measure	Pre	Post	Change
Confident planning journeys	38.8%	50.8%	+11.9pp
Confident using public transport	52.4%	60.6%	+8.2pp
Stress level using public transport	39.8%	46.9%	+7.1pp
Can spend time with friends	47.1%	57.8%	+10.7pp

Programme Satisfaction

- Mean helpfulness rating: 4.19 out of 5 (78% rated 4 or 5)
- 81.2% would recommend the training to others
- 63.3% reported positive change in confidence; 68.0% reported increased travel

Most Significant Change Stories

- 36 qualitative stories collected; 83.3% positive sentiment
- Dominant themes: social life/work (33%), confidence/anxiety (21%)

Driver Training Awareness

- 27 staff trained; mean rating 9.14 out of 10
- 100% agreed training raised awareness of disability needs
- 55.6% expressed clear intention to change behaviour

Methodological Note

The evaluation created anonymous participant identifiers intended to support matched pre/post analysis. In practice, while baseline completion was high, post-training completion on core questions was notably lower, meaning only a limited number of participants provided complete pre- and post-training responses suitable for paired analysis. Because the resulting matched sample would be small and likely affected by non-response bias, I did not undertake paired statistical tests or report individual trajectories. Instead, I report descriptive changes in aggregate proportions between the pre- and post-training snapshots and interpret results cautiously.

Use of AI-assisted tools.

AI-assisted tools were used to support proofreading, clarity, and consistency of written English. The tools were used for language and presentation only. All analytical decisions, interpretation of results, and final content remain the responsibility of the authors and the organisation "www.chatgpt.com"

1. Introduction

1.1 Programme Background

Travelling with Confidence (TWC) is a mobility training programme designed to address the barriers that prevent people with disabilities and long-term conditions from using public transport independently. The programme recognises that transport accessibility encompasses confidence, knowledge, skills, and the attitudes of transport providers.

The programme is delivered by Devon Communities Together in partnership with Disability Together, through 9 delivery partner organisations serving distinct communities across Devon.

1.2 Programme Components

The TWC training programme comprises two complementary strands:

Participant Training: Direct training for individuals covering practical skills, confidence building, and supported travel experiences.

Driver Awareness: Training for transport staff to improve awareness of passenger needs and provide welcoming, accessible services.

1.3 Evaluation Framework

- Quantitative pre- and post-training surveys measuring confidence, stress, and participation (collected using standardised paper forms for post-training feedback, alongside an optional Equality and Diversity monitoring form)
- Demographic profiling of participants
- Most Significant Change (MSC) methodology for qualitative impact assessment
- Post-training evaluation of Training Awareness component
- Natural language processing (NLP) for open text analysis

1.4 Report Structure

- Section 2: Participant Demographics
- Section 3: Pre-training Baseline
- Section 4: Post-training Outcomes and Comparative Analysis
- Section 5: Most Significant Change Stories
- Section 6: Training Awareness Evaluation
- Section 7: Conclusions and Recommendations

2. Participant Demographics

This section presents the demographic profile of TWC participants, drawing on optional equality monitoring data collected alongside the programme. Understanding participant characteristics is essential for assessing programme reach and contextualising outcomes.

Demographic interpretation

The participant profile indicates that the programme is largely reaching its intended audience. A total of 83.5% report a disability or long-term condition, and more than half report multiple support needs. The age distribution is clearly bimodal, with the largest groups being younger participants aged 16 to 24 and older adults aged 65 and over. This suggests that a single delivery model is unlikely to meet the needs of all cohorts equally well. These characteristics are also likely to reflect the programme's referral pathways, which are centred on further education providers and carer or community organisations, rather than the wider Devon population. As such, the profile provides important context for cohort-specific delivery and follow-up support.

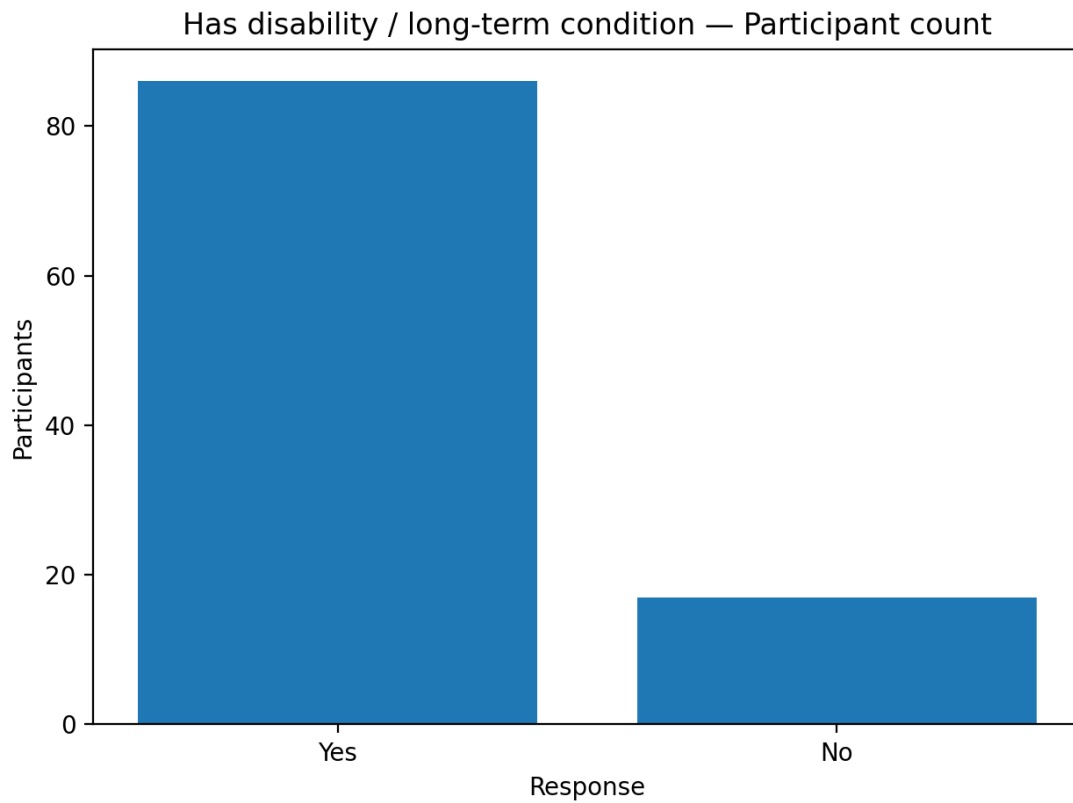
Graphic interpretation: what the demographic profile suggests

The combination of a strongly bimodal age pattern and high prevalence of disability can reasonably be interpreted as a 'reach' effect: in practice, programmes focused on travel confidence and access are more likely to be taken up by cohorts who face the greatest compounded barriers to independent travel. [Wider Department for Transport research on transport access and social connection](#) provides a consistent contextual signal, identifying younger people and people with health conditions among groups more likely to experience reduced social connection where transport access and confidence are constrained. This evaluation does not measure loneliness directly; however, our demographic pattern is not unexpected and aligns with that wider national context.

2.1 Overview

Metric	n	%
Total unique participants	103	100.0%
Has disability / long-term condition: Yes	86	83.5%
Has disability / long-term condition: No	17	16.5%

The programme successfully reached its target population, with over four fifths (83.5%) reporting a disability or long-term condition.

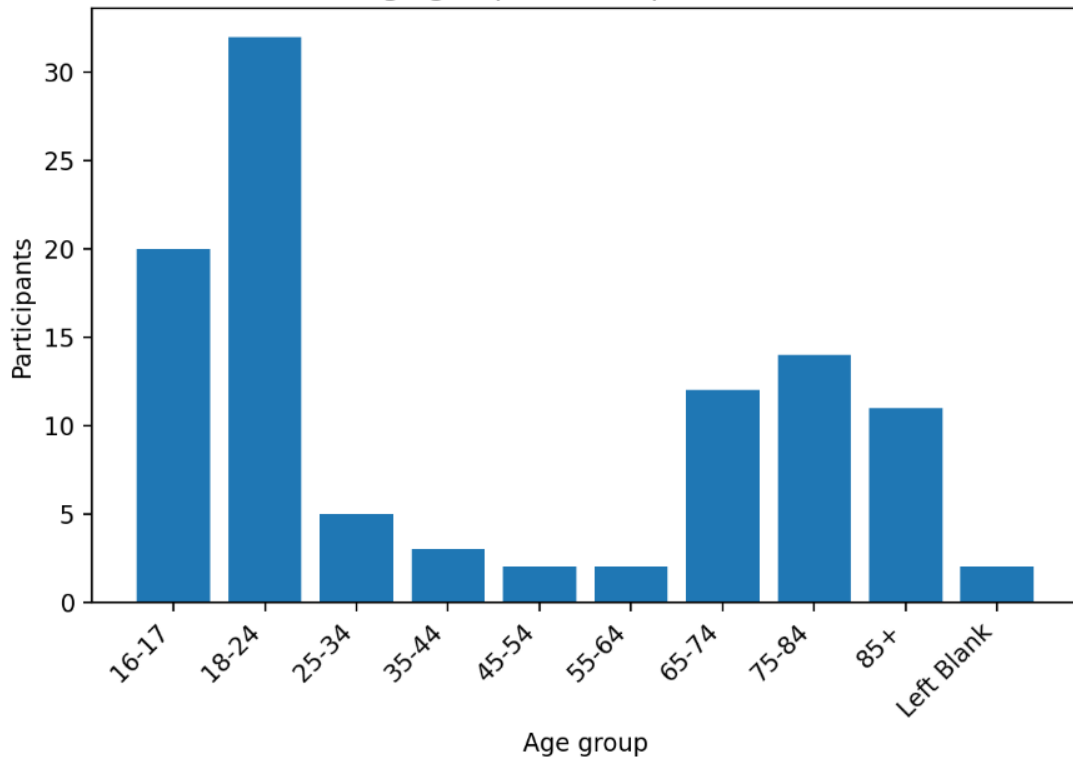


2.2 Age Distribution

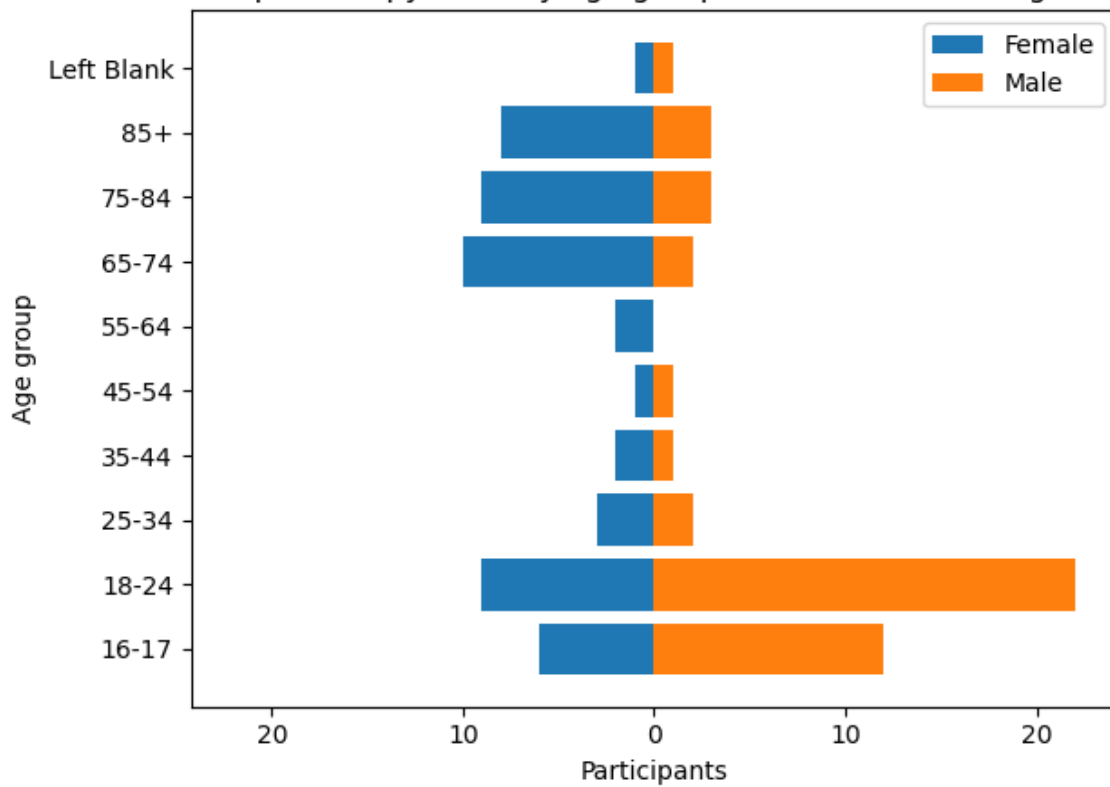
Age Group	n	%
16-17	20	19.4%
18-24	32	31.1%
25-34	5	4.9%
35-44	3	2.9%
45-54	2	1.9%
55-64	2	1.9%
65-74	12	11.7%
75-84	14	13.6%
85+	11	10.7%
Left Blank	2	1.9%

The age profile shows a distinctive bimodal distribution: young people aged 16 to 24 (50.5%) and older adults aged 65+ (35.9%). Middle age groups (25 to 64) are underrepresented (11.7%).

Age group — Participant count



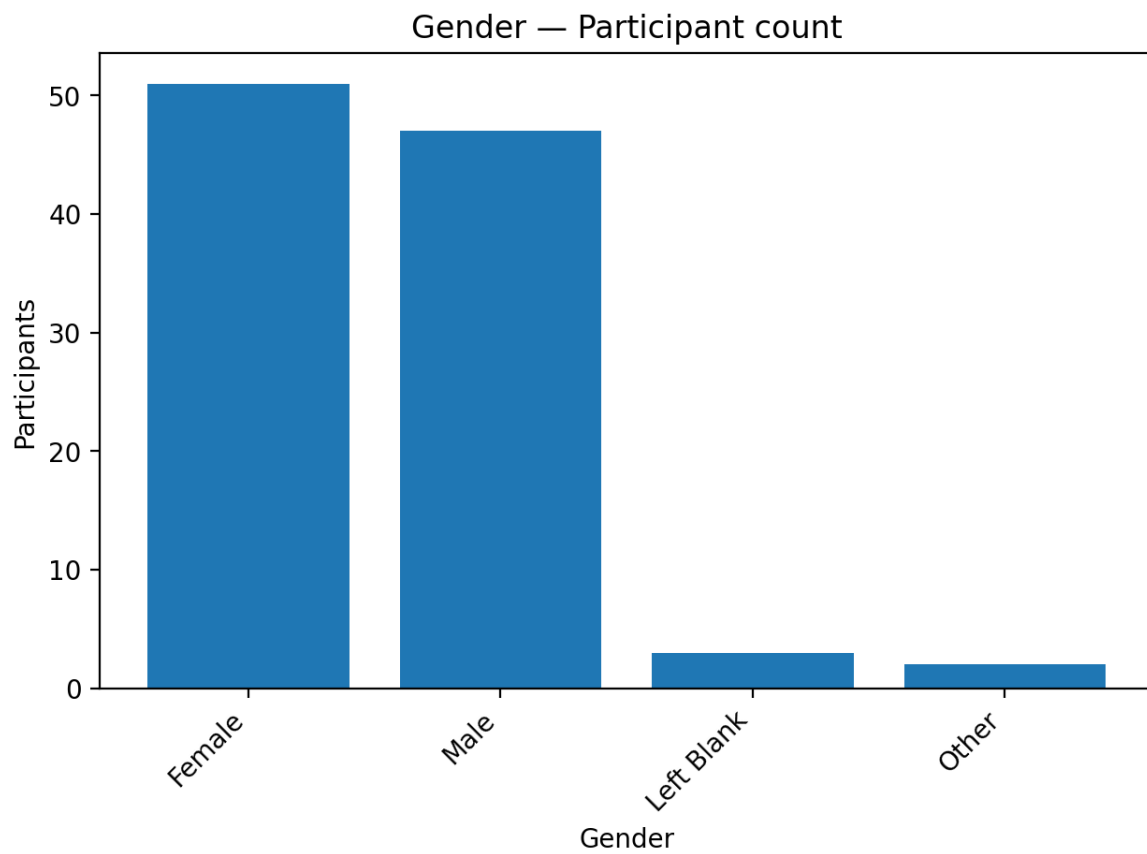
Population pyramid by age group (Female left, Male right)



2.3 Gender

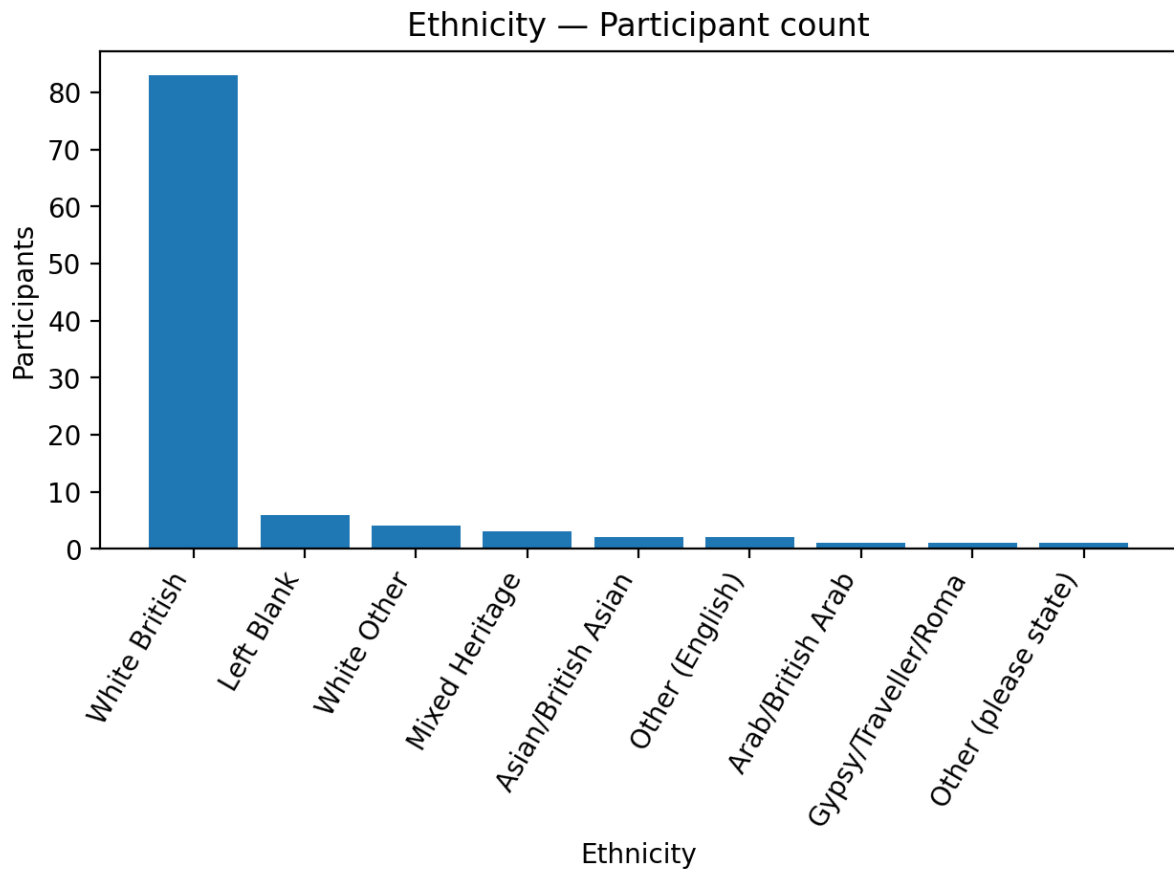
Gender	n	%
Female	51	49.5%
Male	47	45.6%
Left Blank	3	2.9%
Other	2	1.9%

Gender distribution is relatively balanced: female 49.5%, male 45.6%.



2.4 Ethnicity

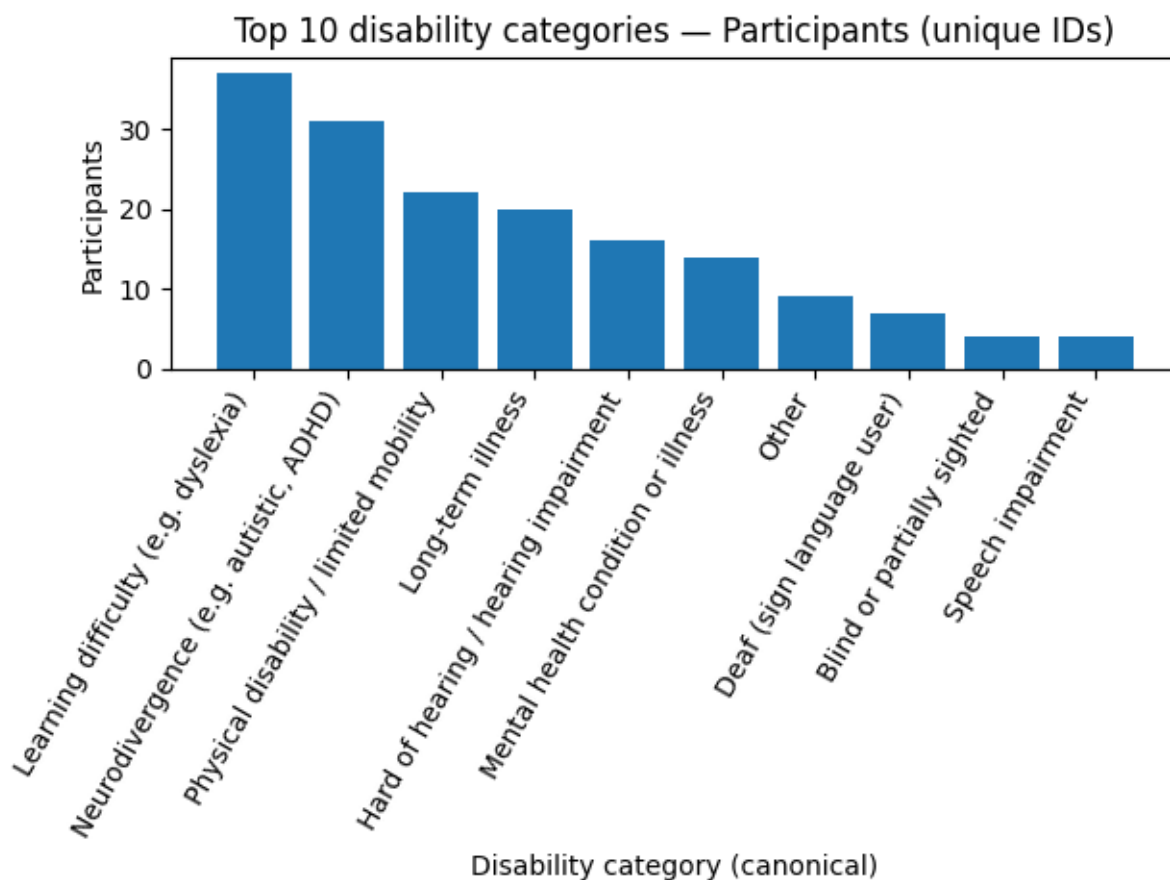
Approximately 81% identified as White British, reflecting Devon's demographic composition. The programme reached participants from minority ethnic backgrounds including White Other, Mixed Heritage, Asian/British Asian, Arab, and Gypsy/Traveller/Roma communities.



2.5 Disability Categories

Disability Category	n	%
Learning difficulty	37	35.9%
Neurodivergence (autistic, ADHD)	31	30.1%
Physical disability / mobility	22	21.4%
Long-term illness	20	19.4%
Hearing impairment	16	15.5%
Mental health condition	14	13.6%
Other	9	8.7%
Deaf (sign language)	7	6.8%
Blind / partially sighted	4	3.9%
Speech impairment	4	3.9%

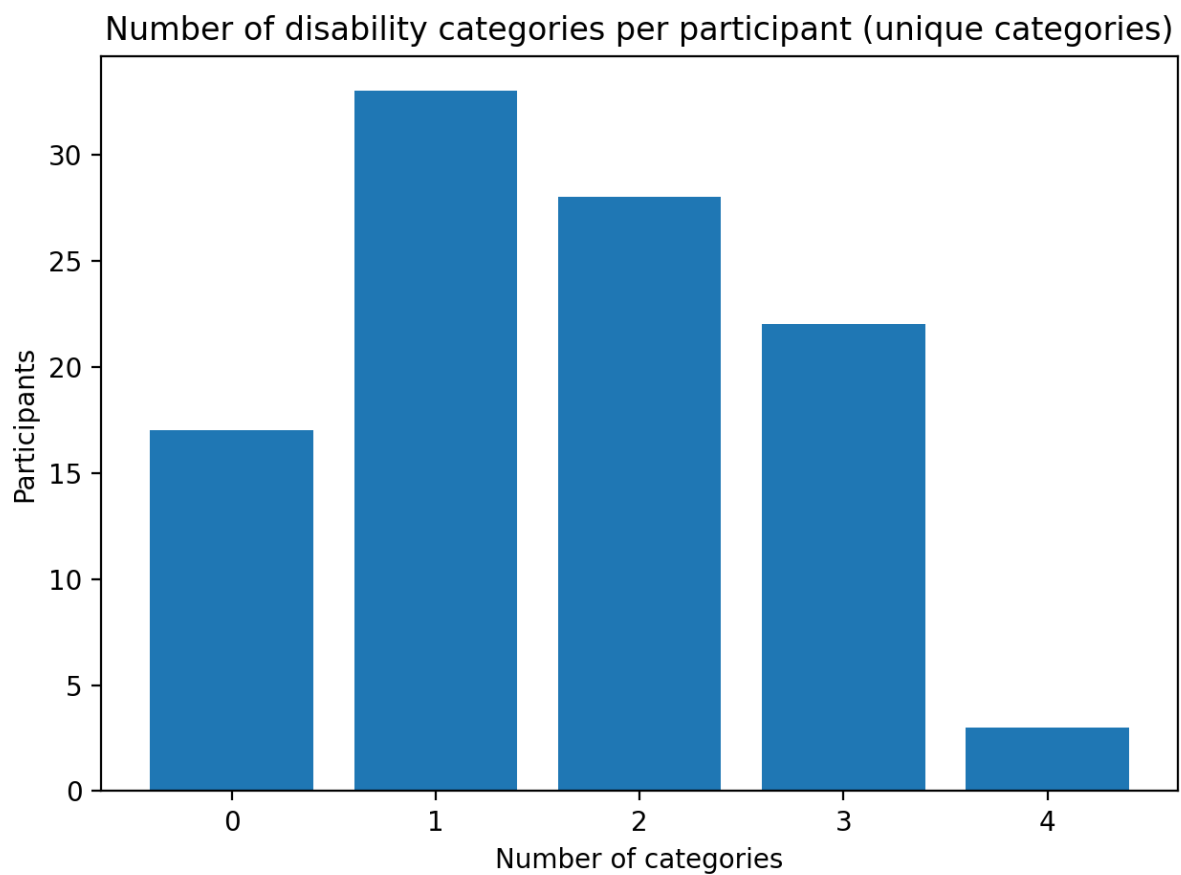
Learning difficulties (35.9%) and neurodivergence (30.1%) are the most reported disability categories, which aligns with the programme’s strong presence in further-education settings.



2.6 Disability Complexity

Number of Categories	n	%
0 categories	17	16.5%
1 category	33	32.0%
2 categories	28	27.2%
3 categories	22	21.4%
4 categories	3	2.9%

Over half (51.5%) reported two or more disability categories, indicating significant complexity in support needs.



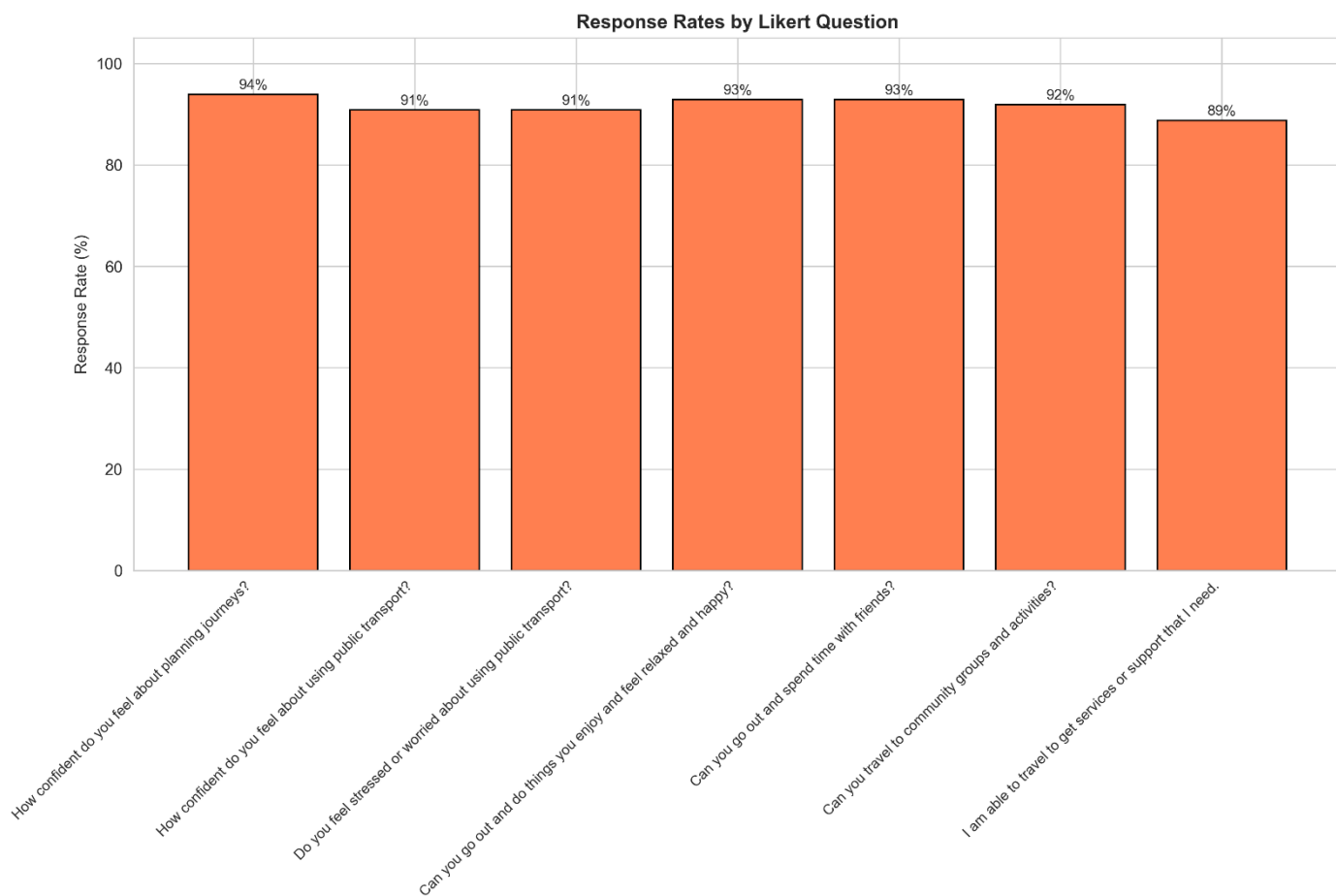
2.7 Delivery Partners

Organisation	n	%
Exeter College	30	30.6%
Honiton Carers	22	22.4%
Bideford Young Devon	10	10.2%
Plymouth Wellbeing Hub	9	9.2%
Young Devon	8	8.2%
Millbrook Village	6	6.1%
Deaf Academy	6	6.1%
Test and Learn Pilot	5	5.1%
Bicton College	2	2.0%

Exeter College (31%) and Honiton Carers (22%) account for over half of participants. Organisation was recorded for 90 participants; 5 participants had missing or unassigned organisation data. Note: Deaf Academy (n=6) and Bicton College (n=2) are included in demographic reporting but excluded from pre/post outcome analysis, as training was not delivered to these groups due to scheduling issues. Outcome analysis is therefore based on 90 participants.

3.Pre-training Baseline

Baseline data provide a snapshot of participant confidence, stress/worry, participation and perceived barriers prior to training. The pattern of responses aligns with what might be expected in cohorts facing intersecting travel confidence and access challenges: confidence measures tend to cluster lower than participation, while barrier themes point to uncertainty and perceived risk rather than a single operational issue.

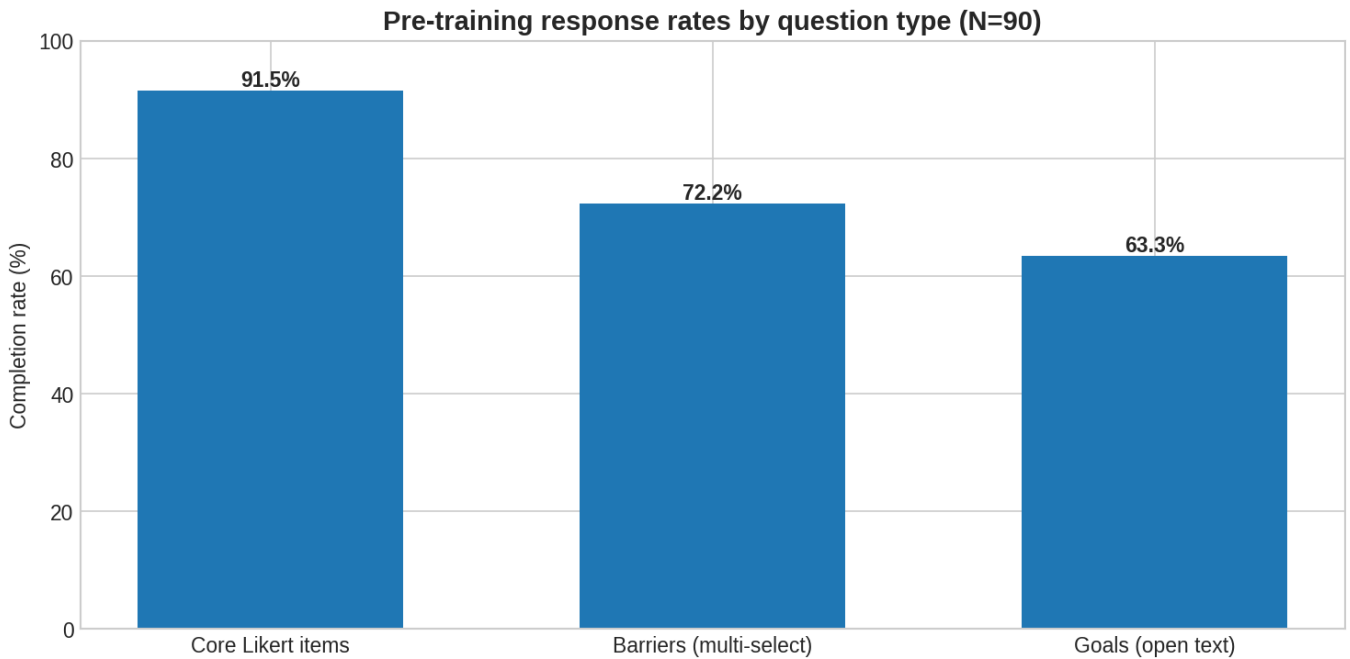


Baseline completion was high across the core items (typically around nine in ten responses per question).

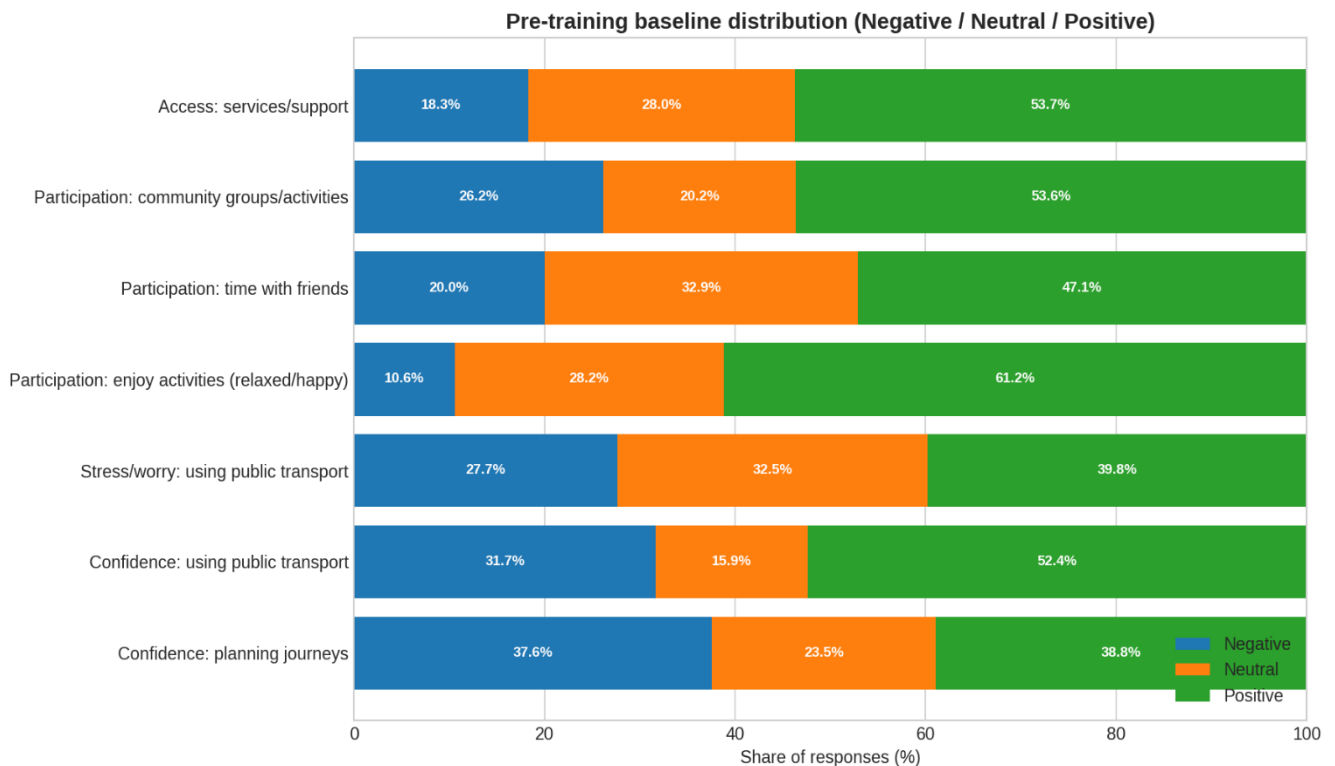
3.1 Response Rates

High completion on core Likert outcome items (89–92%) provides a robust baseline for descriptive interpretation. Lower completion on multi-select barriers and open text goals is not unusual in self-completed surveys, particularly in contexts where items are optional or where respondents may be less confident with free-text responses, as seen in similar transport access evaluations.

- Likert scale questions: 89% to 92% completion
- Barriers question: 72% completion
- Goals open text: 63% completion



The baseline profile shows the clearest constraint around journey planning confidence (38.8% positive; 37.6% negative), suggesting planning as a key pressure point for intervention. Confidence in using public transport is stronger (52.4% positive) but still mixed, with around a third reporting negative response. Participation items are generally more positive (e.g., 61.5% positive for enjoying activities), implying that confidence and participation do not move in lockstep and may respond differently to support. Overall, the pattern is consistent with barriers clustering around uncertainty and perceived risk rather than a single isolated issue.



The baseline distribution shows that confidence in planning and using public transport is more constrained than other aspects of participation. Around a third of respondents reported negative confidence in planning journeys, while participation items such as enjoying activities or accessing services

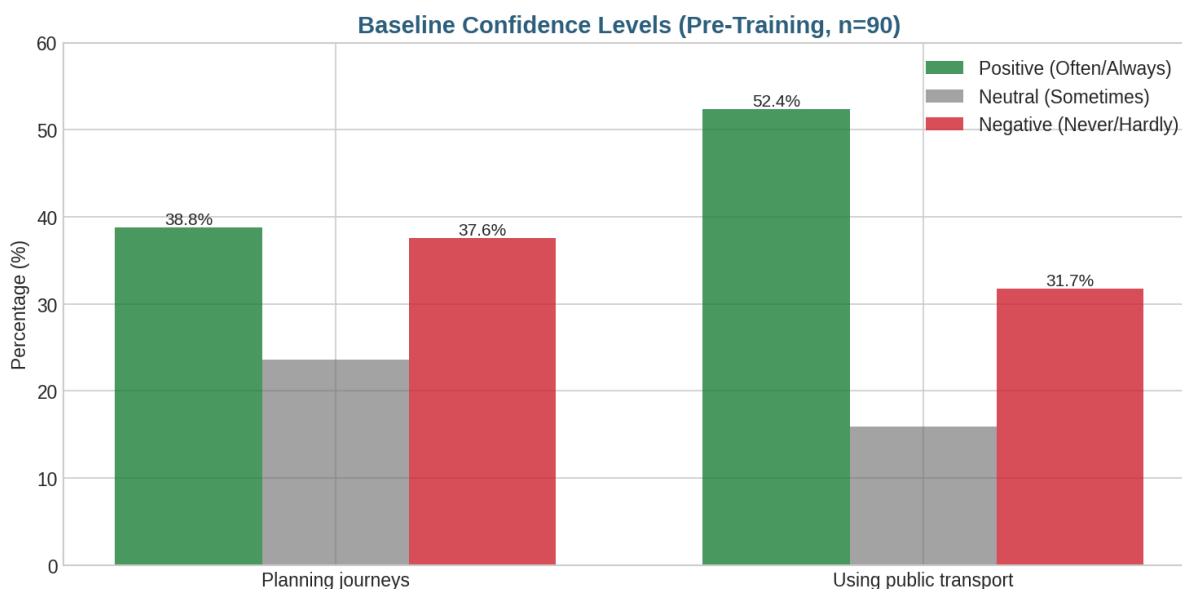
are comparatively stronger. This pattern suggests that participants may be willing and able to engage socially but lack the travel confidence needed to translate participation intent into action.

3.2 Baseline Confidence

Confidence to plan journeys (positive 38.8%) is lower than confidence to use public transport (positive 52.4%). This suggests journey planning itself is a particularly salient pressure point. This may reflect the complexity of navigating timetables, ticket options, or route choices, issues that are frequently highlighted as barriers to independent travel in public transport user research.

Confidence Measure	n	Positive	Negative
Planning journeys	85	38.8%	35.3%
Using public transport	82	52.4%	30.5%

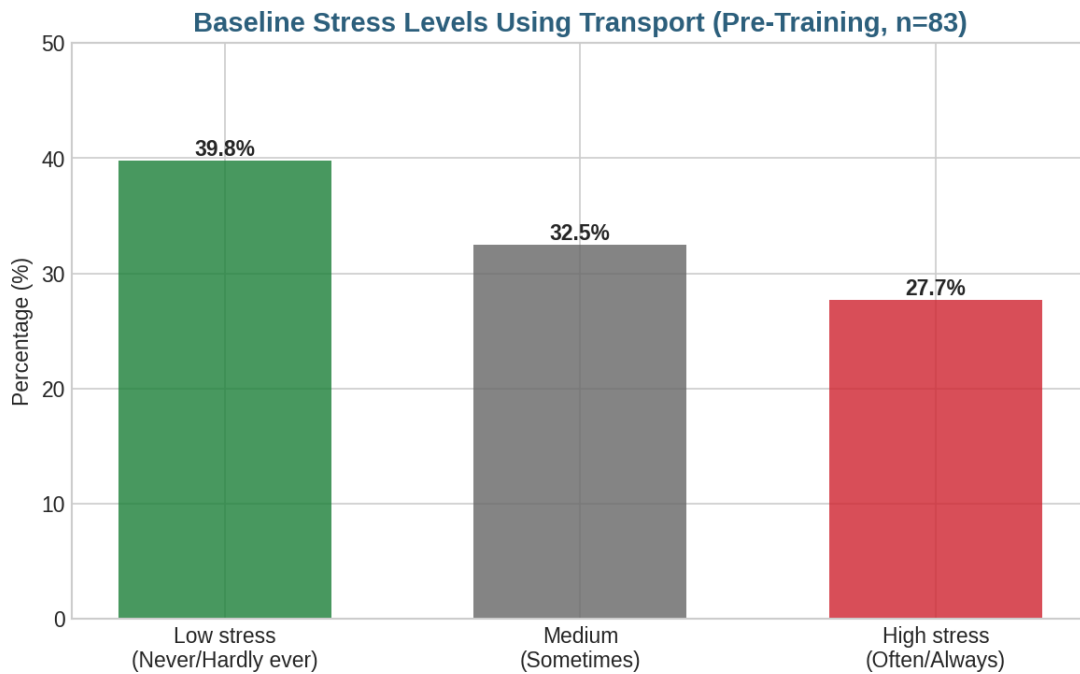
At baseline, only 39% felt confident planning journeys, with over one third (36%) reporting low confidence.



3.3 Baseline Stress

Stress Measure	n	Low stress
Feel stressed using transport (% never/hardly ever)	83	39.8%

Only 40% reported low stress; 60% experienced at least some stress or anxiety

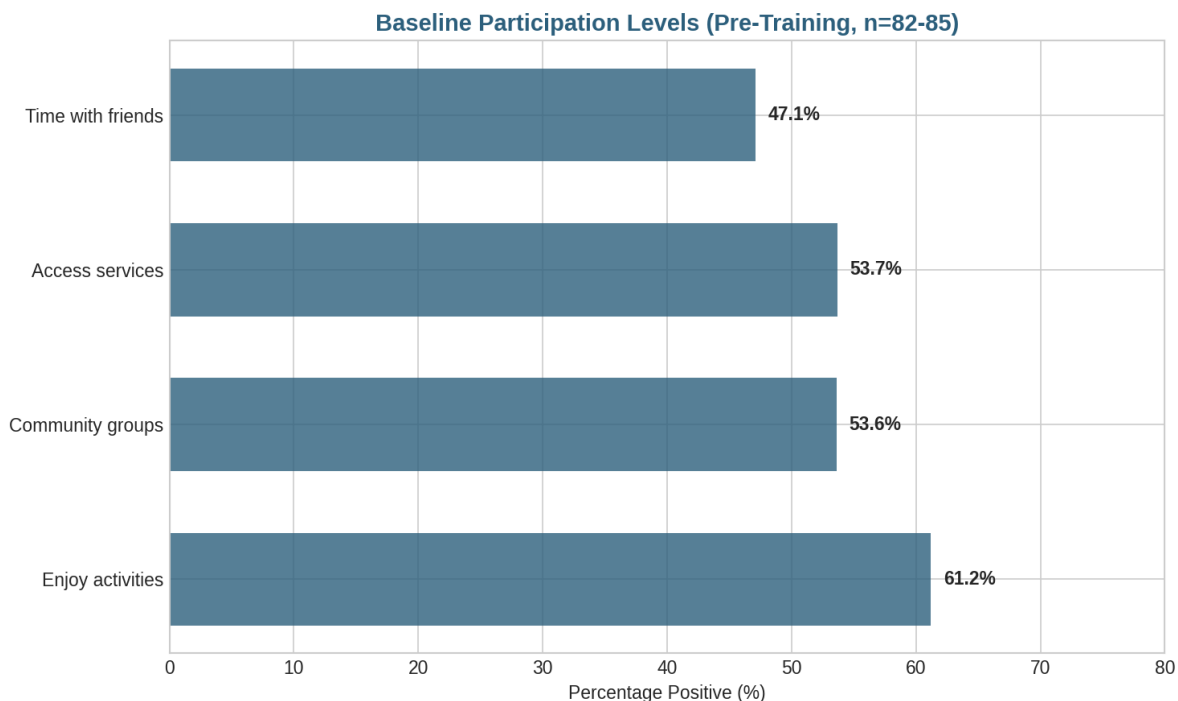


Only around 40% reported low stress or worry using public transport, indicating that for most participants, travel is a source of at least some anxiety. This echoes findings from disability and transport studies showing that perceived stress and anxiety are common among passengers with access needs, particularly if they have previously encountered barriers or unpredictability in services.

3.4 Baseline Participation

Participation Measure	n	Positive
Can go out and enjoy activities	85	61.2%
Can travel to community groups	84	53.6%
Can access services or support	82	53.7%
Can spend time with friends	85	47.1%

Roughly half faced restrictions in social activities and community engagement.

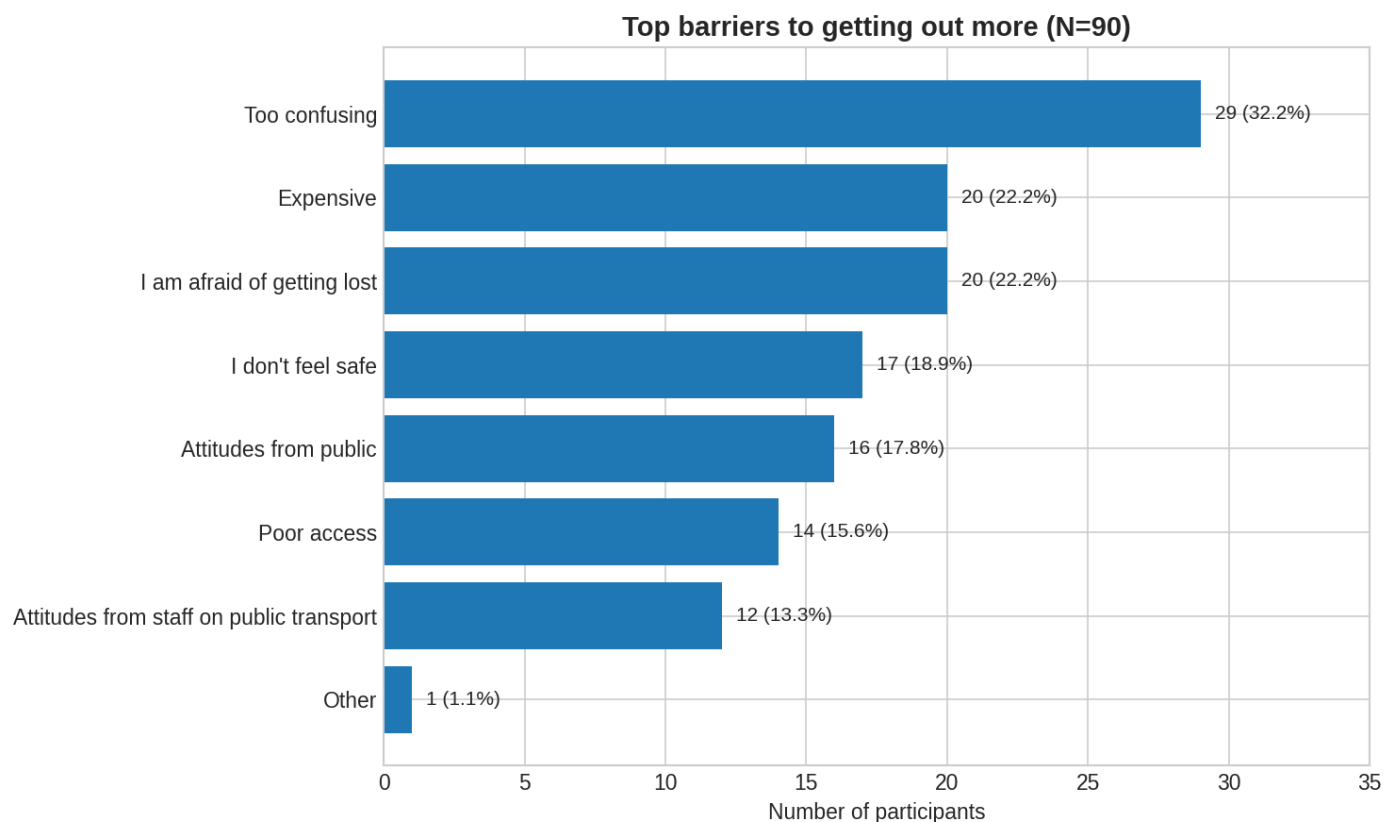


Participation items, such as enjoying activities or accessing community groups, score higher in positivity than confidence items. This suggests that social and community engagement motivation is present; the constraint seems less about *desire* and more about *capacity*, *confidence* and *perceived barriers* to putting that desire into practical travel.

3.5 Barriers to Travel

Barrier	n	%
Too confusing	32	32.7%
Afraid of getting lost	22	22.4%
Expensive	22	22.4%
Don't feel safe	19	19.4%
Attitudes from public	18	18.4%
Poor access	15	15.3%
Attitudes from staff	13	13.3%

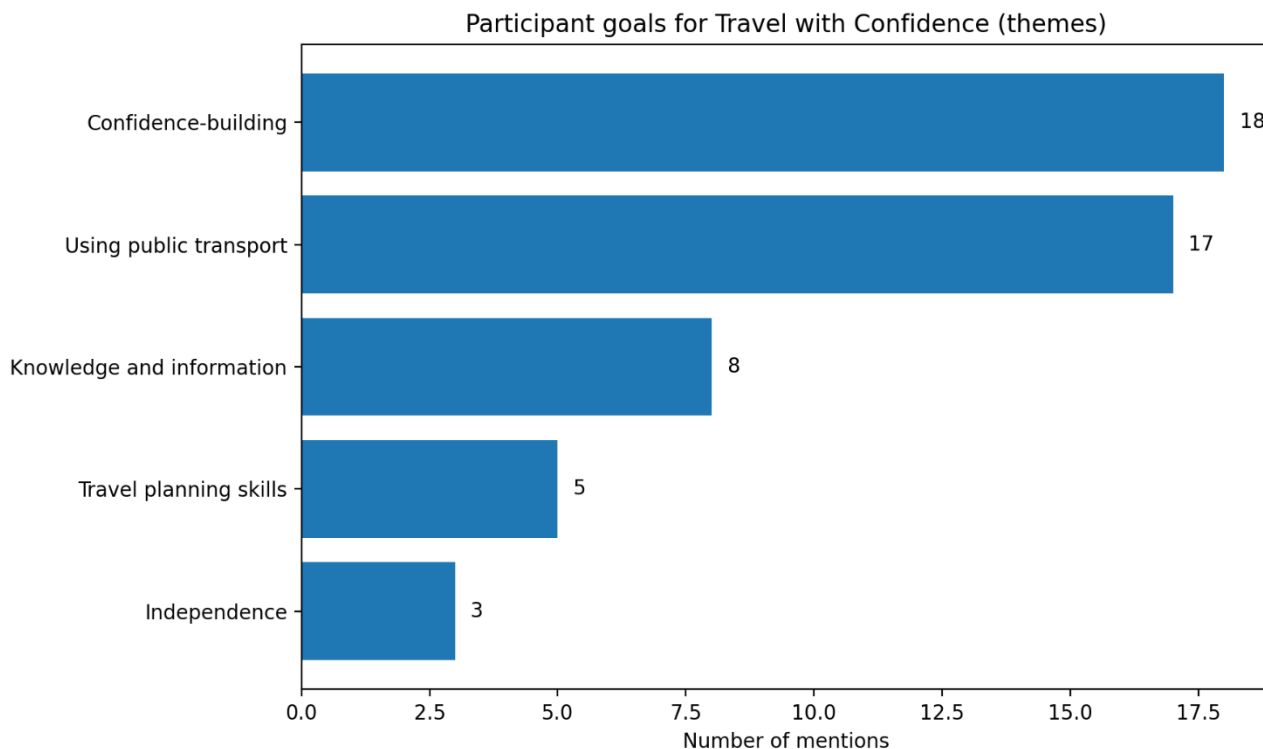
The most cited barrier was finding transport too confusing (33%), followed by fear of getting lost (22%) and cost (22%).



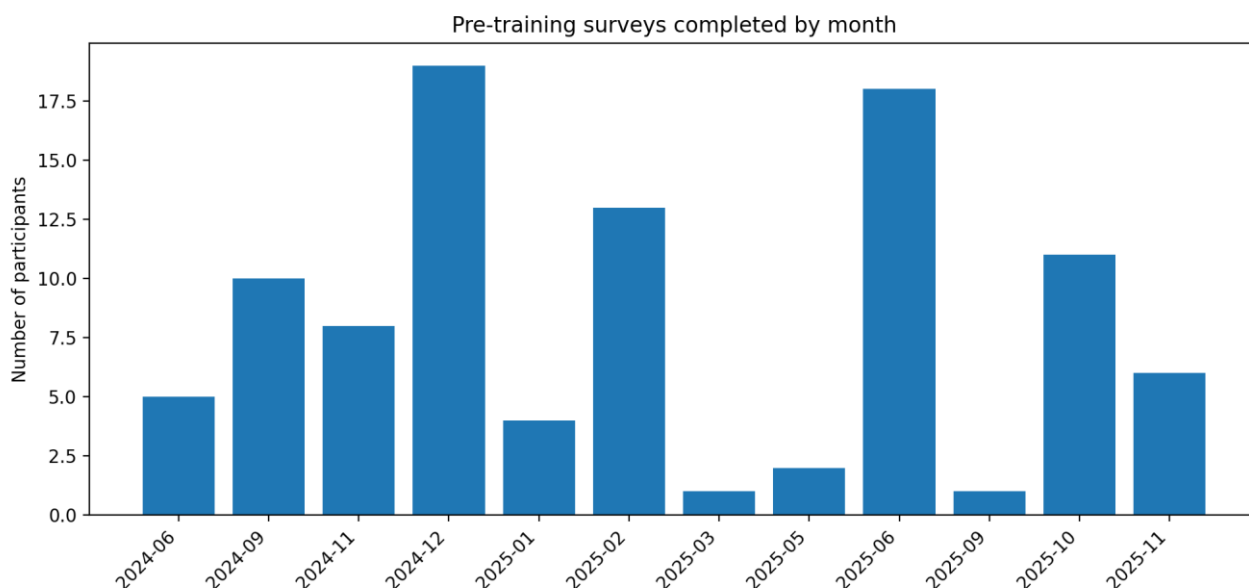
The most cited barriers cluster around uncertainty (“too confusing”, “fear of getting lost”) and perceived risk (“don’t feel safe”), alongside cost and access issues. This reinforces the idea that travel confidence is influenced not just by physical accessibility, but by *perceptions of complexity and risk* in travel planning and execution. National evaluations of inclusive transport initiatives highlight that barriers for disabled or confidence-limited passengers often span multiple stages of a journey (from pre-trip planning to staff interactions) and that addressing only one aspect (e.g., a single training session) may not fully overcome such compound constraints.

3.6 Participant Goals

- Confidence building: 18 mentions
- Public transport use: 17 mentions
- Knowledge and information: 8 mentions
- Travel planning skills: 5 mentions
- Independence: 3 mentions



The distribution of goals (with confidence building and public transport use dominating) aligns with the observed baseline constraints. Participants are focused on practical improvements to confidence and everyday travel skills, matching the pressure points identified in the data.



Survey completions occurred in distinct monthly cohorts rather than continuously, reflecting recruitment and delivery cycles. This has implications for follow-up capture strategies and should be borne in mind when interpreting baseline patterns across waves.

4. Post-training Outcomes and Comparative Analysis

This section presents post-training findings and compares them with baseline measures.

A note on Response Rates

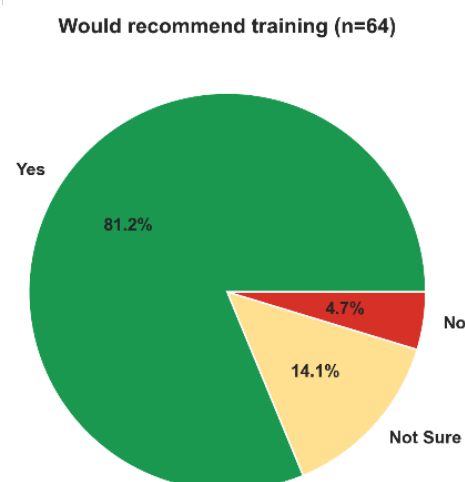
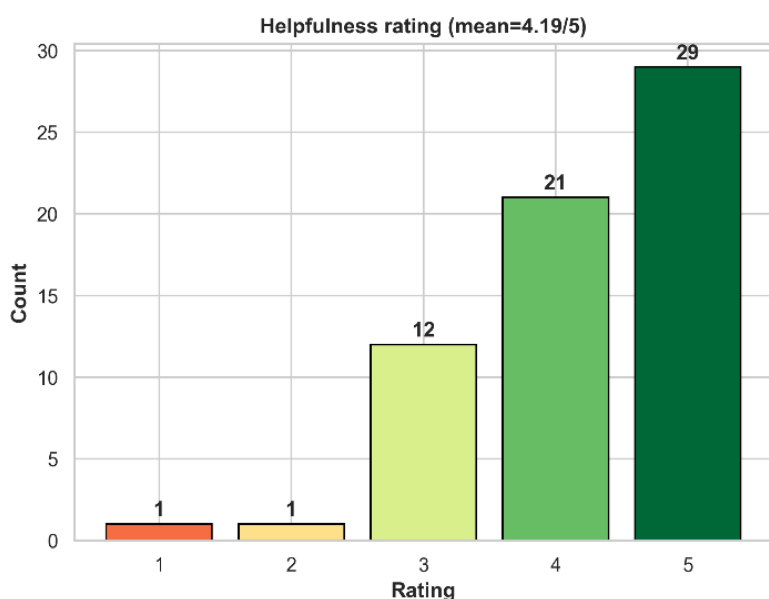
Post-training response rates were lower than pre-training across the core outcome measures. This means the post-training findings should be interpreted as descriptive results for respondents, rather than as definitive population-level estimates.

Measure	Pre-training	Post-training
Total participants	90	90
Likert response rate	89-92%	65-67%
Open text response rate	63-72%	8-52%

4.1 Programme Satisfaction

Among respondents who provided a helpfulness rating, the mean score was 4.19 out of 5 and 78% rated the training as 4 or 5. Recommendation intent was also high, with 81.2% indicating they would recommend the training to others. Perceived impact responses were positive overall, with 78% agreeing that the training provided useful information and 66% agreeing that they gained new skills to help them travel.

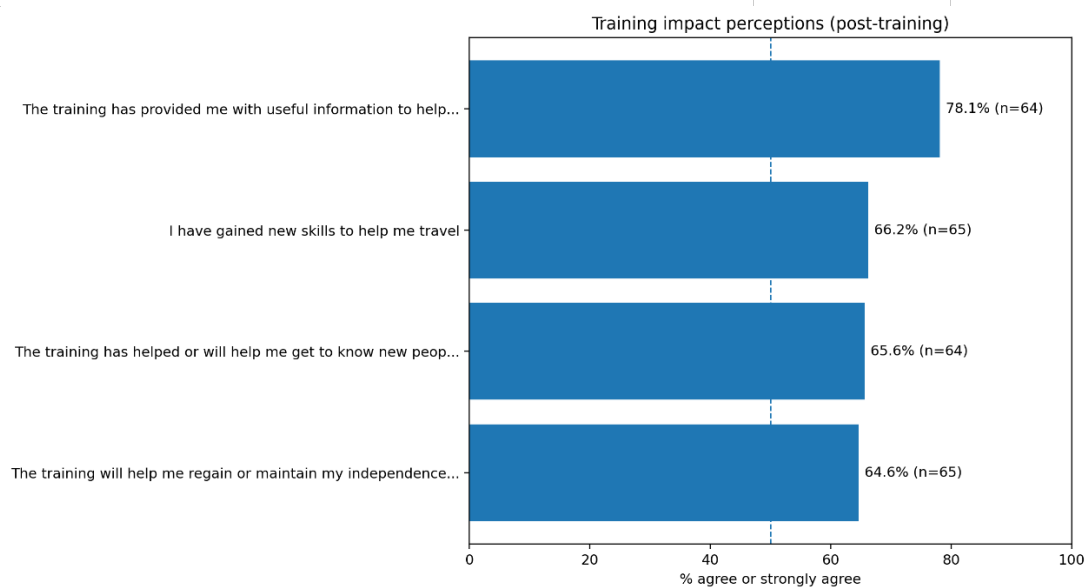
Satisfaction Measure	Result
Mean helpfulness rating (1-5)	4.19
Rated 4 or 5 out of 5	78.1%
Would recommend to others	81.2%



Perceived Training Impact

Perceived impact was also strong. Around three-quarters agreed that the training provided useful information (78.1 per cent, n=64). Approximately two-thirds agreed that they gained new skills to help them travel, met new people, and that the training would help them regain or maintain independence.

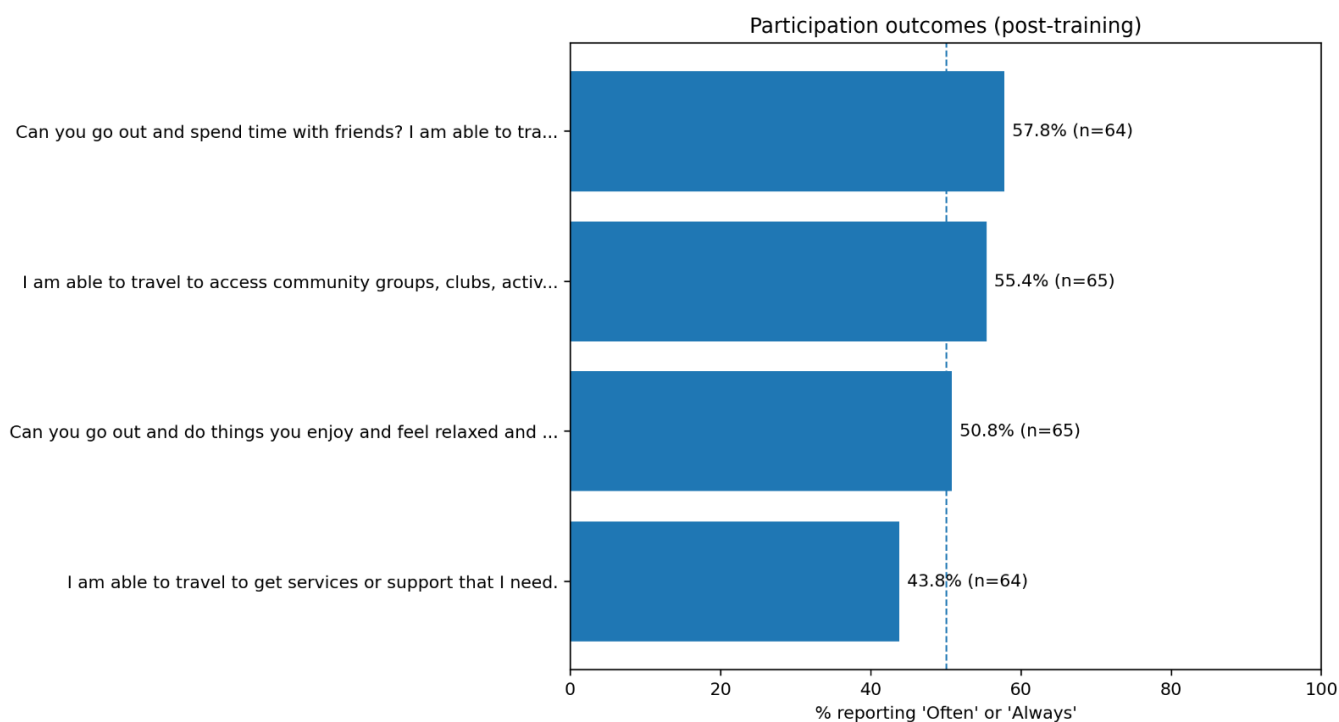
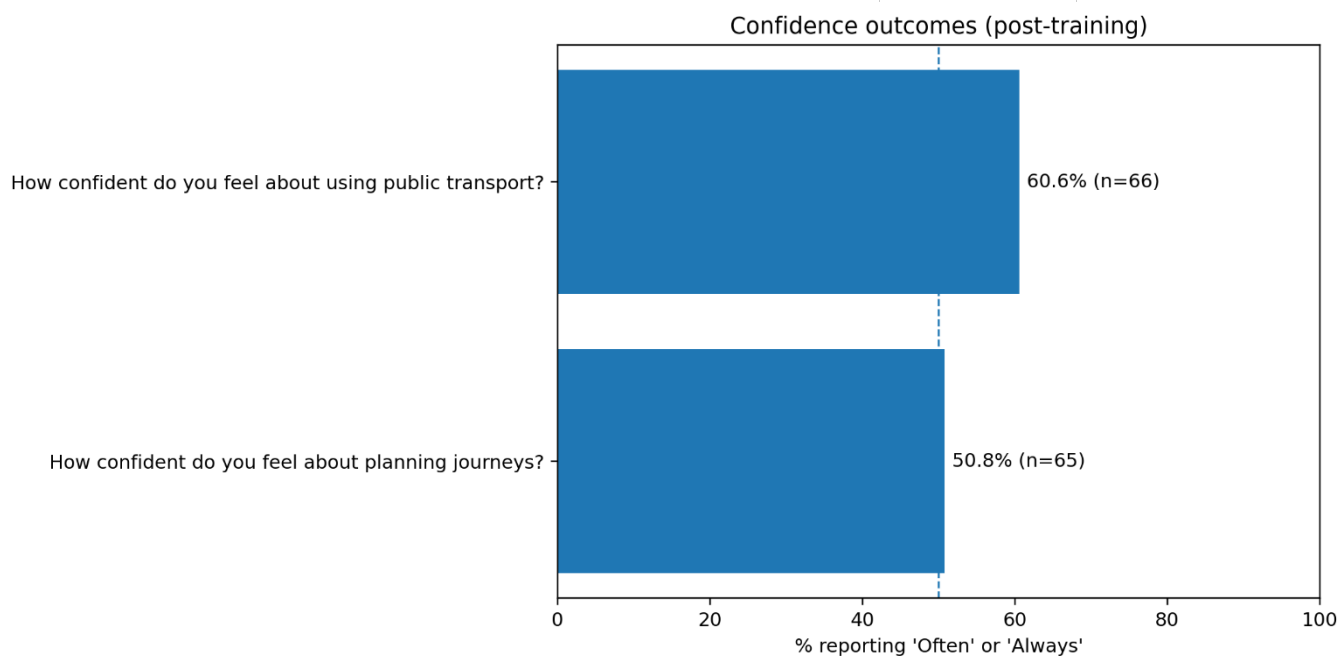
Impact Statement	n	Agree
Training provided useful information	64	78.1%
Gained new skills to help me travel	65	66.2%
Helped meet new people	64	65.6%
Will help regain/maintain independence	65	64.6%



Self-Reported Changes

Among those who answered the follow-up change questions, 68.0 per cent reported a change in the amount they travel (n=50). In addition, 63.3 per cent reported a positive change in confidence (n=60). These findings are self-reported and reflect only those who completed the relevant items.

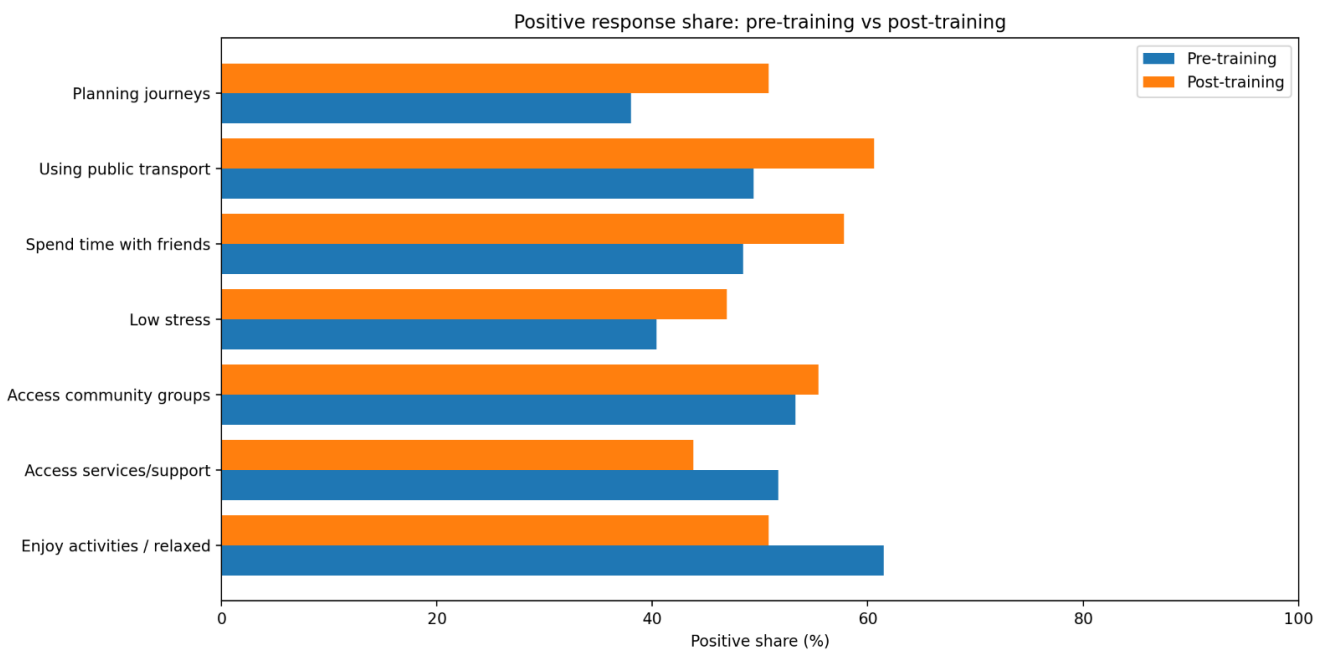
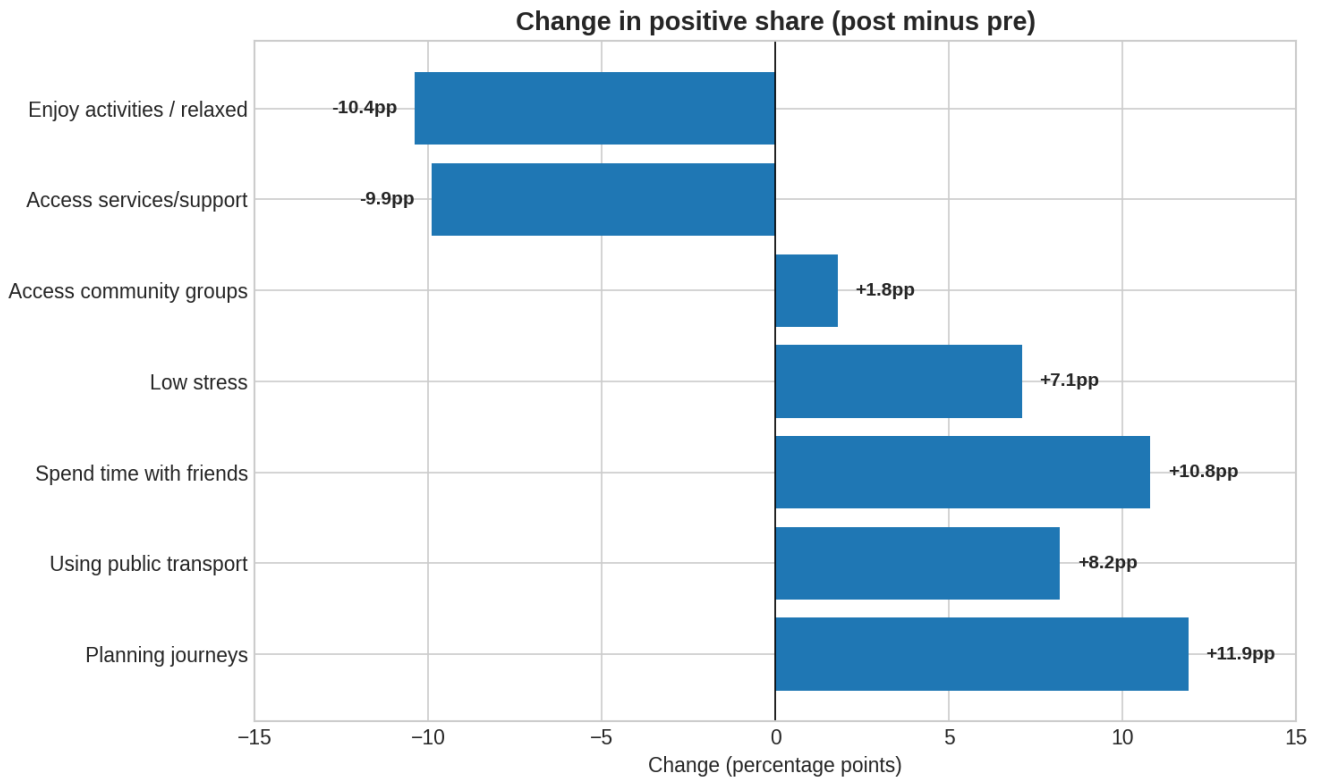
Change Measure	n	Yes
Change in amount of travel	50	68.0%
Positive change in confidence	60	63.3%



4.3 Comparative Analysis: Pre vs Post

A descriptive comparison of positive response shares suggests improvement in confidence and reduced stress amongst respondents.

In contrast, participation measures show mixed results: Spend time with friends and Access community groups show increases, but there are decreases in Go out and enjoy activities and Access services/support. These may reflect response bias rather than genuine decline. These shifts should not be interpreted as causal effects because the analysis is not paired at participant level and post-training response rates are lower, so response bias is plausible.

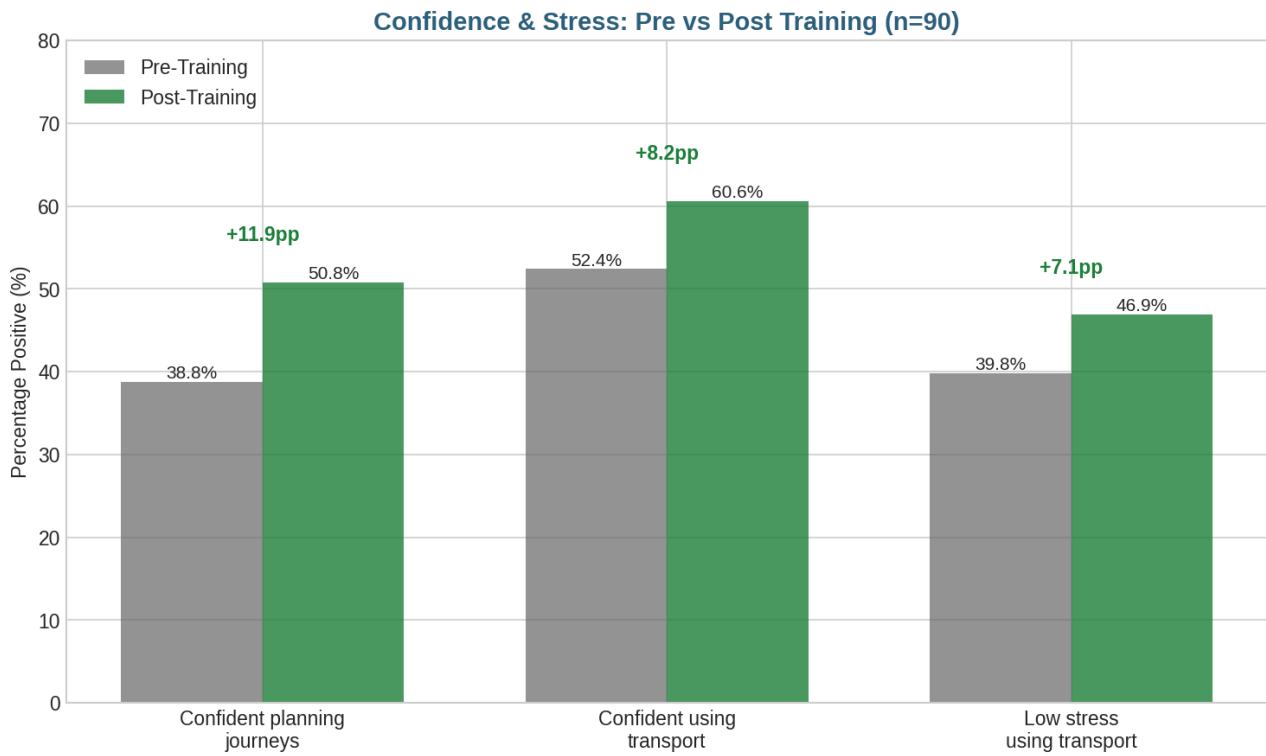


Confidence Outcomes

Confidence in planning journeys increased from and confidence in using public transport both increased.

Confidence Measure	Pre	Post	Change
Planning journeys	38.8% (n=85)	50.8% (n=65)	+11.9pp
Using public transport	52.4% (n=82)	60.6% (n=66)	+8.2pp

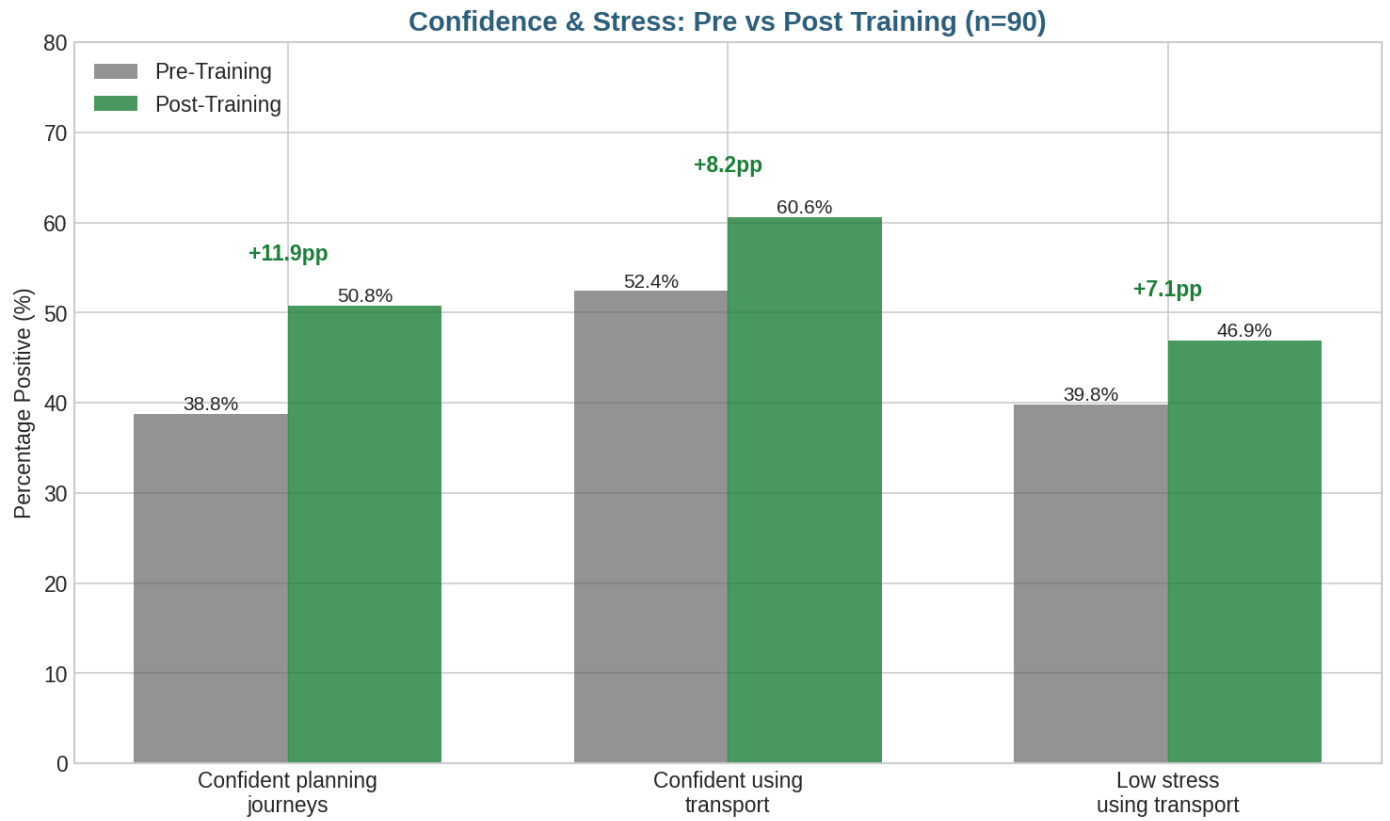
Confidence increased by +11.9pp for planning and +8.2pp for using transport.



Stress and Anxiety

Stress levels when using public transport decreased modestly

Stress Measure	Pre	Post	Change
Low stress (never/hardly ever)	39.8% (n=83)	46.9% (n=64)	+7.1pp

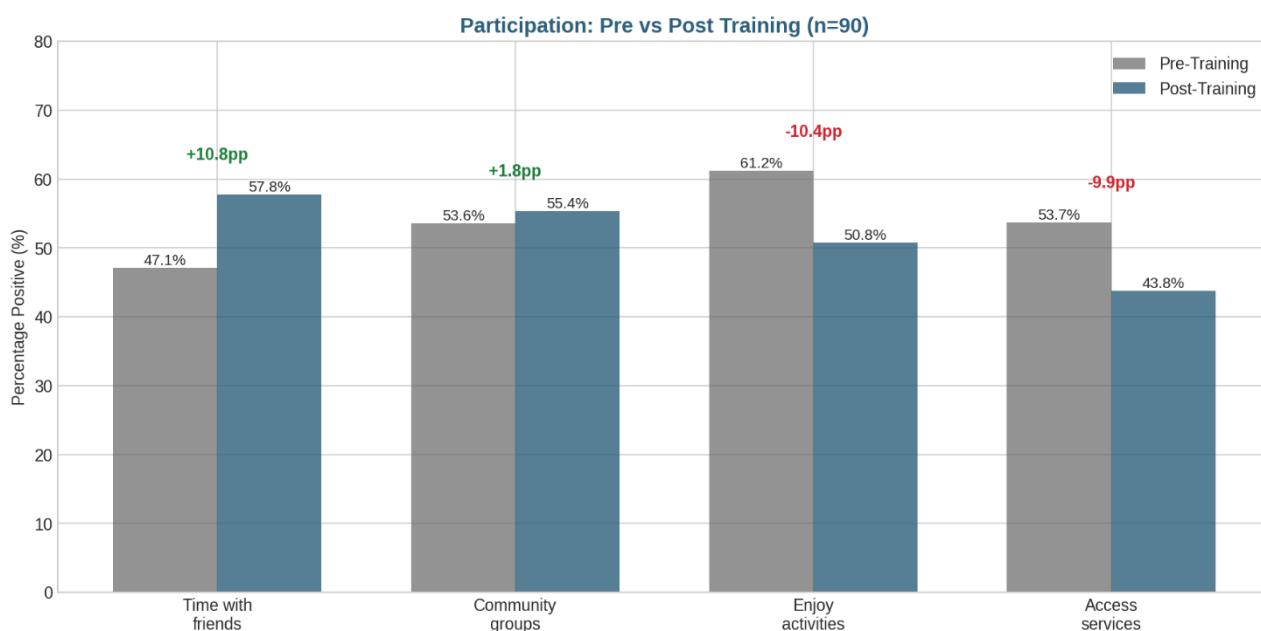


Social Participation

Participation outcomes were mixed. Positive responses increased for spending time with friends and accessing community groups but decreased for enjoying activities and accessing services or support. Given lower post-training response rates and smaller N numbers, these differences may reflect response composition or non-response patterns rather than a true decline.

Participation Measure	Pre	Post	Change
Spend time with friends	47.1% (n=85)	57.8% (n=64)	+10.7pp
Access community groups	53.6% (n=84)	55.4% (n=65)	+1.8pp
Go out and enjoy activities	61.2% (n=85)	50.8% (n=65)	-10.4pp
Access services/support	53.7% (n=82)	43.8% (n=64)	-9.9pp

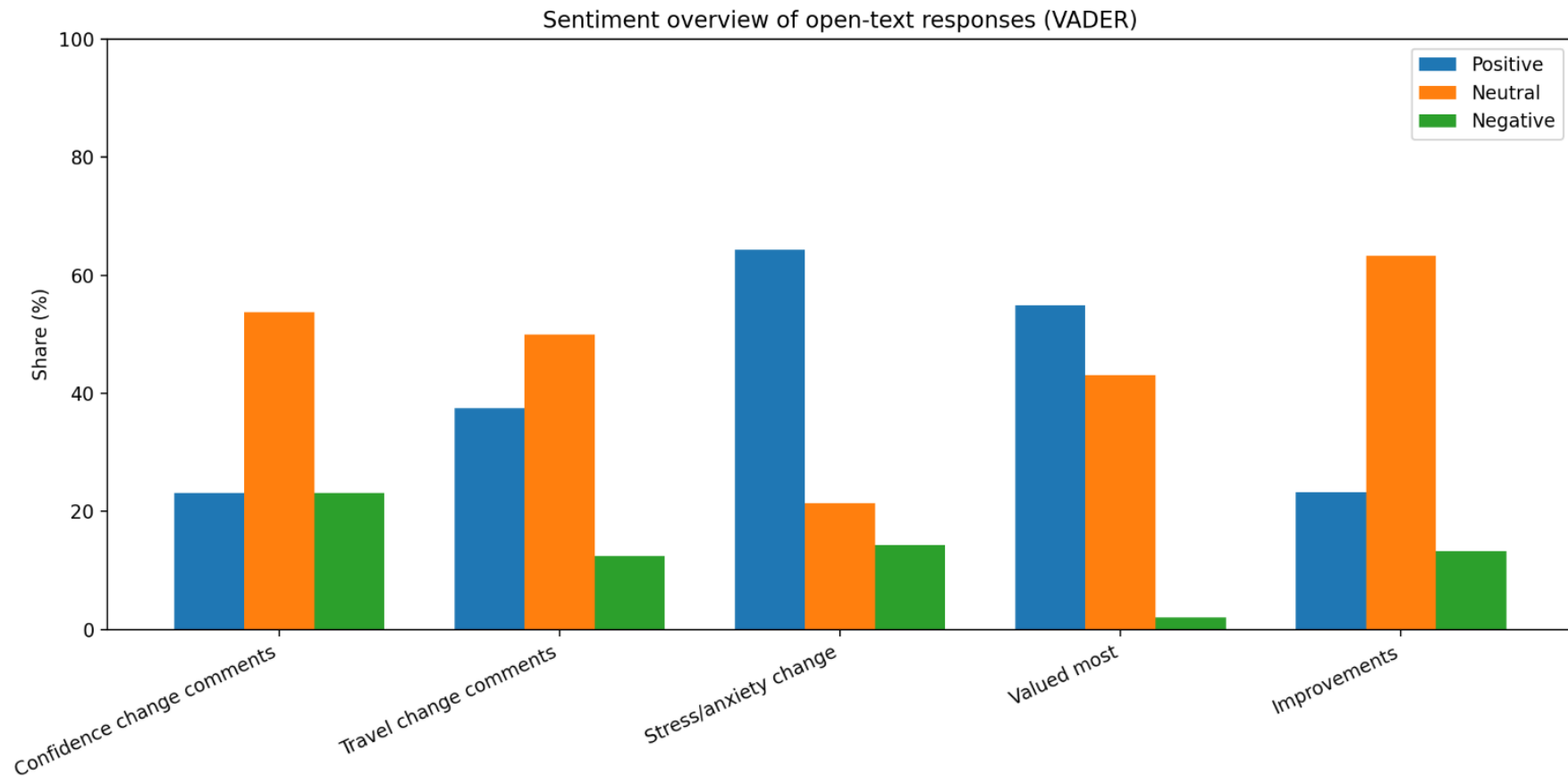
Mixed results: friends (+10.7pp), community (+1.8pp), but decreases in enjoying activities (-10.4pp) and services (-9.9pp). These may reflect response bias rather than genuine decline.



4.4 Qualitative Feedback

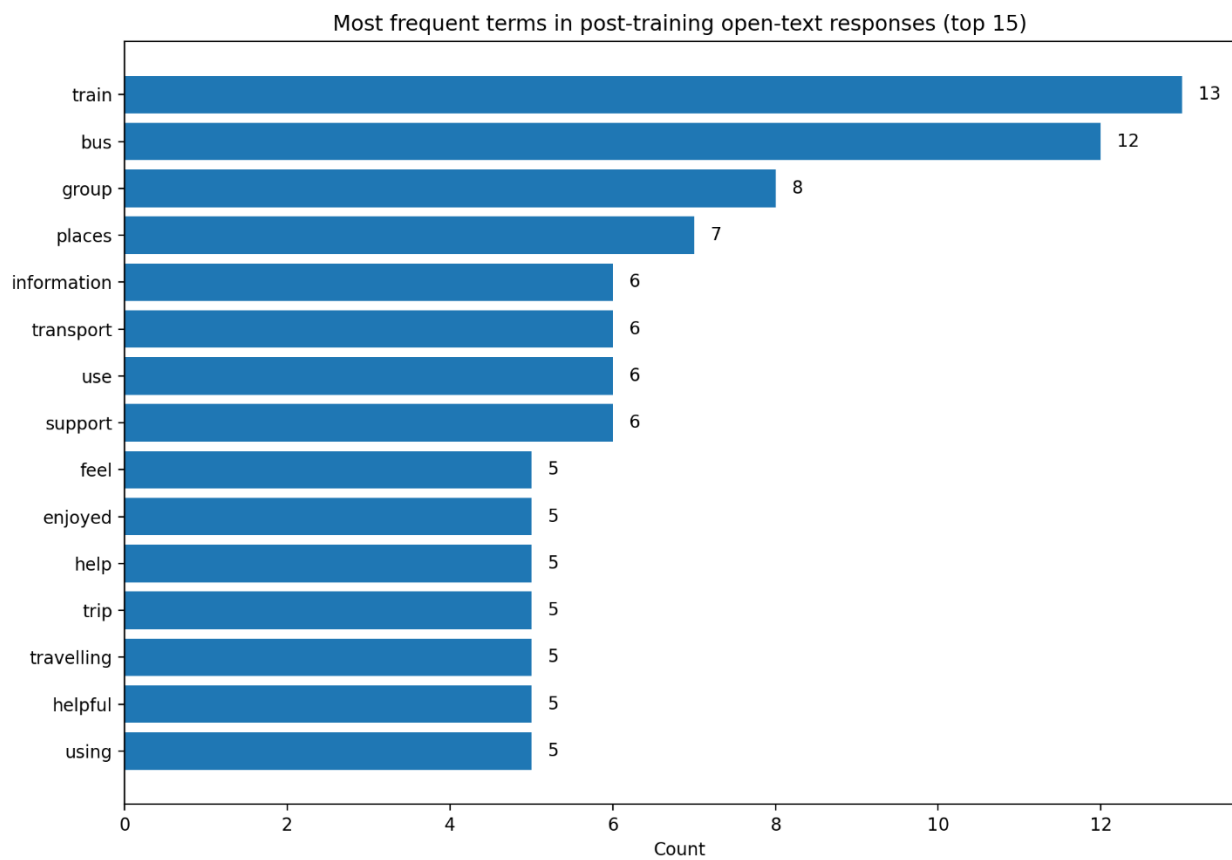
Open-text responses were generally positive in tone, with sentiment analysis indicating a predominance of positive and neutral language across the main qualitative questions. The most frequent terms emphasised journey planning and confidence-building themes, including references to support, travel, and practical learning.

Sentiment analysis was carried out using VADER (Valence Aware Dictionary and sEntiment Reasoner), a lexicon and rule-based method designed for short, informal text. VADER uses a curated dictionary of words with assigned polarity scores (positive, negative, or neutral), then applies rules that adjust those scores based on context, such as negation (for example, 'not good'), intensifiers (for example, 'very'), punctuation and capitalisation emphasis, and common social-text patterns. The output is a compound sentiment score which can be grouped into positive, neutral, and negative bands for summary reporting. This approach provides an indicative view of tone, but it does not replace human interpretation of meaning.



What Participants Valued Most

- "Going on the bus and train"
- "Lots of information in a fun way, hands on approach"
- "Going out as a group"

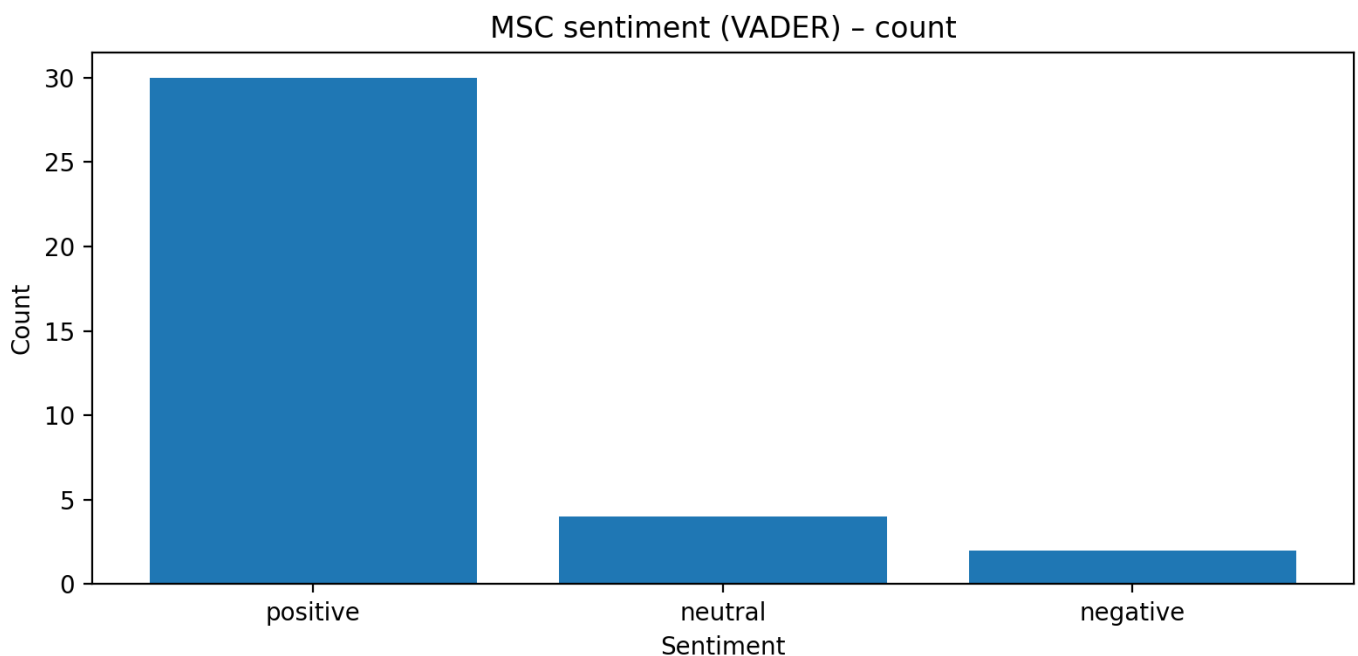


5. Most Significant Change Stories

The Most Significant Change (MSC) methodology captures short narratives about the changes participants and supporting staff considered most meaningful. A total of **36 MSC stories** were collected. These stories complement the quantitative survey results by illustrating what change looks like in practice and what participants valued most. Sentiment coding provides an indicative summary of tone, but it does not replace thematic interpretation of what changed and why.

5.1 Overview

Metric	Value
Total MSC stories	36
Positive sentiment	30 (83.3%)
Neutral sentiment	4 (11.1%)
Negative sentiment	2 (5.6%)

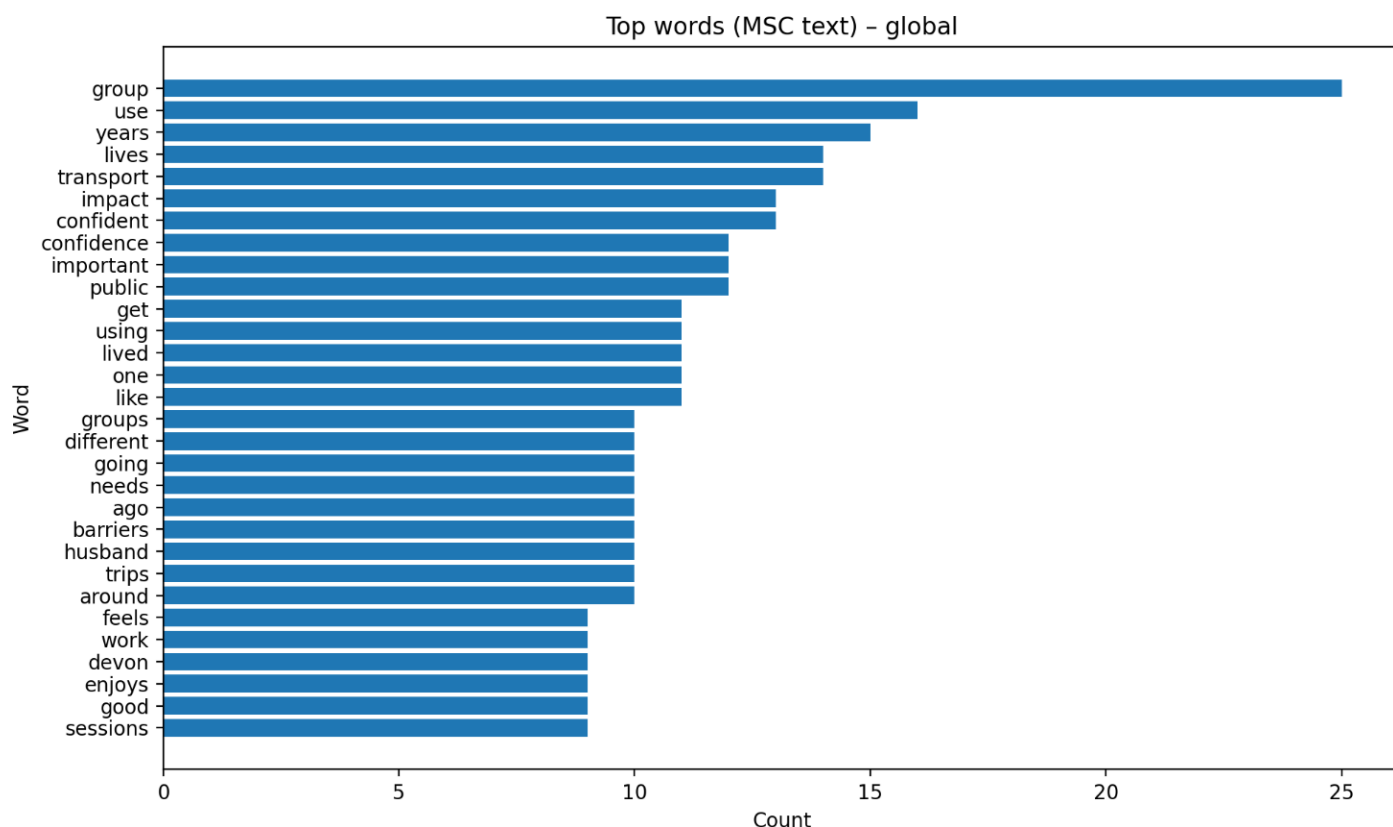


5.2 Thematic Analysis

Theme	Count	%
Social life and work	28	32.6%
Confidence and anxiety	18	20.9%
Practical planning	12	14.0%
Independence and participation	12	14.0%
Support and interaction	12	14.0%
Accessibility and disability	2	2.3%
Other	2	2.3%

Social life and work (33%) dominates, followed by confidence/anxiety (21%).

Thematic coding shows that stories most commonly relate to **social life and work (32.6%)**, followed by **confidence and anxiety (20.9%)**. Themes around **practical planning, independence and participation, and support and interaction** each represent **14.0%**, suggesting that the most significant changes are often experienced as a blend of confidence, skills, and social participation rather than a single transport-only outcome. Mentions of **accessibility and disability** appear less frequently in this set, which may reflect the framing of stories around personal change and confidence rather than formal access barriers.



5.3 Key Insights

- Change extends beyond transport to social connection, independence, and quality of life
- Group based delivery is highly valued for peer support
- Practical experience (accompanied trips) is particularly impactful
- Staff and carers also experience shifts in understanding

6. Driver Training Awareness Evaluation

This section summarises findings from the Training Awareness component, which delivered disability awareness training to staff. Results are based on post-training feedback and focus on participant experience, awareness outcomes and stated behavioural intention.

6.1 Overview

Training Awareness achieved very high satisfaction. 76% rated the training as 9 or 10, suggesting consistently strong perceived value.

Metric	Value
Total participants trained	27
Mean overall rating (1-10)	9.14
Rating range	8 to 10
Top box (rated 9 or 10)	76.2%

6.2 Awareness Outcomes

Awareness outcomes were consistently positive. All respondents agreed that the training raised awareness of disability needs and highlighted practical actions to improve accessibility (**100%** agreement on both). Confidence in welcoming passengers with disabilities was also high (**96.3%** agree). Agreement was lower, though still strong, for awareness of disability rights and legal duties (**81.5%**), suggesting that the training may be particularly effective on practical attitudes and confidence, with scope to strengthen the legal component if needed.

Statement	% Agree
Course highlighted what I can do to make service accessible	100.0%
Course raised awareness of disability needs	100.0%
Feel more confident welcoming passengers with disabilities	96.3%
Course raised awareness of disability rights laws	81.5%

100% agreed training raised awareness and highlighted actionable improvements.

6.3 Behavioural Intention

Just over half of respondents expressed a clear intention to change behaviour (**55.6%**, 15 of 27). A substantial minority selected “not sure” (**40.7%**, 11 of 27), and one respondent selected “no” (**3.7%**, 1 of 27). This pattern suggests that the training is well received, but that translating awareness into consistent behaviour change may require reinforcement through reminders, managerial support, and operational systems.

Response	n	%
Yes (clear intention to change)	15	55.6%
Not sure	11	40.7%
No	1	3.7%

56% expressed clear intention to change behaviour.

6.4 Types of Change

In the subset of responses that described a specific change (n = 10), half related to **attitude or awareness** (5 of 10). The remainder referenced either **practical support actions** (2 of 10) or other changes (3 of 10). This suggests that, where participants articulated change, it most often concerned mindset and awareness rather than procedural change, which may take longer to embed.

Change Type	n	%
Attitude / awareness	5	50.0%
Other	3	30.0%
Practical support	2	20.0%

The majority of changes relate to attitude and awareness (50%), reflecting shifts in understanding rather than procedural change.

6.5 Summary

Training Awareness achieved high satisfaction (mean **9.14 out of 10**), universal agreement that awareness increased, and a meaningful level of stated behavioural intention (**55.6%**). The large “not sure” group indicates that follow-up reinforcement may be important to convert learning into routine practice

7. Final Conclusions

The Travelling with Confidence travel training programme successfully enabled participants to significantly improve their confidence, reduce anxiety and, for some measures, increase their social participation. The co-design process, working with Disability Together's Devon Disability Voice group, was a significant factor in this, along with the test and learn approach of the delivery team, adapting the programme to meet the needs of different participant groups.

Participants recorded high satisfaction with the training, suggesting that it both meets their needs and provides a fulfilling experience.

The length of the project meant that opportunities for post-training evaluation were limited: results were recorded at or close to the end of training with longer-term evaluation of skills and confidence becoming embedded was not possible.

The team identified a number of ways in which the project could be built upon, including

- an increase in practical travel time over 'classroom' learning;
- greater accommodation of learning styles and skill/experience levels by offering two 'pathways' – one digitally based, the other more paper based;
- the inclusion of a support worker/carer training element to enable them to provide ongoing support after the completion of training
- a longer programme length and streamlined evaluation process to secure more post-training data and create a more longitudinal evidence base.

Disability awareness training for transport staff also proved effective among those that took part, with high levels of satisfaction and strong intention to modify their interactions with passengers. Whilst there proved to be insurmountable challenges with recruiting participants, due to driver availability, a significant legacy outcome is that Disability Together were able to further develop the training programme and become an accredited training centre with the DVSA CPC for bus and coach drivers.

Detailed Recommendations

Increase practical learning element

Restructure to 70:30 Practical-to-Classroom: it was observed during training and from participant feedback that the most effective learning took place during travel sessions. Ideally training would include more than two practical sessions and some of the classroom learning would follow practical sessions to build on them.

- Ensure every training group completes at least two real journeys with facilitator support, embedding problem-solving practice on-site rather than only discussing "what-if" scenarios in a classroom.
- Offer paper-based alternatives alongside digital tools for route planning and booking, recognizing that apps and online interfaces create barriers for some participants.
- Break classroom tasks into shorter, more digestible steps with frequent breaks to reduce cognitive load, particularly for participants with learning disabilities or limited digital literacy.

Create parallel learning pathways

- Implement pre-session assessments that quickly check mobility, anxiety levels, tech confidence, and prior travel experience to tune pace and tools accordingly.
- Design parallel delivery pathways – a tech-first route for digitally confident participants and a non-tech/paper-first route for those who prefer or require it – rather than forcing all participants through the same digital-heavy content.

Train Staff to Enable, Not Do-For

- Include pre-training content for staff/carers; live observation (not helping) by staff/carers; Post-training organizational action planning.
- Empower facilitators to reshape session content and pacing in real time based on group needs, moving away from rigid, pre-scripted delivery.
- Challenge facilitators and partner organisations to examine assumptions about participants' baseline skills and confidence, as multiple stories revealed that professionals underestimated the barriers faced by both young people and older adults.

Strengthen the Evidence Base

- Streamline evaluation and include longer term follow up studies: despite using easy-read data-gathering formats, some participants did not complete pre- and post-training questionnaires.

Appendices

Appendix 1: References and data sources

- **Department for Transport.** *The Future of Mobility: Inequalities in Mobility and Access.*
- **Department for Transport:** *The role of transport in tackling loneliness*
- **Hutto, C.J. and Gilbert, E.** (2014). *VADER: A Parsimonious Rule-based Model for Sentiment Analysis of Social Media Text.*
- **Cepeda, N.J. et al.** (2006). *Distributed practice in verbal recall tasks: A review and quantitative synthesis.*
- **International Liaison Committee on Resuscitation** (2020). *Improving resuscitation education: educational efficiency.*
- **International Committee of Medical Journal Editors.** *Defining the Role of Authors and Contributors* (AI tool disclosure expectation).

Appendix 2: Most Significant Change (MSC) Panel Review Report

Panel Members: Rod Birtles, Heather Brown, Victor Bernal

Date: 27 January 2026

Facilitator: Mischa Eligoloff

Introduction: The Most Significant Change (MSC) Process

The Most Significant Change (MSC) methodology is a participatory evaluation approach that captures qualitative stories of change from project participants and stakeholders. Rather than relying solely on quantitative metrics, MSC involves collecting personal narratives about how a project has impacted people's lives, then systematically filtering these stories through various organisational levels to identify which changes represent the most significant or meaningful outcomes.

For the Travelling with Confidence project, stories were collected from young people with learning disabilities, older adults, carers, learning assistants, and project trainers throughout the delivery period (February 2025 – October 2025). These stories documented changes across three key impact domains: users' confidence and preparedness for travel; travel providers' responsiveness to users' needs; and non-disabled passengers' awareness of disabled passengers' challenges. The MSC panel's role was to review this collection of stories, identify overarching themes, select exemplary narratives, and articulate why particular changes matter for the project's strategic goals and future delivery.

What the Panel Did

The panel met online on 27 January 2026 after each member had independently reviewed the complete set of MSC stories. During the 40-minute structured discussion, panel members:

- Shared their initial impressions and identified recurring patterns across the story collection
- Discussed which stories best illustrated meaningful change in relation to project goals
- Debated the relative impact and learning value of different narratives
- Reached consensus on key themes and exemplary stories through open dialogue
- Articulated specific reasons why selected stories represent the most significant changes

The discussion was transcribed to ensure accurate documentation of the panel's reasoning. Panel members complemented the qualitative review with sentiment analysis of the story corpus, which showed overwhelmingly positive sentiment across all narratives, reinforcing the human-centred findings from the close reading.

Key Themes Identified by the Panel

Through systematic review and discussion, the panel identified three major themes that cut across multiple stories and participant groups:

1. Confidence Grows Through Doing, Not Classroom Learning

The most consistent finding was that participants gained significantly more confidence and retained more skills from practical, hands-on travel experiences than from classroom-based instruction. Multiple stories highlighted that "getting out and about" – actually boarding buses and trains, navigating stations, and problem-solving in real time – was where genuine learning occurred. Classroom sessions provided foundational knowledge, but the transformation happened during supported trips.

This theme was particularly evident among young people who found classroom content "a bit intense" but thrived during group outings. The panel noted that several older participants also specifically credited the

practical sessions with building their confidence to attempt independent journeys. One participant with learning disabilities found classroom technology instruction overwhelming but successfully used buses after the practical trip to Seaton, demonstrating that experiential learning was more effective for certain individuals than digital-heavy instruction.

2. Group Learning Accelerates Bonding and Social Confidence

The panel was struck by the powerful social dimension of the training, particularly for young people. Shared travel experiences – getting chips in Brixham, ice cream in Dawlish, navigating together – created group cohesion far more quickly than typical classroom-only courses. Lead tutors reported that bonding that would normally take 4-5 weeks was achieved within the first couple of weeks when travel training included group trips.

This accelerated social connection had knock-on effects: participants felt more comfortable asking questions, supporting each other, and engaging with the training content. The informal, non-school-like atmosphere of the travel training helped young people open up with peers in ways they typically did not in traditional educational settings. For older adults, the group element provided a safe, supportive environment to try new technologies and travel modes without judgment.

3. Flexible, Person-Centered Delivery Is Essential

The panel identified strong evidence that effective travel training cannot follow a one-size-fits-all model. Different groups and individuals had vastly different needs, confidence levels, digital literacy, and physical abilities. Stories from the project trainers (Laila and Su) revealed a significant shift in their practice: moving from standardized delivery toward adaptive, participant-led sessions that responded to the specific people in the room.

This theme encompassed several sub-issues: the digital divide (some participants struggled with app-based booking and needed paper alternatives); cognitive load (information overload was a barrier for some individuals with learning disabilities); pacing (some participants needed staged confidence-building rather than immediate independent travel); and assumptions (staff realized they had underestimated participants' barriers and overestimated baseline travel skills). The panel emphasized that future delivery must build in flexibility from the outset rather than treating adaptability as an add-on.

Stories That Best Exemplify Meaningful Change

The panel highlighted four stories that, taken together, capture both the learning and the spirit of the project:

B (Young Devon, Paignton) – Group Atmosphere Builds Confidence and Friendships

Why this story matters:

B's narrative perfectly captures how supportive facilitation that balances fun with focus can rapidly increase social confidence and peer connections among young people. He described becoming "confident talking [to] people in class" and then "more confident [with] little people, the other young people," illustrating the cascading benefits of group-based learning.

Key quotes:

"Confident talking [to] people in class got me more confident [with] little people, the other young people."

"Balancing fun and seriousness helps everybody get comfortable and confident... When it's time to work... we do get down to work."

Winnie (Honiton Carers) – From Doing-For to Enabling

Why this story matters:

Winnie's story demonstrates an organizer shifting from over-support to empowerment. As chair of Honiton Carers, she had traditionally organized everything for group members – booking tickets, planning journeys, even holding members' tickets for them. Through observing the training, she realized she had been limiting their independence rather than fostering it. Her insight that “when you do everything for the group... you don't see what they are capable of” represents a fundamental shift in care philosophy that will benefit the entire organization.

Key quotes:

“When you do everything for the group... you don't see what they are capable of.”

“By including [the] group in planning... [we] will be developing everyone's skills.”

Rachel (Millbrook Village) – Confidence in Stages After Life Change**Why this story matters:**

Rachel's story illustrates staged, realistic confidence-building for an older adult rebuilding independence after her husband moved into a care home. She recognized she needs to build a new life for herself, and the training provided a structured pathway to do so. Her approach – taking things in stages, not rushing to independent travel before she's ready – models appropriate pacing and scaffolding. The panel particularly valued this story because it demonstrates that meaningful change doesn't always mean immediate independence; sometimes the most significant change is having a clear pathway forward.

Key quotes:

“Everything has been done in stages... She isn't quite ready to go out on her own yet.”

“The TWC course has helped her with her confidence and encouraged her to start travelling.”

Jess & Louise (Honiton) – Digital Overload vs. Practical Learning**Why this story matters:**

This critical learning story highlights a negative experience that yielded essential insights. Jess, a young person with learning disabilities who doesn't use technology, found classroom sessions with heavy digital content created information overload that actually decreased her confidence about travel. However, the practical session – getting the bus to Seaton – made travel feel achievable. Subsequently, she and her support worker Louise began using buses more frequently because the real-world experience demonstrated it was manageable, and it was more cost-effective than car travel.

The panel emphasized this story because it clearly illustrates the need for non-tech pathways, reduced cognitive load options, and the recognition that not everyone learns best from app-based instruction. It also shows how practical sessions can lead to sustained behavior change even when classroom content proved overwhelming.

Key quotes:

“The Course... has been an overload of information... App's are daunting.”

“The practical sessions were however very useful.”

Recommendations

Based on the panel's analysis of the MSC stories and the three overarching themes, the following recommendations are made for future delivery of travel confidence training:

1. Prioritize Practical, Real-World Sessions

- **Restructure training delivery to achieve approximately 70:30 ratio of practical to classroom time.**
- Ensure every training group completes at least two real journeys with facilitator support, embedding problem-solving practice on-site rather than only discussing “what-if” scenarios in a classroom.
- Offer paper-based alternatives alongside digital tools for route planning and booking, recognizing that apps and online interfaces create barriers for some participants.
- Break classroom tasks into shorter, more digestible steps with frequent breaks to reduce cognitive load, particularly for participants with learning disabilities or limited digital literacy.

2. Adopt a Fully Flexible, Person-Centered Model

- **Implement pre-session assessments that quickly check mobility, anxiety levels, tech confidence, and prior travel experience to tune pace and tools accordingly.**
- Design parallel delivery pathways – a tech-first route for digitally confident participants and a non-tech/paper-first route for those who prefer or require it – rather than forcing all participants through the same digital-heavy content.
- Empower facilitators to reshape session content and pacing in real time based on group needs, moving away from rigid, pre-scripted delivery.
- Build in staged progression pathways that recognize some participants will need multiple sessions before attempting independent travel, while others may be ready sooner.
- Challenge facilitators and partner organizations to examine assumptions about participants’ baseline skills and confidence, as multiple stories revealed that professionals underestimated the barriers faced by both young people and older adults.

3. Leverage Group Learning for Social and Travel Confidence

- **Schedule travel training at the beginning of academic years or program cycles for young people to maximize the social bonding benefits that accelerate group cohesion.**
- Deliberately design trip activities that create shared positive memories (e.g., food stops, interesting destinations) to strengthen the informal, non-school-like atmosphere that helps participants feel comfortable and engaged.
- For older adult groups and carer organizations, structure training to shift from staff-dependent to peer-supported models, empowering participants to plan and execute travel together rather than having everything organized for them.

Conclusion

The MSC panel review revealed that the Travelling with Confidence project achieved significant meaningful change across diverse participant groups. The most powerful impacts came not from classroom instruction but from supported, real-world travel experiences that built both practical skills and social confidence. The project also generated substantial organizational learning about the necessity of flexible, person-centred delivery that accommodates varying digital literacy, cognitive abilities, and pacing needs.

The four highlighted stories – B, Winnie, Rachel, and Jess & Louise – together illustrate the project’s breadth of impact: young people gaining social confidence through group learning; carers shifting from over-support to enablement; older adults rebuilding independence through staged progression; and the critical recognition that technology-heavy instruction can create barriers rather than remove them. These

insights will inform not only the continuation of this work but also shape how similar training is designed and delivered in future projects.