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reasons to care
Scotland

Young People Caring OUT There:

Experiences of LGBT
Young Adult Carers
in Scotland



Acknowledgements

We would like to thank LGBT Youth Scotland for its support and assistance with this research. Particular thanks goes to those lesbian, gay, bisexual and transgender (LGBT) young adult carers who lent us their voices and shared their experiences for this study.

We would also like to thank The Co-operative Charity of the Year for its generous support, which has made this research possible.

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All library photos posed by models. Please note identities of carers have been changed in the interest of privacy.

Contents

	page
Summary	2
Background	5
Findings	7
Education	7
Health and support	9
Employment and the future	14
Conclusion	16
References	18
Terminology	19

Summary

Young adult carers aged 16–25 care, **unpaid**, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support. These young people can be described as being in a period of transition – coming to the end of their time at school, moving onto college or university, getting a job and considering whether to live independently. They are often an overlooked group with limited access to dedicated support services that meet their needs and there is little awareness among professionals and the wider public about the challenges that young adult carers can face on their journeys to adulthood. Our Time to be Heard for Young Adult Carers campaign initiative is all about getting young adult carers' voices heard by the people who can make a real difference to their lives.

During 2015, Carers Trust Scotland undertook research exploring experiences of lesbian, gay, bisexual and transgender (LGBT) young adult carers aged 16–25 in Scotland. This report presents the findings of the research which focuses on education, employment and health and wellbeing. It presents recommendations on how to better identify and support LGBT young adult carers and adds to the scarce amount of young adult carer research.



Key findings

- **Bullying:** 83% had personally experienced bullying in school, 40% in college and 27% at university.
- **Mental health problems:** 88% reported to have, or to have had, mental health problems.
- **Physical health:** 80% rated their own health as just 'OK' or 'Poor'.
- **Peer support:** 71% had informed friends at school/college/university of their caring role(s) and of this 89% felt supported by friends. 90% had told friends at school/college/university about their LGBT identity, and of this 31% felt they were treated negatively because of this.
- **Support services:** Three quarters knew where to go if they needed support with caring, help with mental health or support with LGBT issues. Four in five knew where they could go if they needed information or support with sexual health.

About Carers Trust Scotland

Carers Trust Scotland is part of Carers Trust, a major charity for, with and about carers. We work to improve support, services and recognition for anyone living with the challenges of caring, **unpaid**, for a family member or friend who is ill, frail, disabled or has mental health or addiction problems.

With locally based Network Partners we are able to support carers in the community with information, advice, emotional support, hands on practical help and access to much needed breaks. We offer specialist services for carers of people of all ages and conditions and a range of individually tailored support and group activities.

Comparison

This study includes some comparative reflections and contrasts; exploring research commissioned by Carers Trust (Sempik, J and Becker, S, 2013, 2014(a) and 2014(b)) and research produced by LGBT Youth Scotland (Lough Dennell, B and Logan, C, 2012 and 2013) to examine how experiences of LGBT young adult carers specifically compared. Carers Trust's research focused on young adult carers aged 14–25 and did not enquire about their sexual orientation or possible transgender identity. LGBT Youth Scotland's study focused on LGBT young people aged 13–25 but did not ask questions about their caring status.

Colour coding has been used to represent the findings of the three different studies:

■ This LGBT young adult carer research.

■ Carers Trust research.

■ LGBT Youth Scotland research.

All LGBT young adult carers are individuals and have different experiences; however, a key recurring issue emerged throughout the research –

LGBT young adult carers feel they are assumed to be either a carer or a LGBT young person, not both, and their needs as LGBT young adult carers are not being fully met.

Sarah:

“Constantly having to fight to be recognised as either one of the two, so trying to be recognised as both is incredibly difficult.”

Carers Trust Scotland's recommendations

- ▶ **Awareness in education and health:** Better awareness of LGBT young adult carers and the difficulties they can experience. Embed intersectional identities across the education curriculum and in promotional health resources.
- ▶ **Progressive policies and procedures in education:** Accessible and inclusive policies in all education institutions that establish frameworks of support for LGBT student carers. This will result in better identification and ensure these learners are not discriminated against, disadvantaged or experience bullying because of their identities.
- ▶ **Greater identification in health:** Health and social care professionals must be aware of issues related to health and wellbeing faced by many LGBT young adult carers. There must be better identification by professionals and robust policies across all health boards that enable them to refer on to relevant services or to provide support directly as appropriate.
- ▶ **Holistic assessments:** Formal assessments of young adult carers' needs should take account of their wishes and future aspirations. These plans should be reviewed on request of the carer and information about assessments should be easily accessible. Appropriate services should be provided to ensure young adult carers' own health and wellbeing is not negatively impacted, ensuring that they are able to prosper in all aspects of their lives and live healthily.
- ▶ **Intersectional identity training for support services:** Carer support services and LGBT youth services should help and signpost young people to access relevant information and support as required; they should receive intersectional training to raise awareness and further develop skills.
- ▶ **Inclusive and flexible policies in employment and training:** More support for LGBT young adult carers to enter, sustain and succeed in training and employment opportunities. Inclusive workable policies should be adopted which clearly outline flexibility and the support available.

Background

Getting It Right for Young Carers: The Young Carers Strategy for Scotland 2010–2015 (Scottish Government, 2010) highlighted the need to develop further information, advice and support for LGBT young carers. The strategy recognised that: “LGBT carers have to deal with issues around identity and sexuality at the same time as having to undertake caring responsibilities. These demands can affect their ability to form friendships, to access services and to source the necessary support to overcome these challenges. They may fear discrimination and stigma, as a result of both their sexuality and their caring responsibility, which may be to the detriment of their mental wellbeing.” There is no previous research that currently exists about the specific experiences of LGBT young adult carers in Scotland and we believe it’s their Time to be Heard.

Method overview

In 2015, Carers Trust Scotland undertook research exploring experiences of LGBT young adult carers. A questionnaire targeted at LGBT young adult carers aged 16–25 was developed. It consisted of 60 question fields and enquired about respondent’s education, employment and health and wellbeing. It included both closed and open ended questions to provide statistical and qualitative data. A £25 prize draw incentive was promoted. The survey was live for nine months and was administered online through email and social networking sites, including Twitter and Facebook, and through Matter – Carers Trust’s online service for young adult carers. This ensured a wide distribution of the online survey across Scotland and aimed to reduce geographical constraints and reach LGBT young adult carers who were not already connected with us. 55 LGBT young adult carers responded.

Estimates of LGBT and carer data are generally regarded to be under-representative. The Scottish Government previously estimated that LGBT people make up 5% of the population (Scottish Government, 2008). Scotland’s Census (2011) found that there



Chris:

“You are presumed that if you are gay and accessing the LGBT services, then you are not a carer. Then if you are a carer, then you are going to those services, so you must not be LGBT. There’s no correlation that people are people and that carers can come from all walks of life, as well.”

are 27,391 young adult carers in Scotland. Therefore, it can be approximated that there are around 1,370 LGBT young adult carers in Scotland; suggesting that our survey sample represents 4% of the overall estimated population.

In late 2015, Carers Trust Scotland facilitated a focus group to further explore and contextualise the emerging themes. Nine LGBT young adult carers participated. The focus group opportunity was promoted through email and online and was circulated widely, including on social media sites. Through the focus group we were able to obtain detailed information about personal and group feelings, perceptions and opinions. While the focus group was more time and resource effective than conducting individual interviews, there are also disadvantages to focus groups, as disagreements can occur and participants may feel pressured to agree with the dominant view. Profile data was not collected on focus group participants. These young people's contributions are featured as perspective quotes.

Profile of survey respondents

The average respondent age was 17 and the majority were white British/Scottish (92%) and still in formal education (school, college or university). Over half do not belong to any religious or belief groups. More than a quarter said they have a disability or learning difficulties. The greatest number of responses was received from Renfrewshire (17%).

65% of participants identified as a woman (including male-to-female trans woman), 20% identified as a man (including female-to-male trans man) and 15% identified as other gender identity; including gender fluid and non-binary. One fifth of participants said they identified, or had ever identified, as transgender. Over half identified as gay or lesbian; the next most received response was bisexual (17%), followed by pansexual (11%). Most were single and around one fifth were in a relationship but not living with their partner.

The majority were caring for their mother or step mother (57%), the next most common response was brother/s or step brother/s (28%). 59% provide **unpaid** care for one person and around a quarter were caring for two people. Mental health problems, followed by physical disability and long-term physical illness respectively were listed as the main conditions of the people that respondents were providing **unpaid** care for.



Findings



Education

All young people have a right to be educated, to self-expression and to be protected from discrimination (SCCYP and Scottish Government, 2008). Anyone whose education has been negatively affected because of their identity is being denied their rights and is not having an equal chance as their peers to meet their potential in education.

More than 70% of the survey sample were still in formal education – 20% were at school, 39% were at college, and 13% were at university. Participants' educational attainments varied; none had a postgraduate degree, only one had an undergraduate degree and the most common response for highest level of qualification obtained was Higher/equivalent (34%). It is important to note that the average age of respondents was 17 years old and as noted, the majority of the sample were still undertaking formal education qualifications.

Bullying

This research found:	83% of LGBT young adult carer respondents had personally experienced bullying in school
Carers Trust research found:	26% were bullied at school because of their caring role
LGBT Youth Scotland research found:	69% of all LGBT respondents had experienced homophobic or biphobic bullying in school

LGBT young adult carers are *three times* more likely to experience bullying than young adult carers overall. They are also significantly more likely to experience bullying

Chris:
“Real lack of knowledge on both issues, from high school up to universities, even still an awful lot of ignorance, they don't understand what it's like to be in a caring situation and also dealing with issues around sexuality or gender identity at the same time, it's just sort of brushed off.”

compared to LGBT young people generally. Bullying can have a detrimental and negative long-term impact on a person's mental health and wellbeing.

74% did not feel confident in reporting bullying to staff or authority figures at school; 49% were afraid of negative reactions of reporting bullying and over half felt that there was 'no point' in reporting.

LGBT Youth Scotland's research also highlighted that 48% of LGBT young people in school would not feel confident to report homophobic or biphobic bullying in general. Thus LGBT young adult carers are around a third less likely to report bullying than LGBT young people more broadly.

- 54% of those who experienced bullying said it negatively impacted on their education.
- 71% had informed friends at school, college or university of their caring role(s), and of this 89% felt supported by friends. 90% had told friends at school, college or university about their LGBT identity, and of this 31% felt they were treated negatively because of this.

LGBT young adult carers are more open to disclosing their LGBT status to their friends rather than their caring role. However, when they do disclose, they are more likely to receive negative reactions because of their LGBT identity rather than their caring role.

Almost two thirds said there wasn't a particular person at school/college/university who recognised them as a LGBT young adult carer and helped them.

Financial issues

Almost a quarter may or did drop out of education because of financial difficulties.

Michael:

"I'm far more comfortable saying to someone that I am LGBT than saying I am a young adult carer. There's a stigma."



Health and support

It is estimated that carers, as providers of services, save the health and social care system in Scotland over £10bn each year (Carers UK and University of Leeds, 2011). Appropriate support for LGBT young adult carers is required for them to be able to provide **unpaid** care and maintain healthy lives. Young adult carers and Carers Trust Scotland partners report wide variations between local authorities in the levels of support available.

All young people have a right to the best health possible and to medical care and information. They also have the right to relax and take part in activities such as sport and music (SCCYP and Scottish Government, 2008). The negative implications of caring on young people's health and wellbeing is well evidenced (Sempik, J and Becker, S, 2014b). Young people whose health has been negatively impacted because of their LGBT young adult carer identity are having their rights infringed and are not able to live a healthy and fulfilled life.

Physical health

This research found:	80% rated their health as just 'OK' or 'Poor'
Carers Trust research found:	39% rated their health as just 'OK' or 'Poor'

LGBT young adult carers are *twice more likely* to feel their health is just 'OK' or 'Poor' compared to young adult carers overall.

Mental health problems

This research found:	88% reported to have, or to have had, mental health problems
Carers Trust research found:	45% reported having a mental health problem
LGBT Youth Scotland research found:	40% of LGBT young people considered themselves to have mental health issues

In Scotland one in four people will have a mental health problem at one point in their life (Scottish Government, 2014). LGBT young adult carers are *more than three times* more likely to have a mental health problem than the general population.

LGBT young adult carers may experience discrimination and bullying because of their caring role, sexual orientation, gender identity or gender expression. Consequently, this results in them feeling isolated, and developing lower self-esteem and confidence which negatively affects their mental health and wellbeing. They may also anticipate and fear discrimination and bullying due to previous experiences or some perceived negative attitudes in society. LGBT young adult carers require access to relevant and inclusive mental health services.

Four in five young adult carers worry due to finances; 28% have debt that causes worry. Money to socialise with friends and travel costs cause the greatest financial worry.

Not feeling safe and supported by the NHS

	Percentage of people who did not feel safe and supported by the NHS		
	Female (including male-to-female trans woman)	Male (including female-to-male trans man)	Transgender and transgender experienced respondents
This research found:	64%	71%	63%
LGBT Youth Scotland research found:	57%	32%	52%

Comparably, our research found that LGBT young adult carers overall felt less safe and supported by the NHS than LGBT young people generally. Gay, bisexual and transgender (GBT) young adult carer men are more than *twice more likely* to not feel safe and supported by the NHS than GBT young men in general.

Overall, 83% said that they would feel comfortable telling their doctor that they provide care for others. But around half would not feel comfortable to come out as LGBT to their doctor or speak to them about sexual health.

Less than half (48%) of female respondents were comfortable to come out as a LGBT person to their doctor, whereas young adult carer men were more comfortable to come out as a GBT person to their doctor (78%). GBT young adult carer men were also more comfortable speaking to their doctor about sexual health (56%) than LGBT women (41%). Sexual health research has highlighted that men who have sex with men (MSM) are the group of most concern regarding contracting sexually transmitted infections (NHS National Services Scotland, 2009). Therefore, sexual health awareness campaigns and prevention work have been targeted at MSM and thus arguably concurring why GBT young adult carer men are more likely to come out and speak to their doctor about sexual health than the female, transgender and transgender experienced respondents.

Sarah:

“I ended going to a psychologist who I didn’t feel was particularly LGBT friendly, so I ended up having to go to a different one, which meant I had to get driven to her office, which is like an extra strain on the caring role.”

Michael:

“Only after I came out to my doctor ... he was a much nicer person, much more compassionate person.”



Sarah:

“It’s hard enough to find a partner when you’re on the scene. Like add on being a carer and have to stay in house all of the time. It’s like finding a job, you have to know somebody who knows somebody.”

Anna:

“My last relationship, the main reason that we broke up was because I couldn’t spend as much time as they would have liked because of my caring role and they just couldn’t understand.”

Michael:

“It’s harder to explain that other side of your life though, as a carer, to whoever you’re with. Most times you can’t, you don’t want to either, you don’t want to bring them anywhere near that. But at the same time, that is your life.”

Transgender and transgender experienced young adult carers are least comfortable speaking about sexual health issues (20%); this echoes LGBT Youth Scotland’s findings. This group was also least likely in the sample to feel comfortable to come out to their doctor (40%); this is in contrast to LGBT Youth Scotland’s findings where transgender respondents are the most likely group to be out to their doctor. LGBT Youth Scotland research presents the rationale that transgender young people may need to come out to their doctor to be able to access medical treatment for gender reassignment. This research has a relatively young sample, which may be a contextual factor for this disjointed finding.

For many young adult carers, their rights to the best health possible and to medical care and information are being denied. All health practitioners must be accessible and appropriately informed and willing to support the health and wellbeing needs of LGBT young adult carers and refer them to relevant services as required.

Balancing relationships and caring

45% are concerned about being in a relationship and 58% are concerned about not having time to socialise with friends.

Wellbeing

Over half of young adult carers don’t feel confident. 45% said that they are not happy with their life or their future prospects. 68% are not happy about how they look. Around half generally don’t eat healthily and over a third do no exercise.

Across society there is a significant amount of pressure for young people to look a certain way. LGBT identities are often represented in the media in sexualised and stereotypical ways and this can negatively impact young people who feel that they don’t adhere to these representations (LGBT Youth Scotland, 2015). Additional pressures on young people to conform to these expectations and their failure to do so can negatively affect confidence and aspirations.

UK physical activity guidelines state that all children and young people between the ages of 5–18 should engage in moderate to vigorous intensity of physical activity for at least 60 minutes per day. Young people above 18 years old should complete at least 150 minutes of moderate intensity activity per week (Bull, F et al, 2010).

One third of our sample do not exercise at all and only 10% said that they frequently exercise; thus LGBT young adult carers are generally not following minimum physical activity guidelines. Furthermore, it is recommended to eat at least five varied portions of fruit and vegetables per day. A lack of fruit and vegetables has shown to be a risk factor in a range of serious health problems, such as obesity and cancer. An unhealthy diet has been widely noted as a factor in Scotland's poor health record and around half of LGBT young adult carers self-report that they do not eat healthily (Scottish Government, 2009).

Support services

This research found:	Three quarters knew where to go if they needed support with caring, help with mental health or support with LGBT issues. Four in five knew where they could go if they needed information or support with sexual health.
LGBT Youth Scotland research found:	Nine in 10 young people said they knew where to get information and help with sexual health, and three in four said they knew where to go to get information and help with mental health or with stress-related issues.

Most LGBT young adult carers know where they could go to receive support with **unpaid** caring, mental health, sexual health and support with LGBT issues. However, they are still not as aware as LGBT young people generally about options and where they could go for support.

80% had accessed a carer support service and 47% had accessed a LGBT youth service at some point. Becoming more confident, being informed about rights, making friends and being supported are listed as the key benefits of doing so.

Kirsty:
"It's hard to look after yourself sometimes as well when you're a carer and think about you, you know, you're always thinking about the other person. If other people could check in with you, make sure you're ok ... it's hard with you to check in with yourself."

Simon:

“I find it hard to actually talk to the person I care for, so they don’t know I’m LGBT. They have mental health problems ... they don’t like the idea of gay people.”

Anna:

“It affects the relationship with the person you care for as well, if you’re not out to them. So they maybe don’t know the LGBT side of your identity, they only ever know the person who is looking after them.”

Michael:

“You end up being more comfortable telling non family members that you’re gay, but not about your home life. But when it comes to your home life, you are more comfortable discussing your caring role, but not your sexuality. It’s a delicate balancing act.”

Friends, family, youth services and carers centres were all given as sources of support. But support networks vary based on the young person’s circumstances.

48% said they have a good group of friends, whereas 43% said that they don’t have many friends. Almost half felt connected with their local carer community and just under a third felt part of their local LGBT community. It can be suggested that as more LGBT young adult carers had experience of attending carer support services than LGBT youth services, then this is arguably why they feel more connected with their local carer community. Interestingly 57% had used LGBT online advice or support services, whereas only 28% had used online advice or support services to help with caring roles; this may be reflective that the bulk of the sample have or have been connected with a carer support group but less likely to have accessed a LGBT support group and thus are using online tools to access this type of advice and support.

While 64% felt the person they care for receives good services, overall, LGBT young adult carers do not believe they receive good services. More dedicated resources and services are required to reach out to LGBT young adult carers and provide adequate support.

Employment and the future

The pathway to adulthood is unique for all young people, but for young adult carers obstacles can disadvantage them in being able to prosper.

10% of the sample were not in formal education, employment or training (NEET); this is comparable with UK national figures (Delebarre, J, 2016). But again, the average sample age may be an influential factor for this finding as the majority were still in formal education; 66% of the overall sample were not currently employed. The majority (60%) said that they were dissatisfied with the careers advice that they received. For those who are employed, most chose their jobs because they like this kind of work and because the hours are flexible so they are still able to provide the same level of care; this is consistent with Carers Trust's findings.

Impact of experiencing bullying on employment

This research found:	33% said it negatively impacted on taking forward job opportunities
LGBT Youth Scotland research found:	28% say that homophobia, biphobia or transphobia has negatively impacted on their employment opportunities

- 69% of our sample were in receipt of benefits or bursary support, such as Carers Allowance, Council Tax Benefit and Education Maintenance Allowance. However, Carers Trust research found that only 9% of young adult carers in general were in receipt of any benefits.
- 47% said experiencing bullying has had no impact on their training or employment opportunities.

Kirsty:

"I always say people don't see the good side of caring; they see the lateness, they see the having to check-in and all that. They don't see the maturity and the kindness and the caring nature that you have because of it."

Sarah:

"I haven't told my work at all about being a carer because I just know that they'll think that I'm more likely to be off and won't ask me in for shifts. But I have got on my CV that I've done a lot of LGBT activism, because I haven't had other work experience. I am worried about employers seeing LGBT and subconsciously discriminating against me because of that. But I am definitely much more open about my LGBT identity rather than my caring role."

We asked the sample to tell us their hopes for the future. These include:

“to work as a
rehabilitation officer
in youth justice”

“run my **own business**
and **influence change**”

Kirsty:
“We do exist ... our sexual orientation doesn't define us and being a carer doesn't, we are more than that ... treat us how anyone else would be treated.”

“to get to
university
to study **social sciences**
or **photography**”

“**vet** or **zoologist**”

“**security, health,**
money, success,
creative fulfilment
and **positive wellbeing**”

“to be seen as **masculine**
and have **surgery**
confirming my gender”

“to get into **university** to study **theatre studies**
and **pass the whole course,**
do some **travelling, meet someone,**
get my **own flat** and **move out**”

“to get a **job**
and be in a
loving relationship”

Although LGBT young adult carers have many shared experiences, what is also clear is that each of these young people are individuals. Their dreams and career aspirations are diverse, and these young people are hopeful for progressive and prosperous futures. There is also a notable number hoping to study at university level in the future.

Conclusion



This study is part of Carers Trust’s work in partnership with young adult carers to offer them opportunities for their voices and experiences to be heard and to campaign for change. The views and issues that young adult carers face are often marginalised and under-represented. This research highlights the many obstacles and disadvantages facing LGBT young adult carers and the implications these may have on their education, employment and health and wellbeing. It also highlights key recommendations on how to better support LGBT young adult carers in Scotland (see page 4).

LGBT young adult carers have the right to inclusive services and to be respected, healthy, included and feel safe. They require fair opportunities to prosper in education and employment and live happy and healthy lives.

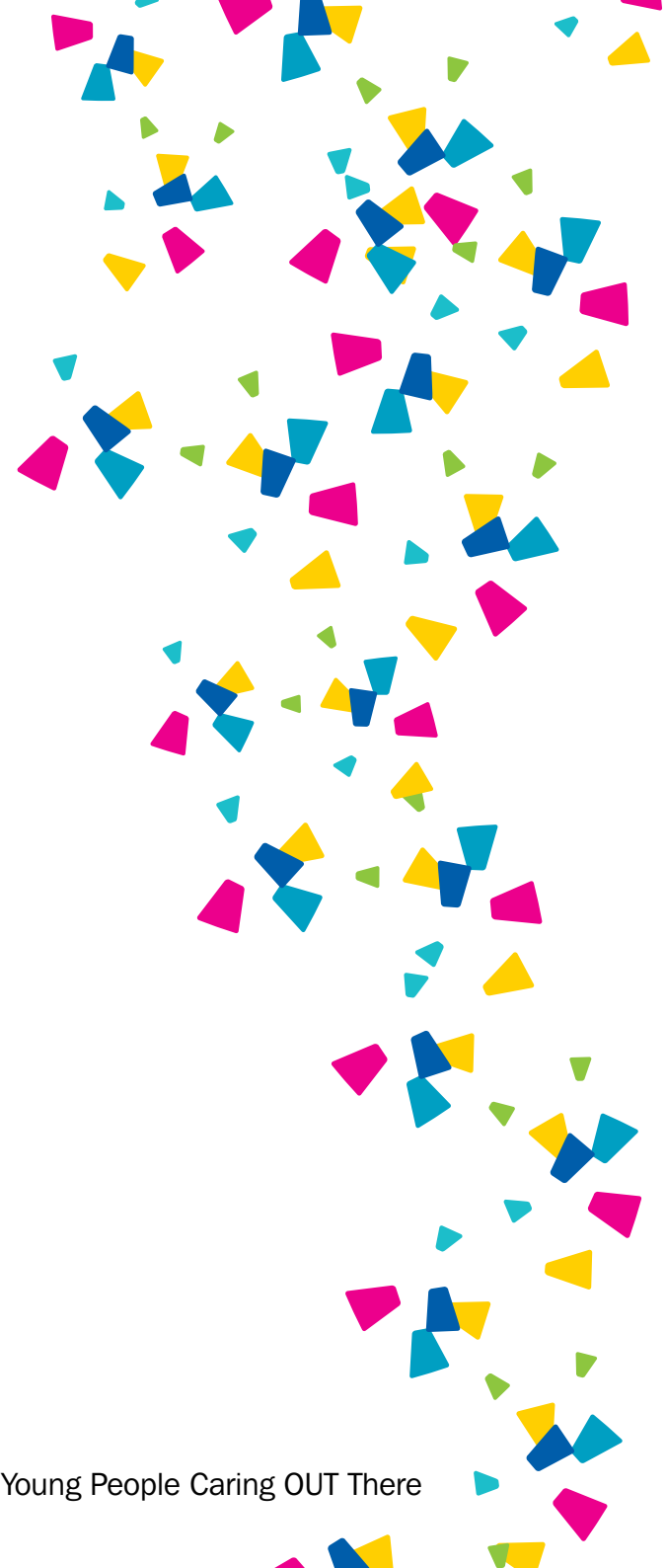
The results of this study find that LGBT young adult carers experience high levels of bullying in education. They additionally experience poor health overall with significantly high levels of mental health problems. They generally feel under supported in education, employment, health and social care and by support groups and services. Apparent throughout the research is that LGBT young adult carers feel they are not receiving holistic support or services. They are assumed to be either a carer or a LGBT young person, not both, and their needs as LGBT young adult carers are not being fully met.

LGBT young adult carers should not be disadvantaged because of their caring status, sexual orientation, gender identity or gender expression.

Clear transition structures are essential for LGBT young adult carers across education, health and social care which ensure that they are not disadvantaged in life opportunities and they are able to proposer and reach their own aspirations and potentials. These structures should address the exclusion that they may

Ashleigh:
“Doubles your discrimination chances.”

Lindsay:
“I think if carers youth workers were aware of LGBT issues and if LGBT youth workers were aware of carers’ issues, then they could identify young people who they were working with and be able to direct them to things that they may not already be accessing.”

A decorative graphic on the left side of the page consists of numerous small, colorful triangles in shades of pink, blue, yellow, and green, scattered across the page.

experience which can have a detrimental impact on their lives and their futures. This would give LGBT young adult carers a fairer chance to succeed and would ensure adequate support was in place for these young people.

Further intersectional research of young adult carers is essential to better understand the views, experiences and obstacles that these young people experience on their transitional journey to adulthood.

It is LGBT young adult carers' Time to be Heard.

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Terminology

Below are associated LGBT terminology that feature in the report. This is not an exhaustive glossary and further terms can be found at www.lgbtyouth.org.uk/Understanding-Terminology.

Biphobia – The irrational fear, dislike or prejudice against those who are or are perceived to be bisexual. Bisexual people can experience homophobia (particularly when in same-sex relationships) and can experience biphobia from both heterosexual and lesbian and gay people.

Bisexual – A person who is emotionally and/or physically attracted to people of more than one gender or regardless of gender. Historically, definitions of bisexual refer to ‘an attraction towards men and women’ however, many bisexual people recognise that there are more than two genders.

Gay – Refers to someone who is emotionally and/or physically attracted to people of the same gender. Some women prefer to refer to themselves as gay women rather than lesbian, although the word gay is most commonly used in reference to men.

Gender – Refers to the attitudes, feelings and behaviours that a given culture associates with a person’s biological sex.

Gender expression – A person’s external gender related appearance including clothing, speech and mannerisms. Usually defined as connected to masculinity or femininity, however we recognise that people express their gender outside these traditional notions.

Gender fluid – Having an overlap of, or constantly changeable, gender identity and gender expression. This can include having two or more genders, having no gender, or having a fluctuating gender identity.

Gender identity – A person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned to them at birth.

Gender reassignment surgery – Surgical procedures by which a person’s physical appearance and function of their existing sexual characteristics are altered to resemble that of the other sex.

Homophobia – The irrational fear, dislike or prejudice against people who are or are perceived to be lesbian and gay people. It can also be used as an all-encompassing term to include the irrational fear, dislike or prejudice against bisexual people and transgender people.

Intersectionality/Intersectional identities – Identities, experiences or approaches to equality work that fall into more than one protected group. This approach recognises that patterns of oppression and discrimination are not only interrelated but are bound together, and that certain groups can experience multiple forms of discrimination.

Lesbian – Refers to a woman who is emotionally and/or physically attracted to other women.

LGBT – Acronym for lesbian, gay, bisexual, transgender.

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Non-binary gender – Gender identities that are not exclusively male or female are identities which are outside of the gender binary. People can be both male and female, neither, or their gender may be more fluid (that is, unfixed and changeable over the course of time).

Pansexual – A person who is emotionally and/or physically attracted to people of more than one gender or regardless of gender.

Protected Characteristics – The nine personal qualities that are legally covered by the Equality Act 2010; age, disability, gender re-assignment, pregnancy and maternity, marriage and civil partnership, race, religion and belief, sex, and sexual orientation.

Sex – Refers to physical differences between male and female bodies, including the reproductive system and/or other biological characteristics.

Sexual orientation – A person's identity based on emotional and/or physical attraction to individuals of a different gender, the same gender, or more than one gender.

Sexuality – Refers to the sum of various aspects of attraction and behaviour that add up to how a person expresses themselves as a sexual being.

Transgender – An umbrella term for those whose gender identity or expression differs in some way from the gender assigned to them at birth and conflicts with the 'norms' expected by the society they live in. Included in the overall transgender umbrella are transsexual people, non-binary gender identities and cross-dressing people.

Transphobia – The irrational fear, dislike or prejudice or discrimination against those who are or are perceived to be transgender.



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