

Interview with Aurora

This interview was submitted on March 5, 2022. Names have been changed for privacy. Aurora is a woman in her late 30s. She has three mental impairments, Borderline Personality Disorder, Bipolar Disorder type 2, and Major Depressive Disorder.

What is Borderline Personality Disorder:

It's a **Cluster B** personality disorder, a mental illness characterized by overly emotional and unpredictable thinking and behaviour. BPD impacts how you think, feel and experience emotions, and disrupts how you function in everyday life. Patients live with an intense fear of abandonment, wild mood swings, inappropriate and intense rage, and being unable to manage their emotions. It includes rapid changes in self-identity and not knowing who you are. Extreme stress, disconnection from reality and extreme impulsive and risky behaviours, including suicidal threats or attempts, and self-harm, are common.

The cause is unknown, although there is medical research to suggest it is a mix of genetics and brain abnormalities, changes in certain areas of the brain involved in emotion regulation, impulsivity and aggression. Certain brain chemicals that help regulate mood, such as serotonin, may not function properly. There is a link to environmental factors, a history of abuse and neglect in childhood is common among BPD patients. [Learn more at Mayo Clinic.](#)

What is Bipolar Disorder type 2:

BP, formerly called **manic depression**, is a mental health condition that causes extreme mood swings that include emotional highs (mania or **hypomania**) and lows (depression). When you become depressed, you may feel sad or hopeless and lose interest or pleasure in most activities. When your mood shifts to mania or hypomania (less extreme than mania), you may feel euphoric, full of energy or unusually irritable. These mood swings can affect sleep, energy, activity, judgment, behaviour and the ability to think clearly.

Bipolar 2 disorder is **not** a milder form of bipolar I disorder (BP), BP2 is a separate diagnosis. While the manic episodes of BP can be severe and dangerous, individuals with BP2 can be depressed for longer periods, which can cause significant impairment. The exact cause of BP is unknown but it's linked to biological differences and inherited traits. [Learn more at Mayo Clinic.](#)

What is Major Depressive Disorder:

Depression, clinical depression, or MDD, is a mood disorder that causes persistent feelings of sadness and loss of interest, affecting how you feel, think and behave. There are **many** symptoms, which lead you to feel like life isn't worth living, which can lead to self-harm and suicidal ideation and attempts. The exact cause of depression is unknown, but it's linked to biological differences, brain chemistry, hormones, and inherited traits. [Learn more at Mayo Clinic.](#)

1. What is your disability called?

Aurora: I have Borderline personality disorder, Bipolar 2, and Major depressive disorder.

2. Have you found any *GWA* content that includes your disability?

Aurora: Nothing for BPD, six for "bipolar" (I'm uncertain which type of BP), and seventy-four about depression.

3. If writers made content about characters with your disabilities, would you want:

- A) The speaker is not disabled, the listener has your disability
- B) The speaker has your disability, the listener is not disabled
- C) The speaker and the listener both have your disability
- D) I do not want *GWA* content about my disability
- E) Other (please explain)

Aurora: I'd only want to see nondisabled speaker with disabled listener. Particularly with BPD, I'm afraid of some people trying to write as if **they** have BPD and thinking they can understand me or someone like me. They cannot.

4. Do you refer to your disability by a shortened or different word? For example, many paraplegics call themselves "para", e.g. "I'm John, I'm a para."

Aurora: I say, "I have BPD, I'm bipolar 2. I have clinical depression."

5. Are there any online resources for learning about your disability, including having sex with your disability, that you recommend for writers?

Aurora: Sure, try these:

- Blueheart has [a useful article](#) that explains a lot of the struggles people with BPD face when it comes to sex.
- Very Well Mind also has [an article on sex for BPDs](#) and [sex for bipolars](#)
- Healthline has an article that discusses [the problem of hypersexuality for bipolars](#) and sex when you are [clinically depressed](#).

6. If sex for you is different or more difficult than for non-disabled people, why is that? Are there things a new partner might not understand about you at first when it comes to sex?

Aurora: For my mental health disorders, nobody understands how I feel, why I need assurance, why I get so angry. Something as simple as him getting out of bed for some water can leave me feeling emotionally shattered and rejected. It's stupid because logically I know he is not rejecting me, but emotionally I feel absolutely terrible. Physically, my illnesses cause me to feel constantly exhausted, and although I am willing to have sex, my energy levels are so low, I'm often unable to do much in bed. Something like the cowgirl position doesn't work for me.

For my physical health, I get very dizzy, and again very tired. I have seizures so I am not comfortable leaving my home. I prefer stories set in the speaker's home or the listener's home, it lets me imagine I'm in a comfortable place where I feel safe. If I'm bent over on my knees, or lying on my stomach, I can feel very dizzy so he might need to help me sit up and hold me steady.

7. Do any sex aids exist to help people with your disability?

Aurora: Not that I know of.

8. People google very specific questions about disabled people: like:

"Can someone with BPD feel empathy?"

"Can someone with bipolar truly love?"

With regards to romance and sex, do people make assumptions about what your life is like and what you can and cannot do in bed?

Aurora: People think I can't love, and that I don't know what it is. If you read online comments on stuff, you will notice some armchair expert always diagnosing someone with BPD, and outlining all the symptoms that make us "dangerous and evil". Nobody wants to be with someone with BPD. Bipolar people are often viewed as evil and unstable. With the two combined, people think I am a faithless whore incapable of monogamy. They are wrong. They think depressed people are lazy.

9. What should writers include in order to describe your disability accurately? What is the best way to describe a person like you, in a porn script, ensuring that your disability is **not erased** and the script is **for** people with your disability?

Aurora: I guess...acknowledge that she really, really needs attention. If he forgets about her, even for a few minutes, to her that can be devastating. For my mental disabilities, I think it would sound ridiculous if the speaker constantly mentioned my illnesses by name. But if the script was tagged [BPD], it would be enough for me if the speaker was sensitive to my needs, and maybe there was a line about my medication, my mood, or therapy appointment? Just to normalize the parts of my life that are seen as abnormal.

10. What should writers avoid when writing about your disability?

Aurora: It cannot be cured. It cannot always be managed. People with BPD didn't choose to be this way. There is very little sympathy for the way we feel from this illness, we are painted as villains. I would be angry if someone decided to write a "BPD yandere kidnaps you" story, or that type of shit. BPD isn't an accessory you can place on your speaker character to make them seem dark and edgy. BPD is a tragedy and it ruins lives.

Comfort and reassurance - I'm not interested in that. I don't want someone to write about me as if **my illness** is some great sacrifice **for them** to get over in order to be with me.

Don't use her BPD as a plot point. If you want to write about a BPD patient, write about how the speaker feels being with her or how he enjoys the sex with her, like with anyone else he wants to be with. Don't use BPD as a reason for her to act unhinged.

If I did find a script with a BPD character, I would not want to see *any* mention of being hospitalized. I'd only be interested in a script that talks about her life on the outside with other people.

Follow-up question: Is there something that, in your experience, is a common misconception or is outright offensive in scripts involving your specific disability that you wish more people were aware of as false?

Aurora: Sure! People assume that people with my illnesses are:

- A) absolutely insane
- B) untrustworthy
- C) incapable of real emotions
- D) dangerous
- E) promiscuous whores incapable of fidelity or monogamy

When I see scripts about a character with a personality disorder, **that** pisses me off. It feels like the writer used a very stigmatized and misunderstood mental illness as a plot point.

I have yet to read one of those scripts where the writer empathized with that community or was a part of that community themselves. It feels gross, for people who do not suffer from an illness, to take that for shock value to make their characters "cool".

I know authors have been writing about people with mental illness forever. I know that none of us have a right to say, "You can't write that!" or "You can only write about X if you suffer from X." But I believe it is wrong to use an illness, especially a stigmatized mental illness, to demonize your character for the sake of making them "edgy" or to provide a "reason" that she will do unreasonable things.

Follow-up question: Can you give me an example of the type of things you're referring to?

Aurora: "She broke into your house and cut up your pictures? Well, she has BPD. **Of course** she did that. Those bitches are crazy."

If you want to write about a woman who breaks into her ex's house to destroy his stuff, why are you making her mentally ill? Why is her reason for this violence her mental illness?

People without mental illness are also unreasonable.

People without mental illness are also assholes.

It makes me angry when people do this.

Follow-up question: What would you recommend to people who want to write these unreasonable and assholeish characters? To not include mental illness specifically? (Like leaving it unnamed, do not say the person is mentally ill?) I know it kind of veers out of the sex/romance category, but many include it as part of a "plot/story" to their porn.

Aurora: I think if you want to write about someone who is unreasonable or an asshole (or both), you should take a hard look in the mirror before you decide this character also has a mental illness. Because your decision reveals something about **you**. That you think people with mental illness are unreasonable assholes, and people who are fortunate enough to not have a mental illness are not.

If you decide that this character needs to be mentally ill, why? Why can't you just write about a person who is an unreasonable asshole without discussing their mental health?

Are you writing with empathy to show what the reality is to date someone with mental illness, or how hard it is to be that person? I bet you aren't. So why are you doing it? Using someone's disability to be edgy is gross.

I cannot understand any other reason why a person would do it. I would actually love to see justification from people who write characters with mental illness.

11. Tagging is how people find content. For example, for a paraplegic I'd tag it:

[SCI] [paraplegia] [wheelchair] [disabled listener] [interabled relationship]

What tags would you choose for your disability?

Aurora: I wouldn't recommend trying to write about all of my disabilities in one story, so:

- [disabled listener] [BPD]
- [disabled listener] [bipolar] [BP2]
- [disabled listener] [depression]

12. About "person-first language" and "identity-first language", there is a big push in the medical community and schools, and from parents of disabled people, to never say the word "disabled". For example, they tell us to say "he's a man with paralysis" or "she's a woman with autism". Yet many disabled people say that they do not like this and get annoyed that people treat "disabled" like it's a bad word.

The question is, if we write content for your disability, it needs to be tagged so you can find it. What type of tagging do you prefer?

A) Person-first: [person with a disability] [person with BPD]

B) Identity-first: [disabled listener] [BPD]

Aurora: Option B

13. A common piece of advice in articles about writing for disabled people is, "Ask disabled people what they want, then write that". That leads to a different problem: how does a writer meet disabled people to ask them? Are there any online communities you recommend that welcome questions from non-disabled people?

Aurora: I've only been part of one BPD group and I wouldn't recommend it for normies. I guess...if someone shares their mental health diagnosis with you, to me that means I view you as a "safe" person, and I won't be upset if you ask me questions. If a random person approached me and

tried to guess my mental health diagnosis, I'd block them. I don't know if you can just...go out into the internet and find people. So I'm not sure.

14. Please choose a pseudonym to protect your privacy. What shall I call you?

Aurora: Aurora

15. **Optional question:** if you want me to include your age (or age range), gender, relationship status, and whether or not you are a parent, provide that information here.

Aurora: late 30s, woman

16. Do you have other thoughts you would like to share about this?

Aurora: No.