

Participant 002

Note:

RA- researcher acquiesces

PA- participant Acquiesces

-Consent was read-

-Questionnaire was completed-

R (Researcher) – umm, so I'd like to start by just asking you about your pain condition and how it's impacted your life.

P (Participant) – Alright, I guess it's put me at senior speed, so it's put me at maybe 20 years older than I am. <RA> So that's kind of the level I'm at, and what kind of makes it worse is that it is invisible and that makes it hard for people to empathize. <RA>

R- Can you tell me more about that?

P- Well because I, appear normal, they usually only see me at my best. A lot of the times I'm bedridden but, I take stimulants when I know I'm going to be active; not all the time, it's only occasionally and when they see me for the few hours I, appear normal so they, really aren't too aware, unless I tell them.

R- OK, so it's like they only see you at your best?

P- Right <RA> and of course I have to pace myself, so I'm kind of a slower pace. Another thing is I try to date men who are senior, and often even with seniors I have difficulty keeping up with a lot of them, especially if it's an active senior. <RA>

R- So you're, you actively try and date like, more senior men. And can you tell me more about that? <PA> Like, like, is that, it's, that's, it sounds like that's a choice.

P- Yes, it's definitely a choice. <RA> And it's very difficult. There aren't too many of them available, especially in my area. So the opportunities are much more with the younger ones and, and, that definitely becomes, too much of a challenge for me. <RA>

R- OK, when you say too much of a challenge, umm what do you mean by too much of a challenge?

P- It would be too difficult to keep up the façade of me being of normal health. <RA> It's not something that I think men find attractive. <RA> Unless they have their own ailments <RA> and then I think that we'd be compatible. <RA>

R- So, you said that you don't, this isn't something that you feel like men feel is attractive. Have you had that experience before, like what, what makes you think that?

P- Oh, definitely. I had a live in situation <RA> and he found it very difficult to understand. <RA>

R- He, ah, he found it difficult to understand.

P- He was aware of my condition, but he was also in denial.

R- OK, so like he didn't, he didn't kind of, what do you mean in, in denial, I guess? Like, he didn't understand what was actually happening, or he just refused to believe what was happening?

P- Yes, even when I was in bed alot he refused to, acknowledge, the reason why.

R- OK so you just kind of, would it be fair to say that he just, he didn't legitimize your illness at all, like he didn't see it as, as a kind of, <PA> OK. <PA> OK, that must have been very hard for you.

P- Yes, it was.

R- OK and how long did that relationship last, if I can ask?

P- Well it's actually someone I'd known for a long time; <RA> an old boyfriend. We got back together <RA> and the live-in part was around six months. <RA>

R- OK, umm, and so you kind of hit on something that is really interesting, as a researcher, for me, umm, it's this invisibility, and I mean, it's, it's not like other physical disabilities <PA> umm, where you can kind of see, you know when someone has no leg, it's very obvious <PA> why they're having difficulties but for people with chronic pain there is that kind of indivisibility that I keep hearing about. And so I'm interested in how that's, how that experience has gone for you. Umm, so it sounds like it was a real problem, for you, in that live in relationship you kind of talked about, <PA> umm, <PA> like what, what did you feel when, like did he question you?

P- He also had his kids were living with us, and of course he put them first, <RA> despite my condition.

R- So, that was like (interrupted)

P- It was difficult.

R- (Finishes) an added stress?

P- Yes.

R- OK, OK, uh, and when you, when you say he put them first, like what, can you give me an example just so I can get my head around that?

P- Even when it came to things like the air conditioning, one of us thought it was too cold and the other one was too chilled, and he took his kid's side.

R- Oh, OK. And from my, from my limited understanding of fibromyalgia, umm, that, that can be a real problem. <PA> Ok. So, he doesn't sound like he was very considerate to your fibro.

P- No, not at all. <RA> It was also very difficult watching him do exercises in the morning.

R- OK, it was difficult to watch him?

P- Yes, it 's difficult to watch somebody being active when you can't be that way yourself. <RA> So it's kind of irritating. <RA>I'm not a morning person either, and that's another thing that's a problem .<RA> You always have to explain. I'm constantly explaining to people that I'm not a morning person. I have to make my medical appointments in the afternoon. <RA>

R- Well I hope this isn't too early for you.

P- No, no.

R- Umm, OK. So, I guess, umm, we've talked a little bit about, this one kind of six month live in relationship that, where you'd known him before hand. In terms of the, like you said, you're available to date and casually dating <PA> So, what does, what does an average date look like, for you.

P- Usually it's going for a bite to eat or a movie. <RA> I usually avoid the sex part. <RA> I don't let it get to that part anymore.

R- You don't let it get to that point? So you... stop the relationship before it gets there?

P- <RA> I still have some platonic relationships, where we date, but the ones that pressure for sex, I've dropped.

R- OK and is that just because it would be, it would be too much for you?

P- Yes. <RA>

R- OK, So I, um, that's one I wanted to ask you about was; how does, how do you negotiate physical touch in, in your kind of new relationships?

P- There was one date I went on, I can't remember if it was the first or the second date, but he was already, too touchy-feely in the theatre during the movie and then my red flags started going up. It was too soon for him to be doing that; I thought he was taking too many liberties.

R- OK, fair enough, OK. Umm, so in terms of, you know, your fibro affecting physical intimacy, umm and touch and I mean physical intimacy, I think people automatically think of sex but can be a lot, you know there can be a range of things right? So like, in terms of being hugged or kissed or any of those other kind of physical behaviors, umm...

P- Hugging is fine, and kissing, not French kissing, but kissing on the lips or cheek, or <RA> just short pecks on the lips, that's fine. <RA>

R- OK and so how would you say your fibro has affected your kind of desire, or interest, or motivation for those physical parts of relationships?

P-It's not easy because it's all over the media, <RA>although sometimes I live vicariously through it, and other times, it's a turn-off. <RA>

R- It's kind of, and it's, why, why is it, like what is it about it that's a turn off for you?

P- Everything is sexually-based, such as ads or fashion, <RA> which is geared to attract the opposite sex, but as you get older you kind of tend to dress more for yourself than for attracting a male. <RA>

R- OK, OK. Umm, so, maybe a little bit of a different angle, umm, so, how does your fibro affect the kind of value or importance that you place on physical intimacy in your relationships?

P- The value...

R- I mean you talked a little about how the media definitely has placed an emphasis on the physical parts of relationships but how is your fibro affected how, the value that you put on the physical parts of your new relationships?

P- If you really want to get graphic, if I was to become sexual in a relationship I would probably choose a premature ejaculator, one that would, (laughs) expect very little from me on that end. <RA>

R- And that will kind of shorten the experience, is that, am I getting the kind of...

P- Yes, <RA> definitely. <RA>

R- Umm, and so how, this is kind of a, going around again, umm, in terms of like, how does your fibro affect your feelings as a desirable attractive woman?

P-It definitely cuts into my self-esteem. <RA>

R- OK, what do you mean?

P- Before I went on the Fentanyl patch, it was a lot worse <RA> because I was always taking Codeine tablets with caffeine, <RA> and that was affecting my stomach too; but the Fentanyl patch is a lot milder and it's really got the pain under control. There are times when I have some really good days, especially in the summer months <RA> and in the winter, I tend to hibernate. It's a lot worse when the weather's bad, and even with overcast weather it's a lot worse. <RA> I would say that there's more bad days than good. <RA> Even dating tends to be more so in the summer months when the days are longer. <RA>

R- OK, so that it's kind of (interrupted)

P- Or holidays. I tend to start dating around the holidays too, so that I'm not alone. <RA>

R- OK, so around things like Christmas and Easter and...

P- And New-years...

R- And New-years...

P- Yes,<RA> and birthdays. <RA>

R- So those dates kind of motivate you to seek a partner.

P- Yes.<RA>

R- OK, OK and so, I guess like, how, if you're having that motivation, you talk a little bit about how it's affected your self-esteem and I wanted to ask you more about that, so like what, when you say it's affected your self-esteem, what happens?

P- There was a recent date on which he started asking me a lot of questions about what physical things I like to do, <RA> and I'm limited to yoga and walking. <RA> He was pressuring me about sports and things that are physically active, including playing pool. I don't even want to play pool, <RA> because I'm just not used to <RA> moving muscles that I'm not used to moving. <RA> So it's very difficult for me to do activity dates. <RA> I tend to stick to wining & dining and movies --<RA> the passive activities. <RA>

R- Ok, and so him kind of bringing all these things up that you wouldn't...

P-He was aware of my condition and yet he continued to ask me those questions which I thought was very... unaware?

R- Ignorant?

P- Yes! (laughs)

R- (Laughs) yeah. OK. Hmmm, and so that, that must have, kind of pulled some strings or, you know, pushed some buttons for you?

P- It totally turned me off.<RA> I knew it wasn't the right person for me.

R- Right Ok. Umm, and so, you know, we've kind of talk, touched on it a couple times that your, your fibro is kind of up-im, it does have an impact on your ability and willingness, umm, depending on your, you know, what your feeling on that day, to participate in the typical activities, umm, so like going to a movie or going to dinner seems to be OK, but you know, these really active things that some people want to do, are just not on the radar. <PA> I'm, am I getting that right?

P- Exactly, <RA> yes.

R- OK, umm, hmm, just looking here, you, you've said a lot of really interesting things, umm, I'm very interested in, in your reaction to this person who knew, who you said he knew about you condition, <PA>

umm, and then continued to say things that were not consistent with him knowing about your condition. Like <PA> what, what type of emotions does that pull out of you?

P-I couldn't believe he was asking me those questions. He was totally aware of my condition, but maybe he didn't understand it, or he wouldn't be asking. <RA> Or was he that forgetful?

R- Right, OK, alright. So not a good feeling...

P- No.

R- (Continues) to be fair. OK. Umm, and so you talk about how he, he knew about your condition, w-uh, when do you normally tell people that you have fibro?

P- Sometimes I don't tell them. <RA> I can't remember why I did tell him. Maybe because he was a senior already, and so I felt it was OK to tell him. <RA> You know, often when they are senior they say "oh, I look much younger," or they try to act much younger, but I want them to act their age <RA> in my in my case. <RA>

R- And i-is that, like, is that the reason that you date more senior men, is because, they, is that the characteristic you're looking for?

P- Yes.

R- OK, so it's like you're on equal footing. <PA> OK. And so these older men who try and be much younger are kind of missing the point? Is it fair to say that?

P- (Laughs) which is most of them. <RA>

R- OK, umm, so how do you tell someone that you have fibromyalgia?

P- It's not easy. <RA> I have to really trust the person first. <RA> So I would tend not to reveal that information. <RA>

R- OK, so that, that brings up a number of question for me because, I mean, this is very interesting, there's not a lot about, when I, when I was trying to find out, umm, like how do you, how do you, tell someone that you have fibro or a condition like that? Umm, there's not much (interrupted)

P- It may come up when they're challenging you to do something that you don't feel comfortable doing; that's probably when you would bring it up. <RA> To give them the reason.

R- Right and you said you kind of have to, you feel like you really have to trust someone. <PA> OK, so how has that gone for you in the past, when you've told people about your fibro?

P- They might act OK with it at first. But as you go along it creates a bias. <RA> I think it 's probably a normal thing for them to be on the lookout for someone who's healthy <RA>to date, rather than a disabled person.

R- Right, OK. And so, when do you normally tell people? Do you tell them like, right away, do you tell them when things...

P- No, I don't tell right away. <RA> Only when there is a trust situation. It's a defence mechanism. <RA>

R- OK so is it fair to say that you either tell them when you trust them that they can handle that information or when you, you feel like you're kind of backed into a corner? <PA> OK, umm and so those, those are two different situations that maybe have two different outcomes?

P- Exactly.

R- Ok, what... can you tell me about that? Like, what, what has been the response, I guess?

P- Another ironic situation is that one of my boyfriends, who's still like a platonic friend of mine, an ex-boyfriend who happens to be a lawyer but on the insurance side. He's always doing fibromyalgia cases, but you think he would be empathetic to it, but he isn't really, because it's a conflict of interest.

R- OK, and what...

P- He is always doing those cases and acts as if he knows everything about it, but he doesn't. <RA>

R- So even someone who's kind of immersed in, in, legal cases, he still doesn't really understand?

P- Right.

R- And I-I'm, I mean I want to get it that difficulty, like what is it like for you to try, try and convey your experience to someone else?

P- Sometimes if they don't get it verbally, I might try something written. <RA> But people tend to be visual and it's very difficult because it's an invisible thing. <RA> It doesn't really show. Disabilities are not always handicaps. <RA> So it's kind of a disadvantage that way.

R- OK, so, I guess like, how has the fibro affected the way that, umm, you're perceived by new or potential romantic partners?

P- Unless they have it themselves, I don't think it would be an asset. <RA> I would need to find somebody who has his own disabilities, I think, or is much older. <RA>

R- Ok and how has it affected the way that you view yourself as a poten-as a potential romantic partner?

P- I wouldn't choose myself, definitely not, if I was aware (laughs) <RA> of what I was feeling, or going through. <RA> Probably things wouldn't happen, unless there was some drinking involved, and then there would be less pain. <RA>

R- And so it's like if there, if there was that buffer, I guess <PA> in between that made it more manageable?

P- Yes.

R- OK, and so in terms of, we talked a little bit about this, the relationship that you, with the six month, live in relationship you had, <PA> umm, looking back. Umm, and now looking forward what do you see in your future in terms of dating?

P- I try to be hopeful and optimistic. <RA> It isn't an impossible thing. I still have potential meetings and there's so much going on with the online thing these days, <RA> it's not really that difficult to get a date. <RA> I'm still somewhat attractive despite my age and disabilities. I don't have much of a problem in attracting the opposite sex. <RA>

R- Now you mentioned online dating umm, I'm assuming based on, what you've said that it's not something that you would put on an online profile, is that you have...

P- Oh, definitely not. No. <RA> Unless there was a specialized dating service like I've seen on T.V. It's in England where they've got a disability matchmaking service. I think that's a really good idea. But, I haven't seen anything like that here. <RA>

R- Hmm, I, I, haven't either. Umm, but it would be very interesting. I didn't know they had one of those in the UK, but it would be very interesting. <PA> And so, umm, I guess that leads me to another question of what, what would your ideal partner look like? Or be like? Or like, what, if you could kind of imagine your ideal partner, can you tell me about them?

P- Probably older, definitely senior, mature, non-athletic. (laughs) <RA> Probably more cerebral, like the Woody Allen type. <RA>

R- Umm, and what, what do you see in your future in terms of, umm, some people have particular expectations of what a man and a women, umm will be like in a relationship, or what a partner should be like in a relationship. Umm, so how has your fibro kind of effect your expectations for yourself in a relationship?

P- I'm actually much better off living as an independent than living in a partner situation, unless I was with someone older with his own disabilities. <RA>

R- OK. Umm, and I guess, what, what would, how has your fibro affected your expectations for your partner in a relationship?

P- I think it would be a pleasant surprise if I did meet somebody who could live with it. <RA> But I don't really expect too much from them. <RA> That's why I keep that on the dating plane rather than a more serious relationship, <RA> because it's safer emotionally. <RA> You have a few hours to relate and then you can go home. <RA>

R- OK, so it's safer, like you can... <PA> Am I, am I, I just want to make sure that I'm understanding, uh, you're experience here in that, when you safe it's safer it's like, you can escape.

P- Exactly.



R- OK, and so, would, is it fair to say that your, at this point. You're not really interested in, kind of a, the live in nuclear family type relationship.

P- I'm not ruling it out, but it's not an expectation I have either. <RA>

R- Ok, Ok. And so, ah... just looking, you've given me a lot of really great information. Umm. And so I want to talk a little bit about that invisibility factor because that seems to be something that has come up a lot for you. Umm, so do you think, I guess, first off, if you could, would you, would you make your fibro more visible? Or would you change, change it so that it was more visible so that people knew?

P- No, because then I don't think I would feel good about myself either. I can live more with myself if I look in the mirror and I appear normal. <RA> I don't know if I could live with myself if I had to get around on a scooter kind of thing.

R- OK, OK. Umm...

P- I think that would be very difficult; I just don't know how people do it. <RA> But I guess they often don't have a choice, later on. <RA>

R- Umm, yeah, it's a, it's a I think it's a very difficult situation and I mean I've, I've done a little bit of, some of the reading in this field where some people have said that with the invisibility of their condition that they would almost rather at some points that it be visible so that people, it's more believable. <PA> You don't have to justify it.

P- I guess I'm sort of torn. Sometimes I do feel that, but I don't know if I could really live with myself if I looked lhandicapped. <RA>

R- OK, hmm, and so you know, you say... we talked... (interruption)

P- My mother was <RA> the same way. Until the very end, she refused to use a walker. It's a pride thing. <RA>

R- Ok, and so we, you know, we've talked about how, how you tell people that you have fibro, I mean so you just come out and say it, or is there like a lead up to it or?... Cause it's not something that we just overtly see, right?

P- Right, it's not something that I normally intend to really tell people unless I have to.

R- Right. OK, umm, hmm.

P- It's a secret.

R- OK. I mean, like what's, what's it like for you to have this secret? To be you know, in that situation of going on a date with this secret, what's that like?

P- It lets me pretend I'm normal for a few hours.

R- Hmm, OK. Normal as in like, not, what-what's normal for you I guess?

P- Not having any physical ailments <RA> and being healthy <RA> and desirable. <RA>Having people want to be in my company and not being a burden. <RA>

R- OK. And, and that's, so it sound like your saying that going on, you know going on these dates and having someone who's interested in you, it kind of gives you an escape from your kind of every day, is that right?

P- Yes it does.

R- OK. Well that sounds like a, a good thing. (laughs)

P- <RA> I don't know if it's reality, <RA> but it gives a person a bit of a social life, at least. <RA>

R- OK, and so what, umm have you been on any dates, recently?

P- I had a couple of dates set up which I cancelled or tried to reschedule at the last minute because the weather was bad that day and so I asked for a rain check. <RA>

R- And is that...(interrupted)

P- I tend to not want to go out in the rain, <RA> because the pain gets worse then. <RA> So...

R- And so it's like trying to minimize the, the bad days?

P- Right

R- OK. Hmm, and you said you haven't rescheduled, and does that happen often?

P- I would say it happens fairly often. <RA> It depends on the weather too, though, <RA> Now its fall and the weather's getting a bit worse. <RA>

R- Ok, umm. And so we- we've talked, I have this kind of idea now of, of how your relationship or this experience is, you know, a basic idea of what your experience is, is kind of like, umm and I want to go, kind of before we, before I forget basically, umm back to that point where you said that you stop your rela- like you basically break off, like, am I right in thinking that you break off relationships before they can get too serious?

P- Yes.

R- OK, can you tell me more about that? Because that's really interesting... I want to understand it more.

P- It is?

R- Well it's interesting from a research perspective, umm, but I want to, I want to make sure that I really understand that experience for you <PA> so can you tell me more about like what, how that happens?

P- There tend to be these lonely hearts guys, that are, whether they are widowed or divorced. They want to replace their spouse and they rush into a live-in situation right away and that's too intense for me. <RA> I need something that's not so rushed and intense, and I tend to need my own living space too. In my previous live-in situation, he was on top of me with everything and it was very irritating. <RA>

R- Yeah, it sounds like it would have been really hard, especially, you know, if your coping with your fibro.

P- You need a lot of relaxation, even when you first get up, you want to have your coffee and read the paper, and if somebody doesn't understand that about you and wants your attention, that's...it takes me a few hours to get going and I don't even want to talk to people until I feel better and I'm in a better mood. <RA>

R- Ok, and so how would you tell, how would you tell that partner, umm like uh, was it a day to day thing where you, you know how, how did you convey that?

P- Often it wasn't even communicated. It built up and escalated and then became a hostile environment <RA>

R- OK. And so it was kind of this, unspoken "get away from me, <PA> I need my time." <PA> OK, OK, and he, it doesn't sound like he was really understanding what was going on with you.

P- He tends to be a very competitive type of person, <RA> so he was always competing too. <RA>

R- And so, I mean, it sounds like, is that, am I right in thinking that that's kind of the most serious relationship that you've had in a while?

P- Yes.

R- OK, and, and that ended, and have you had any other kind of steady relationships, I guess is a, is a way to think of it?

P- I have steady friendships. <RA> I still have the ex-boyfriend. We are now platonic and we date occasionally. I also have met a person with similar interests through a senior dating sight and we are just friends. It hasn't gone to anything else and that's comfortable for me right now. <RA>

R- And, and is it, am I right in thinking that that's kind of what you're looking for?

P- Yes,<RA> I think so.

R- OK and so that, that physical part, that you know, I think of that as the twenty year olds who are you know, <PA> very much focused on the physical parts of relationships <PA> but that may not be the central focus for you, am I, am I right in thinking that?

P- Exactly. The older ones tend not to pressure too much, if you're lucky enough to find some of those guys. <RA> Which I have now, <RA> yes.

R- OK, and so, you know, if you were dating one of these people, and things were going well and you started to feel that, you know that they wanted to have that physical part of the relationship how would you respond to that?

P- I dropped the last one who did that to me. <RA> I was willing to pull him at arm's length and take it slow but he wasn't having any of that, he was way too intense and way too impatient for me. <RA>

R- OK, and so there was that, kind of pressure that you talked about <PA> and that's a big turn off for you its sounds like. <PA> OK. OK, so I guess you've mentioned several ways that your fibro has affected your experiences in new romantic relationships, umm how do you feel about these, I mean this may be a bit redundant but, how do you feel about these effects on your new relationships?

P- It was a lot easier when I didn't have this obstacle. <RA>

R- So maybe, which, which part (interrupted)

P- I don't know if it's an age related thing too, <RA> because it seems like everywhere in life, once you hit a certain age, even when it comes to jobs, they are going to hire the twenty year old over the forty year old. <RA> So there's that bias and then having a disability on top of that is a double jeopardy thing. <RA>

R- OK, so I mean, of all the things we've talked about umm, which, which of these aspects or which part of the fibro umm, do you think is the most challenging or stressful in terms of your relationships?

P- Which?

R- Mhm, so like, if you think about the symptoms that you experience with fibro, umm I miss, it sounds like there's, there's a pain component; do you experience any other symptoms?

P- Reactive depression or resultant depression. <RA>

R- So you see that as definitely, as result of your fibro situation?

P- Yes.

R- OK. Some people have talked about fatigue?

P- Oh definitely fatigue. I have the chronic fatigue with the fibromyalgia. <RA> <RA> That's a big problem, with the mornings and everything. <RA>

R- And so in terms of your, you know when we talk about, we've talked a bit about your dating experiences umm, would you say, what would you say is the, is the, has the biggest impact of those symptoms, like if you had to identify one, which would you say has had the biggest impact on your dating experiences?

P- The fatigue because I have to get out on the date in the first place and the fatigue stops that. For example, I had wanted to go for a late brunch <RA> and my date suggested to meet at 11:00am. That's not late brunch, that's breakfast. (laughing)

R- Yeah, brunch for me is like one o'clock (laughs.)

P- Yes exactly. I have to do it with doctor's appointments as well. It is so ironic. <RA> I'm always switching the morning appointment hours to afternoons. <RA>

R- Yes the rheumatologist who wants to see you at 8:00am.

P- Exactly! Exactly.

R- (laughing)Yeah, OK. Umm, and so that, it sounds like the fatigue then is kind of the, if you had to pick one, is the kind of, the kicker, in terms of actually getting to the date.

P- <RA> Like Woody Allen said, "ninety percent of success is showing up". If you can't show up for the date, you're not going to have a date.<RA>

R- That's very accurate. I've never heard anyone use that quote before but that's very accurate. <PA> You're right, OK. Umm, so which of these kind of factors that we talked about again do you feel like have kind of improved or worsened the influence of your fibro on your, on your dating experiences? So do you feel like, has there been anything that ever, that's imposed your experiences?

P- I don't think anything physically has improved but, maybe my attitude or optimism or hopefulness. <RA> I call myself a hopeFUL romantic. Not a hopeLESS one, like you hear most often. <RA>

R- I like that, a hopeful romantic, that's clever, I like it. OK, umm, and I guess the, the kind of, one of the, one of our ending questions, umm, one of the few here left I have is about, again ties to kind of that invisibility factor umm, in terms of like having to explain to someone that you have this condition and like what, I guess, what-what are the emotions of the experiences that you have when you're telling someone about this experience, or that, you know, that you have fibro?

P- I kind of expect rejection, to tell you the truth <RA> and if, if it's anything other than that it's a pleasant surprise.

R- OK. And why is it that you expect rejection?

P- I don't think it's a very attractive thing for someone. I think a guy would have to be pretty desperate because, there's so many people out there, why would they want to play nursemaid to someone. <RA> Unless they have their own disability, then they can be on an equal plane. I think that's going to be the most compatible situation. <RA>

R- And so, would you say that that, like, when you're, when you're explaining this to someone that's like an anxiety provoking experience? It sounds stressful.

P- Yes, definitely. <RA>

R- And is that, is it fair to think that that, that kind of, because fibromyalgia's mostly invisible, like you can't, pain is very subjective, right? Like you don't, you see someone have their leg fall off then you know

it's going to be painful but for people with fibro it sounds like, you know, you have to explain it and so that, would you say that, that need to, to explain what's going on, it's kind of a deterrent?

P- Exactly. A lot of times people don't believe you either.

R- Right, have you had that, you've had that experience it sounds like.

P- Definitely, yes.

R- Can you tell me about one of those experiences or, you know the one that comes to mind?

P- I don't know if it's happened that much in the dating life. It's definitely happened with employment <RA>more often.

R- OK and what happened?

P- If they're aware of the disability then it kills the employment because it creates a bias. <RA> It creates a bias all around, even with the dating life. <RA>

R- And so you experience, and when you say a bias, what do you mean by a bias?

P- Reacting to the damaged goods. <RA>

R- So it's def-there's a lot of kind of negative connotation associated with, is that fair?

P- Yes.

R- OK, OK. So it sounds like that's, you know we, we talked a little bit about obstacles and it sounds like that may be an obstacle that people with fibro experience as well.

P- Yes.

R-If that kind of, is that, is that fair to say? Am I getting that right that, that not being believed is kind of a, a big worry and an obstacle <PA> to overcome? <PA> And so how does that, how does that translate I guess, cause dating is a bit different that being at work right?

P- Yes. I think that they would definitely lose interest if they knew. Or they might wait till someone better comes along, <RA>and you know it's just a matter of time before somebody better comes along. <RA> Somebody healthy that they can do their activities with, if they want to do activities. <RA>

R- Umm, so kind of the last, or one of the last questions that I have here is that umm, have there been any other major events in your life, so things like an illness or a death in the family, umm, that could have impacted your dating experiences since you've developed fibro?

P- I've lost some family members but that's actually improved my dating life because I've had to fill that gap, such as the need to be with someone during the holidays,<RA> and that makes me available to the dating scene.

R- Right, so it's kind of increased the motivation to have someone around?

P- Definitely. Yes.

R- OK, umm so we've come to the end of the interview, is there anything that you'd like to tell me about that I haven't cover, cause I mean this is your lived experience, I'm just hypothesising but, or guessing but is there something, anything that I haven't covered that you feel like is really important for me to know?

P- I don't think so, it seems to be pretty thorough.

R- Lots of questions (laughs.)

P- Yes.