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Phoenix Ink: Psychodynamic Motivations for Tattoo Attainment by Survivors of Trauma

A thesis submitted in partial fulfillment
of the requirements for the degree of
Master of Social Work

by

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Southern New Hampshire University
Bachelor of Arts in Psychology, 2013

May 2017
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This thesis is approved for recommendation by the Graduate Council.

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Abstract

Tattoos adorn people from all over the world and date back as far as the Stone Age. Tattoos adorn people from all over the world and motivations for tattoo attainment have been studied recently. Still, there remains limited research on the potential therapeutic properties of tattoo attainment, particularly for survivors of sexual trauma. The purpose of this study was to investigate the experience of the tattoo process for survivors of sexual trauma and their motivations for tattoo attainment. This qualitative exploratory study interviewed both survivors of sexual trauma (N=10) and tattoo artists (N=7) to gain a wider perspective on the motivations for tattoo attainment among survivors of sexual trauma. Common themes of tattoo attainment emerged among trauma survivors, with the most prevalent being reclamation, catharsis, and tattoo acts as personal narrative. Among tattoo artists the common themes were that tattoos act as non-normative expression and have therapeutic qualities. Further research should include diversified populations and a larger sample size. Implications for social work practice include utilizing tattoo for narrative exploration and rapport building.

Acknowledgements

I would like to thank quite a few individuals without whom this project would never have come to fruition. First and foremost, my husband, Justin, without whom I may never have even pursued an academic career; you are my foundation and my balancing pole without which I might have fallen a long time ago, and I love you. You believed in my capabilities long before I did and I am so grateful you saw that in me.

This project was born of a bad-situation-turned-amazing, and as such without the support of those who believed in the power of the phoenix it would not have transpired. Dr. April Rand, without your investment, guidance, patience, and willingness to oversee this project it would not have come far. I truly appreciate your mentorship and your integrity and dedication to students and to spread and share your knowledge so that we all grow. Thank you so much for investing in this project and me, your insight has contributed beyond measure. To Glenda House, I will always appreciate and value your insight, and will be forever grateful for meeting you on that first day on the path to grad school; finding those who speak “your language” is empowering and can alter a person’s trajectory forever- your Richard Dawkins mug will always be a symbol of persistence and hope for me, and I am so thankful for your part in my journey. To Ananda Rosa, my appreciation for your support is beyond words. You knew about this project before it was anything more than a thought in my head and your continued enthusiasm and investment in my ideas shaped my experience in more ways than you will ever know. Your uhae shines bright, aloha nui loa.

Finally, I thank all of my friends and family that were integral to this project by way of support and comradery. To Courtney Burnett, thank you for being the friend I can sad-clown laugh with and for always cheering me on through grad school, and for being the person I can be

real with, a much needed support in a new town. Thank you to my entire cohort, you are all the most supportive and inspiring bunch of people I have ever met and your support is immeasurable. Finally, thank you to Bonnie Sue and Jim Henson, my in-laws, who have become my chosen family and have taught me how effective unconditional love can be, and for including me in that circle- without you two my work and our family would not be what it is.

Dedication

This study is dedicated to every person that has ever had to transform, reclaim, and become empowered in the wake of sexual trauma. May you find what heals you; be it therapy, art, nature, or the perfect tattoo.

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Chapter 1- Introduction

Background

Despite long held societal stigma in Western countries, tattoos adorn people from all over the world. The art of tattoo has amassed a large following and includes people from a multitude of cultures, socioeconomic backgrounds, and artistic communities. The reasons people get tattoos are as varied and diverse as the people who get them, however there are often identifiable trends of motivations for tattoos, and a main component in obtaining a tattoo is psychodynamic (Grumet, 1983; Wohlrab, Stahl, Kappeler, 2007). Be it to signify identity formation, mark a life transition, or support group involvement, motivations for choosing ink are steeped in our personal and cultural values and often signify a personal, intentional message (Carmen, Guitar, and Dillon, 2012). Tattoo is a beloved art form, and the power of art in general can hold a large influence on alleviating traumatic experiences, either by merely existing for consumption or as art therapy (a therapeutic process) that can be used as an intervention for an array of mental health and behavioral issues (Hutyrova, M., 2016).

Connecting the physical adornment of art as a personal expression to an act of therapeutic processing is not a large leap when considering what may be gained by the client during the process of choosing, assigning meaning to, and obtaining a tattoo. There are a multitude of therapeutic uses for tattoos that are becoming more mainstream; breast cancer survivors who have had mastectomies are using tattoo as a way to decorate the area where their breasts once were (Kyung Kim, 2015) and a television show, *Ink Shrink*, uses a team of therapists and tattoo artists to assist clients in getting “blind” (they do not choose them beforehand and the team chooses the design based on therapeutic value) tattoos to help overcome areas where they feel stuck or powerless (Van Duser, 2014). Consequently, the stigma that once was associated with

tattoos is lessening and the therapeutic value of tattoo work is becoming more of a mainstream idea.

Prevalence and Effects of Sexual Violence

Sexual violence against women is a significant issue in the United States. Although definitions of sexual violence vary between cultures and ideologies, it is described by the CDC as “any type of sexual contact where consent is not obtained or given freely” (CDC, 2015). As such, childhood sexual abuse (CSA), rape, sex trafficking, voyeurism, child pornography, and unwanted sexual comments and advances/street harassment fall under the umbrella of sexual violence (CDC, 2015). Childhood sexual abuse is pervasive in the United States, 20% of girls and 5% of boys are victims, and those numbers only represent reported cases (National Center for Victims of Crime, 2012). There are 293,066 rape victims in the United States each year, meaning there is one sexual assault every 107 seconds in the United States. (Rape, Abuse, & Incest National Network, 2015).

The effects of sexual violence are extensive and expand across the lifespan of the victim. Those who are victims of CSA are more likely to be raped in college and can experience higher rates of depression and suicidal ideology (Gaon, Kaplan, Dwolatsky, Perry, & Witztum, 2013). Similarly, victims of CSA have higher risks of developing anxiety and substance abuse in adulthood, higher rates of problematic drinking in adolescence (McClean et al., 2014) and can have lower self-esteem (King & Wardecker, 2015). The prevalence of post-traumatic stress syndrome (PTSD) among survivors of sexual violence has been the focus of more recent research, with recent studies indicating higher rates of PTSD among sexual violence survivors (Gaon et al., 2013).

Objectives, Purpose, and Social Work Relevance

This original research aims to gain a more in-depth understanding of tattoo motivations among survivors of sexual trauma. This approach aims to understand why sexual trauma survivors attain tattoos and if there are therapeutic benefits that arise from the process of choosing, designing, and obtaining tattoos. Due to the extensive history of tattoo and the fluctuation and metamorphosis of its alignment with the cultural context it is within, this study is grounded in symbolic interactionism. The historical use of tattoo and its use in ceremonial and spiritual context lend itself to be readily examined through the lens of social construction, meaning-making, and the role interaction plays within our cultural dimensions (Atkinson, 2015). Additionally, the subjective understanding of tattoos bestows a necessity to analyze narratives as opposed to quantitative data in the pursuit of understanding the meanings that have been derived for the individual through their life-span (Atkinson, 2005). The aims of the current research is not necessarily to advocate for tattoo as an accepted form of therapy, but rather to examine motivations for attaining tattoos and for existing tattoos to be viewed as personally valuable for clients by clinicians. Moreover, this research seeks to explore the ways in which these motivations may shape therapeutic practices among mental health providers.

The implications of understanding the personal value of tattoos to clients are important, as it aims to reshape not only the stigmatization of tattoo in itself, but also to develop a framework wherein that understanding can strengthen the therapeutic process for the client. Considering the frequency in which sexual violence occurs, as well as the increasing frequency of tattoo attainment, the findings of this study aim to help practitioners develop a more eclectic, historical, and possibly generational understanding which allows them to consider the meaning and potential therapeutic value of tattoos in their work with survivors of sexual violence.

Chapter 2- Literature Review

Explorations into coping of sexual trauma survivors requires a better understanding of the mental health consequences of sexual trauma and traditional therapeutic modalities that are used for overcoming those effects. Similarly, discussions of tattoo, its potential therapeutic value, and the possible alignments with therapies for sexual trauma, require an overview of tattoo and its history. The following chapter will delve into the mental health consequences of sexual trauma with particular emphasis on anxiety and Post-Traumatic Stress Disorder (PTSD). Additionally, this chapter will discuss the traditional therapeutic approaches used with survivors of sexual trauma with particular attention to the mind-body connections of trauma and healing from trauma. Then this chapter will switch gears to discuss the history of tattoo, the motivations for tattoo attainment found in current research, and finally, the ways in which tattoo may align with traditional therapeutic treatments for survivors of sexual trauma.

Mental Health Consequences of Sexual Trauma

Mental health risk factors elevate with experiences of sexual violence and can contribute to lower relationship satisfaction in adulthood, sexual development issues, and influence overall physical health (Easton, Coohy, O'leary, Zhang, & Hua, 2011). In some cases, women who have been victims of CSA and become pregnant have higher risks of prenatal issues as well as higher rates of complications during birth (Clark & Smithe, 2011). Often times these women have complex emotional responses to childbirth, creating the need for sensitive prenatal and birthing care that often times is overlooked (Clark & Smithe, 2011). Similarly, survivors of CSA are less likely to seek out medical care, as procedures in health care (such as undressing, pain, non-intimate touch) can trigger memories of abuse (McGregor, Gautam, Glover, & Julich, 2013). Often times this hesitation to seek medical care can result in higher instances of sexually

transmitted diseases and higher rates of human papillomavirus (HPV) which can later increase the risk of cervical cancer (McGregor et al., 2013).

Regardless of the potentially devastating effects of sexual violence at both personal and societal levels, there still remains a proportional lack of funding for therapeutic services (when compared to heart disease, cancer, diabetes and HIV/AIDS (Waechter, 2015) and a shortage of therapists who specialize in sexual violence, particularly within narrower specialties such as child sexual abuse or sex trafficking (Chahal, 2013). Thus, it is important to consider the use of eclectic therapeutic models to allow mental health professionals to better serve diverse populations (Pack, 2011) and extend research to include more varied and non-traditional therapeutic methods to support clients in the process of healing from sexual violence and other forms of trauma. The next section will explore more specific mental health consequences of sexual trauma, such as PTSD and anxiety, and the connection of mind and body needed for treatment of those two mental illnesses.

Mind-body Connections, Posttraumatic Stress Disorder, and Anxiety

Exploring PTSD with sexual assault survivors. In more recent work, researchers are discovering that between 21-50% of survivors of sexual assault (SA) and childhood sexual abuse (CSA) reach diagnostic criteria for Posttraumatic Stress Disorder (PTSD) (Ullman & Phillipas, 2005). Additionally, 10 million women in the United States have a history of relational violence and 30% of those women develop PTSD (van der Kolk, Stone, West, Rhodes, Emerson, Suvak, & Spinazzola, 2014). Research has also found the longer a woman waits to disclose the assault or abuse is correlative with a higher prevalence of PTSD symptoms, although that does not seem to be the case with men (Ullman & Phillipas, 2005). Although, PTSD tends to be associated with combat or natural disaster, sexual assault and childhood sexual abuse cause

similar disruptions in neurological patterns as it causes a situation that is equally threatening to the victim (Hendricks et al., 2010). Consequently, a lot of research that focuses on treatment of PTSD leaves out additional complex symptomology more common with sexual assault trauma such as identity confusion, inability to trust or feel safe, lower self-worth, and the prevalence of conditions that could trigger re-victimization (van Der Kolk, Roth, Pelcovitz, Sunday, & Spinazzola, 2005).

The extent to which a SA or CSA survivor feels control over their recovery process plays a more important role in recovery than with other instances of PTSD (Ullman and Peter-Hagene, 2014). Additionally, since impulse and emotional regulation issues are a common symptom of trauma exposure, treatments that necessitate control of intense emotions and remaining focused on environmental or internal sensory input are effective (van der Kolk et. al, 2014). Researchers have found that yoga (van der Kolk et al., 2014) and guided meditation techniques, such as Transcendental Meditation (Barnes, Rigg, and Williams, 2013), can reduce PTSD symptoms, especially since they have higher retention rates, and both interventions enhance focus and emotional regulation. Since researchers conjecture that retention is a key component of effective therapy (van der Kolk et. al, 2014), a therapeutic process a client enjoys (such as yoga and meditation) of their choosing (control) might keep them from dropping out.

Hendriks et al. (2010) indicate that intensive exposure therapy is seen to have clinical significance in the reduction of PTSD symptoms for survivors of CSA and SA. Indeed, van der Kolk (2014) argues that exposure to stressful situations in controlled environments may provide relief from the stress that comes from maladaptive patterns created by trauma. Stress is a key component of PTSD, and traumatic experiences can alter the stress response of the brain (McEwen & Gianaros, 2012). After traumatic experiences, the prefrontal cortex, amygdala, and

hippocampus can maladaptively handle stress, causing everyday situations to be potentially stressful to an individual (McEewn & Gianaros, 2012). This maladaptive stress process can become a cyclic pattern, requiring an intentional re-set in order to become adaptive again (Sassi, 2011). Again, activities that increase intentional focus either inward, to build emotional regulation, or on external stimuli, such as breath or music, can be a powerful tool in overriding existing maladaptive stress patterns of the brain and formulate new pathways for optimal functioning (Barnes, Rigg, and Williams, 2013).

Sexual assault and anxiety. Among those who have anxiety disorders there is a much higher rate of individuals who have experienced childhood sexual trauma (Cougler, Timpano, Sachs-Ericsson, Keough, & Riccardi, 2010). A main component to alleviating anxiety symptoms is successfully altering the ways in which information has meaning assigned to it and replacing it with more productive, adaptive meaning (Bar-Heim, 2010). As such, cognitive-behavioral therapy (CBT), which effectively transforms the ways an individual receives and interprets information through relaxation, gradual exposure to threatening thoughts, and then re-aligning those interpretations with less threatening information, is the mainstay in treatment for anxiety disorders (Bar-Heim, 2010). A common technique used for anxiety symptoms is grounding, wherein the person attempts to calm themselves by regaining mental focus and regulate their emotions (Bar-Heim, 2010). Similarly, the new trend in adult coloring books, which creates a focused mental space requiring the person to be present with the moment and engaged, is a grounding technique that while has not been studied specifically yet, produces similar effects of other therapies that are evidence-based (yoga, meditation, mindfulness) (Chandler, Alexander, & Heaton, 2005).

Activities that promote self-actualization and self-development, such as yoga, mindfulness, and meditation, reduce anxiety symptoms (Chandler, Alexander, & Heaton, 2005). Further, Chandler, Alexander, & Heaton (2005) connect self-actualization to higher self-worth and control, two issues that existing therapies aimed at reducing anxiety in SA survivors focus on. Again, in the same fashion as with PTSD, the act of focusing on internal emotional control is effective in combatting anxiety symptoms..

Other treatments may promote isolated episodes of strong emotion that perhaps are thrilling and can even block emotional and physical pain due to the brain's release of chemicals that act similarly to morphine, indicating that controlled stress may help alleviate symptoms of anxiety (van der Kolk, 2014). This perhaps is related to the search for "painful" experiences that are pleasurable to some trauma survivors, the sublimation of emotional pain, whether it is sky-diving, running marathons, or even tattoo (van der Kolk, 2014). Grasping the possible relation of tattoo to therapeutic treatment requires contextual knowledge of the background and history of tattoo, which is discussed next.

Tattoo Use in Traditional and Contemporary Culture

Tattoos have been used in various cultures throughout human history, some skin markings identifying grief of a lost family member were seen in artistic depictions dating back to the Stone Age (Grumet, 1993). Defined as a physical adornment wherein pigment has been deposited into the skin (Oanta, Stoleriu, Irmie, Branisteanu, and Morarui, 2014), tattoo has a long history varying by culture. Egyptian mummies had evidence of tattoos upon their skin, and a variety of tribes in Native America use tattooing for sacred rituals that invoke spirituality and commemoration (Scwartz, 2006). Tlingit and Haida tribes utilized tattoo not only to indicate the

crests of their families, but also as gifts in which they distributed to noble chiefs and as ceremony to some children entering adulthood (Krutak, 2006).

In American Samoa, traditional tattooing, a Pe'a, is used as a rite of passage to signify the “knowledge of oneself” and to carry forward in life with that knowledge guiding a person’s behavior and influence (Culbertson, Agee, & Maikale, 2007). Similarly, Maori people of New Zealand adorn themselves with *ta moko*, brought from Polynesia, tattoo art that indicates a rite of passage, often consisting of curved lines and designs spanning the face (New Zealand Tattoo, 2017). Tattoo is proliferous in Polynesian culture, the word tattoo itself originating in Tahiti, derived from “tatau” and spread to Europe via Captain Cook after his travels there (Oanta et al., 2014; DeMello, 2000). Cook’s crew members began collaborating with the Natives of the islands that they visited to create more dynamic tattoos; the islanders were excited to share their art and expand their designs, and the sailors actively engaged in amassing tattoos (DeMello, 2000). Although this exchange spread the art of tattoo from the Polynesian islands to the western world, it also created a narrative that expressed that tattoo was primitive- a narrative that still resonates today (DeMello, 2000). .

The cultural genesis for tattoo may be vastly different for the “Western World,” however, tattoo still represents meaningful cultural shifts. The spread of tattoo to the western world was co-opted into an act of patriotism, shifting the narrative from the exotic to patriotic (DeMello, 2000). Sailors began to be tattooed as a way to signify their travels, as would high-society Europeans, however, the high-class perception of tattoo disappeared with the invention of the modern tattooing machine as tattoo became accessible to those who could not afford exotic travel (DeMello, 2000). During this time, “Freak Shows” which displayed tattooed natives as well as heavily tattooed westerners, began to proliferate (DeMello, 2000). These shows injected the

presence of “freaks” and cultural outliers into the narrative of tattoo, intersecting with a Puritanical belief that those with tattoos were “impure” (DeMello, 2000; Caplan, 2000). From this evolved the solid existence of tattoo in the United States, albeit subversive (DeMello, 2000; Caplan, 2000). There was a clear-cut class differential during this time, particularly for women, and tattoo became a symbol for belonging to the lower class or subversive groups such as prisoners, bikers, and other social outliers (DeMello, 2000).

Over time, with the infiltration of tattoo-related reality television and the use of the internet to spread designs, tattoo has begun to “mainstream” allowing it to be not just the crest of the counterculture any longer. Between 24-40% of the contemporary population in the United States, depending on age group, has a decorative permanent tattoo (Oanta et al., 2014; Mee-Mun, Janigo and Johnson, 2012). A cursory search on Pinterest for the key-words “sexual assault tattoo” yields hundreds of boards with designs intended to signify the survival of sexual assault (Pinterest, 2017). Further, more stories wherein tattoo acts as a therapeutic catalyst have become viral just in the last year of conducting this research, signifying the readiness of western culture to accept the role of tattoo as an expressive outlet, regardless of class or motivation.

Tattoo Motivations

Contemporarily, tattoos exist on every continent of the planet. Explanations for the existence and rise in popularity of tattoos vary drastically, yet there is little (proportionately) research on psychodynamic motivations for obtaining tattoos. However, there are some consensuses on tattoo motivation derived from examining historical uses of tattoo within traditional cultures. The primary motivation of tattoo attainment that has held over time is an act of strengthening the ego in the sense of identity development and individualism (Carmen, Guitar, & Dillon, 2012; Grumet, 1993; Schwartz, 2006). This individual expression espouses personal

symbolism and attachment to a deeper meaning of the artwork that is integrated in the person's identity formation and their roles in society and other systems (Carmen, Guitar, & Dillon, 2012; Forbes, 2001). Another constant theme among historical tattoo obtainment is to mark a rite of passage, either of a loved one as is the case of death, or of personal value such as entering a new stage of life such as adulthood or motherhood, or just significant past events (Carmen, Guitar, & Dillon, 2012; Grumet, 1993; Schwartz, 2006). An additional common motivation for tattoos historically and in modern day is the involvement in group membership; a marking of belonging that is still tied to identity yet beyond individualistic identity development (Carmen, Guitar, & Dillon, 2012; Grumet, 1993). Acting as a fashion accessory and even to enhance sexual attractiveness, Carmen, Guitar and Dillon (2012) conjecture that tattoos also can acquire the role of creating a modern-day signal of sexual fitness in evolutionary proportions. Supporting that claim, recent research on motivations of tattoo have shown that a significant motivator for tattoo attainment is to increase sexual desirability, primarily among those who originate from smaller towns (Antoszewski, Sitek, Fijalkowska, Kasielska, & Kruk-Jeromin, 2010).

More recently, interest in the motivations of tattoo attainment, particularly by women, has become a topic of interest by researchers. Consequently, the understanding of tattoo motivation is more complex than once thought, particularly when approached from a feminist standpoint. Although, traditional motivations still hold true to some extent, such as group membership, rite of passage, and strengthening ego (Carmen, Guitar, & Dillon, 2012; Forbes, 2001), there are underlying supporting factors that feed into these categories that are equally as important in understanding the personal meanings tattoos hold for individuals. More feminist themes such as personal narrative and resistance have emerged in more recent research (Wohlrab, Stahl, & Kappeler, 2006). Additionally, beauty and art has been understood as tattoo

motivation previously (Carmen, Guitar, & Dillon, 2012; Forbes, 2001), however, the reclamation of societal construction of beauty by female and femme and identifying individuals is a more recently appreciated motivation (Wohlrab, Stahl, & Kappeler, 2006; Atkinson, 2002). This theme of resistance to male-dominated construct of beauty is feminist in nature and explores the importance that personal narrative and reclamation add to tattoo motivation, especially when discussing survivors of sexual trauma. Further, some findings indicate the deliberate attempt by women who are survivors of abuse to reclaim possession of their bodies through the art of tattoo (Atkinson, 2002). The next section will discuss the ways in which tattoo may align with traditional therapeutic methods for survivors of sexual trauma.

Therapeutic Tattoo and Alignment with Recent and Traditional Therapeutic Methods

Addressing attachment and familial relationships involved in sexual abuse within the family is one method of attempting to deconstruct maladaptive behaviors exhibited by survivors of sexual abuse (Karakrut & Silver, 2014). Process groups and exposure therapy also have provided effective interventions for those who suffer from the effects of sexual violence and abuse (Hendriks, DeKleine, Van Rees, Bult, & Van Minnen, 2010). A large part of therapeutic processes used to (help) victims is cognitive-behavioral therapy (CBT) which addresses behaviors that have stemmed from feelings that shape actions of the person (Chahal, 2013). Various techniques include transforming past experiences by deconstructing the genesis of behaviors so that future feelings dictate behaviors that are productive to the success of the person (Chahal, 2013). By altering responses to feelings that are similar to those produced by sexual violence or abuse, such as vulnerability and fear, CBT can help the victim reclaim bodily autonomy and undergo a personally transformative experience (McGregor, Thomas, and Read, 2006). Relatively, activities that override existing maladaptive stress patterns in the brain can

strengthen a person's sense of control and autonomy (Chandler, Alexander, & Heaton, 2005; McEwen & Gianaros, 2012). Process groups provide support by those with similar experiences, validating the human experience of the participants and allowing the victims to expunge repressed emotions and create again, a transformation that can lead to more adaptive, productive behaviors (Hebert and Bergeron, 2007). 80% of sexual assault and rape victims are under the age of 30 (RAINN, 2016), and sexual violence can severely alter identity formation of the victim (Smith, Pierce, Pringle, and Caplan, 1995). Part of traditional therapeutic processes when working with survivors of sexual violence is helping the person to develop an identity that is their own, one that is not intrinsically tied to the perpetrator of the violence. By empowering the survivor to identify their identity, it allows the survivor to create a life that does not forget about the abuse, but ensures the abuse holds less power and influence over future endeavors (Karakurt & Silver, 2014).

Perception of control over treatment improves intervention outcomes (van der Kolk et. al, 2005). Since yoga, meditation, and mindfulness have been effective treatments in reducing PTSD and anxiety symptoms (van der Kolk et. al, 2005; Barnes, Riggs, & Williams, 2013), two common mental health issues for survivors of childhood sexual abuse and sexual assault, it is possible other activities that force the client to remain focused on maintaining an emotional "center" (emotional regulation) or to "block out" external environmental and social noise could produce similar therapeutic benefits (van der Kolk, 2014). Further, the control involved in reclaiming construction of beauty through tattoo could operate as a healing function on a societal level (Atkinson, 2002).

Stirn et al. (2011) suggest that survivors of sexual abuse attain tattoos as a way to conquer experiences that may be causing psychological stagnation. Additionally, those who

choose tattooing as their profession are more likely to have been sexually abused themselves (Sarnecki, 2001). One aim of this study is to identify if there are alignments among traditional therapeutic techniques with motivation for tattoos and if tattooing has viable therapeutic benefits in conjunction with other therapies for overcoming more typical responses to perpetration of sexual violence or abuse. Since tattooing provides a transformative experience that can identify a rite of passage or a significant life event, as well as become a visual representation of identity or group participation (Carmen, Guitar, & Dillon, 2012; Grumet, 1993; Schwartz, 2006), it is possible survivors use the artistic process of tattoo as a means of coping with and overcoming previous events of sexual violence in their lives. Further, tattoo could potentially act as a surrogate for experiences that mandate emotional regulation and internal focus, which are effective therapeutic processes for reducing anxiety and PTSD.

Sexual trauma affects such a large number of the population that examining personal and societal effects is essential to ensuring gender equality, mental health needs are being met, and to effectively evaluate clinical methods currently being used for survivors of sexual trauma. Depression, anxiety, PTSD, and a multitude of physiological effects can impact individuals who have survived sexual trauma. There is a multitude of research on the effects of sexual trauma, as well as therapeutic methods such as CBT and process groups, however there is far less exploration into the voices of those who have survived sexual trauma. Similarly, there is a solid foundation of research into the motivations of tattoo attainment, and there are some findings relative to sexual trauma survivors, however, no existing research could be found that assessed tattoo motivations among sexual trauma survivors with the intention of validating and exploring the potentially therapeutic facets of tattoo for such a population. Naturally, there is some overlap regarding motivations among sexual trauma survivors and those who are not identified as such,

however, having an extensive understanding of the special processes and needs of sexual trauma survivors can be valuable for clinicians and can work to alleviate stigma those with tattoos might encounter. This research utilizes qualitative interviews in an attempt to capture the voices of those who are tattooed and have experienced sexual trauma as a means to provide insight and understanding into if, and how, tattoos relate to the experience and therapeutic outcome of sexual trauma.

Chapter 3- Multi-systems Life Course Perspective

Multi-Systems Life Course Perspective (MSLC) is a framework which is grounded in four theoretical models and is utilized to have a more holistic, comprehensive understanding of a client, community, organization, and even society (Murphy-Erby, Christy-McMullin, Stauss, and Schriver, 2010). This framework was used for the analysis of the study, and as such, a more in-depth explanation of the theoretical basis of the framework is offered now.

What is MSLC?

MSLC is a lens through which a clinician can assess a client, at the micro, mezzo, or macro level, and have an in-depth and extensive, yet not exhaustive, understanding of the various factors and variables that may be shaping the current situation of the client (Murphy-Erby, Christy-McMullin, Stauss, and Schriver, 2010). MSLC uses Life Course Theory as a means to examine not only the life span and history of the individual (or organization, community, etc.) but also potential historical and generational factors that may still influence the individual now. Additionally, Life Course Theory can aid in understanding the individual's trajectory and allows them to analyze events in their lives that have shaped where they are now as well as where they would like to be. Further, MSLC utilizes Symbolic Interactionism to assess the individual where they are in regards to how they perceive the world around them, what meaning they place on

various roles and what symbolism aspects of their life hold for them. Using Symbolic Interactionism allows the clinician to really understand how the client makes sense of their environment and potentially utilize those symbols and meanings as an agent for change. While many assessments use Ecological/Systems Theory, MSLC integrates this theory to allow the clinician to gain a better understanding of the societal impacts that can create barriers for a client, as well as to understand the complex systems and how they intertwine to affect the client in their environment on a daily basis. Similarly, the Social Change theory is integrated into the MSLC perspective to give a broader understanding of how various systems might need to change in order for the environment of the client to change, such as policy changes or shifting of larger societal attitudes (Murphy-Erby, Christy-McMullin, Stauss, and Schriver, 2010).

Looking Through the MSLC Lens at This Study

Although the study was approached using Symbolic Interactionism, the framework for the analysis of this study is multi-systems life course (MSLC) perspective. MSLC has the potential to aid in analyzing tattoo attainment because it draws in multiple theories to give a broader perspective and ensure more information is considered. Analyzing with MSLC might help explore tattoo's potential as a therapeutic tool to assess an individual's life course. Additionally, MSLC can examine potential generational influences, social systems and the structures shaping the client's life. Using MSLC also addresses the symbolism and meanings an individual aligns with, which may also offer more insight into tattoo attainment because tattoo symbols can be so personal. MSLC can bring in other aspects to assess tattoos; when assessing the individual, tattoos may have the potential to create a personal historical timeline, much like a genogram, or may act as an illustrated journal of the individual's past. Addressed at a community level, prevalence of tattoos and understandings of the motivations that preceded them has the

potential for practitioners to use a possible visual anthropological perspective from which to view the life course and symbolic meanings have contributed to the current environment of the community being assessed. Folding in the additional variable of surviving sexual trauma, a social worker can see possible parallels at the individual and community level by examining the motivations for the artwork that is chosen to leave a lasting imprint on the bodies of those who comprise certain groups. The methodology that was used to design and implement this study, as well as the data analysis will be explained in the following chapter.

Chapter 4- Methodology

Introduction

This study was an exploratory venture utilizing a qualitative research design. Although there are studies on motivations of tattoos (for examples see Atkinson, 2002; Antoszewski et. al, 2010; Carmen, Guitar, & Dillon, 2012; Forbes, 2001; Grumet, 1983), there remains very little research on understanding not only the motivations of attaining tattoos for sexual trauma survivors, but also understanding the process or potential gains from attaining tattoos. Thus, this study built on existing research by exploring key themes related to the specific population of interest. Due to the nature of the participants and the required attributes, such as surviving sexual trauma, the study design was approached in a way that embraced a feminist model of knowledge acquisition. Utilizing a feminist pedagogy wherein the researcher and participants are both willing and active agents in the research and are learning equally from one another (Coia & Taylor, 2013) was important so that the participant experiences were valued and the researcher could remain intuitive throughout the interviewing process. Further, it was important that there were no hierarchies of power in place so that the interview itself could be viewed not only as mutually beneficial, but conducive to gaining the highest quality information.

First, the methodology chapter will explore the theoretical origins of the research questions to provide a more in-depth understanding of the knowledge this study hopes to gain. The second section of methodology will explain the importance of the feminist and research design of this study. The third section provides a comprehensive overview of the data collection process as well as the considerations for working with trauma survivors, how intuitive interviewing was essential to this study design, and the lessons were recorded in the field notes that shaped the trajectory of the study along the way. The final section of methodology is the analysis of the data which shape the findings of this research study.

Research Questions

General questions about the motivations of sexual trauma survivors for attaining tattoos guided the initial proposal for this study. However, in order to operationalize and develop a tangible inquiry into tattoo motivations, further research questions were derived from existing research on tattoo motivations. Existing research investigated sociological motivations and derived some key themes such as group identity, personal identity, rite of passage, personal narrative, and memorials (Grumet, 1983; Wohlrab, Stahl, & Kappeler, 2007). Integrating the prior research into the desire to understand tattoo motivation in the context of sexual trauma history, as well as the potential implications of this exploration, the following research questions were developed to shape the research study and interview guides.

1. Did/do tattoos serve as a healing process for victims of sexual violence/abuse?
2. Are there trends in motivations for getting tattoos? Do tattoos serve similar purposes for survivors of sexual violence?

3. Are there specific processes involved in the way tattoos are therapeutic (bodily autonomy, reclamation, transformation/metamorphosis)? Are the processes similar to traditional therapeutic methods used for overcoming sexual abuse/violence?
4. To what level do tattoo artists participate in the therapeutic process of tattoos if there is one? Do the tattoo artists experience a therapeutic role?
5. Do tattoo artists observe a notable difference in the process of choosing design/getting tattooed between those who express therapeutic purposes of the tattoo and those who do not express any therapeutic motivation?

Study Design and Feminist Research Approach

The larger research questions were derived from researcher observations and prior discussions, in addition to the existing research. These questions held the intent of investigating specific issues or motivations of the participants for attaining their tattoos. Faulkner and Faulkner (pg. 88-89, 2014), describe the grounded theory of qualitative design as one that can begin with an observation and larger questions, eventually asking intuitive open-ended questions of individuals, which can then be related to themes that emerge that can describe the majority of the study population. This speculative inquiry process utilizes the quotes from interviews to organize overarching themes that can then be analyzed (Faulkner and Faulkner, 2014). This study employs a grounded theory design which resulted in speculative inquiry (Faulkner and Faulkner, 2014). The open-ended nature of the interview questions, as well as the desire to understand the lived experiences of the participants allowed for a feminist approach to naturally form.

Given that there is a plethora of research analyzing the feminist nature of tattoos, it seemed only natural to employ a feminist approach to this study. As societal constructs of beauty, and particularly female or feminine beauty evolve, so do the ways that women become

active participants in that construction (Atkinson, 2002). As such, when researching tattoo, evaluating the potential for tattoo to be a mechanism of that active participation in evolving beauty and reclaiming beauty to be defined by the person as opposed to a larger societal construct becomes valuable (Atkinson, 2002). Utilizing this perspective, it is important to conduct research that allows the participant to explore their own understanding of their experiences and to derive meaning that is personal and unhindered by interviewer input. A framework of interviewing that embraces a feminist pedagogy values the identity of the participant and the interviewer and allows those identities to create a collaborative experience that enriches both participants while examining the hypotheses at hand (Coia & Taylor, 2013). Additionally, due to the oppressive nature of sexual abuse (Gibson & Lietenberg, 2001), it was important to ensure that the interviewing environment was one that facilitated an open, safe, and potentially even emancipating environment. Adopting a narrative study approach seemed most fitting for the preceding criteria, as it allows participants to freely express their own stories and perhaps furnish a connection among the interviewer and participant that is not only mutually beneficial but allows for the most information to be shared (Coia & Taylor, 2013). Further, the intuitive interviewing employed in the study allowed for two components of feminist pedagogy to be engaged: uncertainty and unknowability (Coia & Taylor, 2013). Coia and Taylor (2013) insist that recognizing “uncertainty” and “unknowability” in relationships and embracing those dynamics are essential to feminist interaction and that these components provide an environment in which the most can be learned about the parties involved. Through using open-ended interviewing with a minimal interview guide, this study allowed the participant and interviewer to employ the vulnerability of uncertainty and construct an interview climate conducive to

feeling comfortable with the unknown, which is essential in exploratory research (Faulkner and Faulkner, 2014).

Although there were no restrictions on gender identity of participants, and male and female identifying participants were included, the very nature of this research recognizes that by attempting to gain knowledge about meaning of tattoos for survivors of sexual trauma, the research is an attempt to contribute to a wider knowledge base about the intersectionality of gender and oppression, an important aspect of feminist theory (Allen & Jaramillo-Sierra, 2015). Again, all genders are affected by sexual trauma, however, according to current statistics, female-identifying individuals experience a higher rate of sexual trauma throughout the life course (Gibson & Lietenberg, 2001), and as such, the nature of the research is one that desires to advocate for larger societal change through potentially addressing power differentials and how they can be overcome, even retrospectively (Atkinson, 2002).

To reiterate, a feminist approach was taken, for the purpose of this study, and as such the participant decided what is sexual trauma and their status as a survivor of sexual trauma was not defined by any other entity other than the participant themselves. Other studies have used specific criteria to define sexual assault of childhood sexual abuse, however, allowing the participants to simply identify as being a survivor of sexual trauma seemed to align with the feminist approach of this study.

With regard to tattoo artists the feminist approach was still valuable in ascertaining the information for this study. Creating an environment that is an interconnected mutual learning experience seemed to provide the most rich interview experience.

Data Collection

Sampling. Purposive sampling is used when a researcher wishes to choose participants that have the ability to aid in providing information that is pertinent to the research (Padgett, 2008). Since the study aimed to have an understanding of specifically the experience of sexual trauma survivors with tattoos, either from survivors themselves or from tattoo artists, purposive sampling was a necessity to gather the appropriate sample. Purposive sampling was used through social media and included participants from various geographical locations within the United States. Criteria for inclusion in the study for survivors included a) having at least one tattoo, b) to be a survivor of sexual trauma (sexual trauma to be defined by the participant), c) to be at least 18 years of age, and d) be able to participate in a 30 minute interview either by phone or in person. Criteria for inclusion in the study for tattoo artists included a) be an active and practicing tattoo artist for at least one year, b) to be at least 18 years of age, and c) be able to participate in a 30 minute interview either by phone or in person.

Recruitment. This study was approved by the University of Arkansas Internal Review Board on May 5th, 2016. The study was approved as exempt and the recruitment and data collection process occurred between May 20th, 2017 and September 15th, 2016. The participants were recruited through snowball sampling. Snowball sampling is a purposive method that targets populations who are not known typically without referral from other people they know (Padgett, 2008). Those who identify as survivors of sexual trauma are often a part of a population that is not otherwise made known to the general public due to privacy and societal stigma (Carroll & Anderson, 2002). Similarly, tattoo artists may be easy to find, however, those willing to engage in research particularly pertaining to sexual trauma required friendship networks and elicited interest via Facebook messenger. As such, survivor participants were recruited via Facebook

page of the researcher using a study flyer. Initial contacts were made through acquaintances and friends of the researcher, and from there other participants were referred to the study by either existing participants or researcher's acquaintances. Tattoo artists participants were solicited in a similar manner, however, none were referred to the study in that manner. However, individual local tattoo shops were also contacted via Facebook messenger with an explanation of the study and a recruitment flyer as well, and all of the tattoo artist participants who participated in the study were recruited in this manner.

Participant recruitment began in May 2016 with an initial post of the study fliers to the Facebook page of the researcher. Between May 2016 and August 2016 study participants would contact the researcher with interest in participation. A mutually agreeable time and place was developed and the interviews would then take place. There were 10 survivor participants recruited and 7 artist participants recruited. All of those recruited completed the informed consent and recorded interview. All 10 survivor participants completed demographic information forms, and 6 of the artist participants completed demographic information forms.

Survivor demographics. The interviews were conducted from May 2016 to August 2016. There was a total of 10 survivor participants, nine females and one male who had at least one tattoo, were over the age of 18, and self-identified as someone who had survived sexual trauma. The definition of sexual trauma was allowed to be defined by the participants in an effort to be inclusive of the individual experience. The demographic information presented in this section relies on self-reported information provided on a form given to participants at the beginning of the interview (See Table).

The survivor participants were not as diverse as initially hoped, however there was some diversity was noted. Due to the nature of the sampling method, through snowball sampling of

acquaintances of the researcher, the participants that were recruited did represent a more narrow demographic diversity. Additionally, the participants were from various geographical areas and could not represent a particular area. Seven of the participants identified as White, one as Black/African-American, one as Latinx, and one as Other, which she identified as a specific makeup of Moroccan/Cuban/Native American. Half of the participants (N=5) identified as Bisexual, with the other half (N=5) identifying as Straight/Heterosexual.

The age range of participants was from 21 to 38 years ($M= 34.5$). College education of the participants ranged from Some College to Master's Degrees. 30% of the participants had a Bachelor's Degree (N=3), 30% had an Associate's Degree (N=3), 10% had a Master's Degree (N=1), and 30% indicated they had completed Some College (N=3). A majority of the participants were married, 60% (N=6), while 30% were single (N=3), and 10% was divorced (N=1).

The age at first tattoo ranged from 11 to 29 years, ($M= 32.1$). The number of tattoos ranged from 1 to 8, with the median number of tattoos being 3. Demographic information available in Table 1 below.

Table 1: Survivor Demographics

Characteristics	(N=10)
<u>Age</u>	
Median	34.5
Maximum	38
Minimum	21
<u>Gender</u>	
Male	1
Female	9
<u>Sexual Orientation</u>	
Straight/Heterosexual	5
Bisexual	5
Other	
<u>Ethnicity</u>	
Black/African American	1
Latinx	1
White	7
Other	1
<u>Education</u>	
Less than High School	0
High School	0
Some College	3
Associates Degree	3
Bachelor's Degree	3
Master's Degree	1
<u>Number of Tattoos</u>	
Median	3
Maximum	8
Minimum	1
<u>Age at First Tattoo</u>	
Median	18.5
Maximum	29
Minimum	11

Artist demographics. The artist interviews were also conducted from May 2016 to August 2016. There were a total of seven tattoo artists who participated and met the study

criteria. All of the artists were over the age of 18 and had been practicing tattoo artists for at least one year. The demographic information presented in this section relies on self-reported information provided on a form given to participants at the beginning of the interview (See Table 2).

The tattoo artist participants were less diverse than the survivor participants. All of the artists were from the Northwest Arkansas area, ranging from Fayetteville to Ft. Smith. As such, they did not proportionately represent the overall population of the area. Six of the seven participants were male, one was female. Six of the participants reported their sexual orientation as Straight/Heterosexual, and the other participant failed to fill out the remainder of the demographic information. The educational level of the artist participants ranged from Completion of High School to Bachelor's Degree. 57% reported they had Some College (N=4), 14% reported a Bachelor's Degree (N=1), 14% finished High School (N=1), and one participant's educational level was unknown.

The majority of the participants were White (N=6), and the other's ethnicity was unknown. The years of tattooing was included on the demographic questionnaire, however, a majority of the participants did not respond, thus this information was excluded from the current study. The age range of the tattoo artists was 22 to 50 years, with a mean age of 37. Artist demographic information is available in Table 2 below.

Table 2: Tattoo Artist Demographics

Characteristics	(N=7)
<u>Age</u>	
Median	34
Maximum	50
Minimum	22
<u>Gender</u>	
Male	6
Female	1
<u>Sexual Orientation</u>	
Straight/Heterosexual	6
Bisexual	0
Other	0
Missing Data	1
<u>Ethnicity</u>	
Black/African American	0
Latinx	0
White	6
Other	0
Missing Data	1
<u>Education</u>	
Less than High School	0
High School	1
Some College	4
Associates Degree	0
Bachelor's Degree	1
Master's Degree	0
Missing Data	1

Procedures

Protection of human subjects. All participants were informed of their voluntary participation as well as any emotional effects as a result of the interview. All participant information was kept confidential to the extent allowed by State and Federal Law. Data remained de-identified and separate from any identifiable information. Interview transcriptions were kept

in a separate, secure and locked location from informed consent forms or any other identifiable information. Consent forms and all reports were kept secure in a locked location. Data and transcription was kept on a password protected computer. Transcription from digital recording made use of a pseudonym in place of actual name and any identifiable information was not published.

Considerations when working with trauma survivors. Understanding that over half of the participants were survivors of sexual trauma informed many aspects of the study and the way the interviews were conducted. Since survivors of sexual trauma are more likely to reach diagnostic criteria for PTSD (Ullman & Fillipas, 2005), an environment that was conducive to comfort and control was of utmost importance. Further, the interview guide was designed to answer the research questions in a way that would not produce in-depth therapeutic intervention; the interview was not to center on the event or events that produced the trauma, but rather on the tattoos and the process of obtaining them. As such, the questions did not attempt to investigate too deeply the emotions surrounding the trauma. A few of the participants mentioned that they enjoyed the interview process and expressed appreciation for the questions asked as they prompted some introspection regarding their tattoos. Additionally, the participants were provided with a reference list with local and accessible mental health providers in the instance that the interview did provoke uncontrolled emotions or a further need for therapeutic services.

Intuitive interviewing. The study was conducted using intuitive interviewing from an initial interview guide developed by the researcher. The interviews were held in a location that was mutually agreed upon by the researcher and participant. The survivors often opted for an office located at the university, while tattoo artists were all interviewed at the tattoo shops they practiced at. The survivors were interviewed solely by the researcher, with the exception of three

who agreed to allow the thesis chair to also be present and ask questions. One interview was a group interview that consisted of two survivor participants who were in a relationship, all other survivor interviews were individual interviews. The tattoo artist interviews were all individual interviews with the exception of one, wherein three artists who share a shop engaged in a group interview. The interviews were recorded with the participant's approval by a digital recording device. While there was an initial interview guide, as mentioned above, the interview questions often changed or expanded upon the existing questions depending on the participant and their level of willingness to share. Additionally, as the study was conducted, the researcher became aware of more efficient ways to ask questions, as well as more in-depth questions that would garner more information. Thus, not every participant was asked the same questions, but rather approached from the same interview guide. Each interview was typically 30 minutes in length, with some participants speaking less and some participants having more elaborate communication styles.

Lessons from Field Notes

Field notes offer the researcher an opportunity to reflect on not only the content of the interviews, but also ways in which the interviewing guide can be improved (Creswell, 2013). Throughout the course of this research, field notes were utilized to assess the effectiveness of the questions being asked. "Are the research questions being answered by the interview questions?" By documenting the researcher thoughts on interviews following each interview, new questions develop to gather more information in future interviews. Additionally, field notes allow the researcher to evaluate their own personal biases and how those may be shaping the interview outcomes (Creswell, 2013) as well as any way that the researcher bias may be leading the interview to fulfill the hypothesis. Through thoughtful analysis of field notes, a researcher is

better able to ensure that they are asking questions that allow the participants to contribute their absolute experiences, not ones influenced by the researcher.

The field notes used during this research often illuminated ways a question could be asked “better”- questions that asked for the same information but in a different way. Further, reflection on the field notes allowed the researcher to develop questions that could enrich the interview experience and create for a more meaningful interaction while providing more data. For example, while there were different interview guides for the survivor and artist participants, after review of the field notes it was evident that some of the questions from the survivor interview guide would be beneficial to ask the artists as well. From a clinical standpoint, field notes were a meaningful tool to ensure the researcher was processing feelings and thoughts about the interviews appropriately in an effort to maintain self-care and not absorb any of the participants’ emotions. Further, field notes aided in alleviating any possible transference from the researcher’s lived experiences onto the personal stories of the participants, allowing their voices to maintain autonomy as single, individual stories.

Use of self. Qualitative inquiry is often spurred by personal experience or previously observed phenomena. This project was no different- I am a survivor of sexual assault who attained a tattoo with the conscious effort to transform my physical body to one that signified personal agency and ownership. My tattoo was an emblem of renewed personal commitment to my personal growth and goals. The process allowed me to feel empowered, refreshed, and in control. The tattoo acts as a daily reminder of that commitment and has allowed me to engage with personal conflicts that are products of my sexual trauma. Due to this experience, I naturally gravitate towards those with similar life experiences, and have encountered many individuals,

mainly women, who also have attached a deep, significant meaning to their tattoo and recognize its value to help them overcome and to keep them spiritually grounded or personally aware.

As a result of my close personal relationship with this experience, it was important for me to acknowledge and engage the use of myself in this project. By examining my own biases about tattoos- ones that are products of my own experiences- I am better equipped to engage with the data in a mindful manner with every attempt made to overcome researcher bias. However, I find it important to note that the use of myself in this study was also highly valuable; my own experiences allowed me to engage with the participants in an authentic and meaningful way, and drawing upon my own experiences allowed me to navigate conversations with the participants more fluidly. In this manner, I felt that my use of self in this study was an asset to the results as it gave me a perspective others may not share and allowed me to develop a rich, meaningful experience for myself as well.

Previously an artist, and also a tattoo apprentice, I have always understood the therapeutic benefits of artistic endeavors. However, throughout my academic pursuits, I have not allowed myself much space for art in my life. The process of developing and engaging in this study, including concluding this thesis, has allowed me to reconnect with art in a more meaningful way, since the findings of this study have given more value to the role art plays in the therapeutic process for survivors of sexual trauma. A full circle journey, this research has given me a newfound respect for the place of art, in any form, in therapy and has revived not only my artistic self but my passion for alternative modalities that are designed by the person seeking healing.

Data Analysis

The intuitive interviewing utilized in this study evolved from the research questions into an interview guide that allowed for intuitive questioning to assess the individual participant's experiences. While much of the content gathered was descriptive, being that it described the participant's individual experience with sexual trauma and motivations for attaining tattoos, the data itself began to form common themes and as a result, the data analysis process became speculative inquiry (Faulkner and Faulkner, 2014). The survivor group and tattoo artists were analyzed separately, although many codes did overlap for the two groups. The initial step was to transcribe the digitally recorded interviews, which was performed in combination by the researcher and a professional transcriptionist. The researcher then read each transcript multiple times not only for inaccuracies, but also to become deeply familiar with the interview content. While the initial read-throughs were not meant to be a form of data analysis, notations of themes were documented for potential use during the coding process.

Using Atlas.ti, qualitative data analysis software, the transcripts of the participant interviews were coded with observed themes. The preliminary coding process involved simply identifying information that was directly asked in the interview guide, such as "at what age did you get your first tattoo?," which was simply coded as "age at first tattoo." The following coding sessions required operationalization of certain codes in order to assess for similarities in themes. For instance, a code of "personal narrative" involved any discussion of how a tattoo symbolized the participant's life story, told their life history, was a visual "map" to their life, etc. Notes of emerging themes were kept during the coding process in order to maintain organization of codes, as well as to inform the grouping of codes into "families" during later coding sessions. The content from the participants may have read differently, but could be somewhat objectively

assessed in similar terms. As a result, the primary researcher relied on interrater reliability from other research professionals familiar with the subject matter to ensure that the codes remained as objective as possible.

A codebook which acted as a guide for codes was developed concurrently during the coding process. The codes that were similar in content were grouped together in code families which were developed with the help of the chair of this thesis. Codes were also stored with definitions within Atlas.ti for access during coding sessions to remain as familiar as possible with the code definitions. A list of the codes and definitions is provided in Appendix E, as well as the larger families that the codes were placed into.

Credibility. Although credibility and reliability are always useful in research, qualitative research often relies on the account of the participant to be the expert on their own experiences (Creswell, 2013). The researcher, however, is the interpreter of the accounts of the participants and is subject to standards that can increase the quality of the research by increasing objectivity in the researcher's interpretations (Creswell, 2013). Having multiple professionals who are well versed in the subject matter assess the codes used in data analysis of the study (inter-rater reliability) can increase the objectivity of the codes, through providing triangulation, and make the findings more credible (Creswell, 2013). For this study, the codes were reviewed by the chair in addition to another graduate student familiar with the study content and supporting literature.

Similarly, the questions derived for the interview process in phenomenological research also need to ensure they are not attempting to coerce the participant into answering the questions a certain way (Creswell, 2013). The questions should be as open ended as possible, allowing the participants to explore their own experiences without the influence of the researcher (Creswell, 2013). The interview guides were developed with the thesis chair assessing the questions for

potential researcher bias and through the course of the interviews provided diverse answers, indicating that the questions were not intended to “lead” the participant to any one conclusion.

Another way to ensure researcher bias is assessed is to keep field notes and receive supervision throughout the research process. For this research process, there was some inherent researcher bias as the researcher had similar experiences of the participants which led to the initial inquiry into a larger phenomenon. However, through thoughtful field notes and supervision with the thesis chair, researcher bias was processed through when necessary and multiple people were involved in the development of the interview questions and analysis of the research.

Chapter 5- Findings

Introduction

This intention of this chapter is to provide not only the descriptive findings from the individuals interviewed, but also to present the themes derived from speculative inquiry. While the main intention of this study was to understand overarching themes of motivation for tattoo attainment of survivors of sexual trauma, the individual experience which is more descriptive in nature is of equal importance for contextual understanding. The interviews aimed to answer larger questions while also investigating the individual experience, whether the experience was had by survivor or tattoo artist. As such, individual experiences with interview quotations will be presented first, followed by key themes that emerged through coding and analysis. The survivor perspectives will be presented first; while the tattoo artist’s perspectives helped support the findings and overall themes of the study, the survivors perspectives are the ones that will create a true understanding of motivations for tattoo attainment among them.

A lot of the motivations were retrospective; most of the survivors had not premeditated their tattoos to align with symbols of overcoming sexual trauma, rather, after questioning aimed at understanding any association, they understood that the design choice or the decision to acquire a tattoo had involved some aspect of their trauma or survivor status. Many of the survivors were grateful for the interview, expressing a deeper understanding of their tattoos as well as their status as a survivor. For example, Rob accounts:

I think this tattoo did me a lot for my trauma, but it meant a lot for, like, a lot of other things. And, honestly, I didn't even know it was my trauma...I think it's cool because I got my tattoo in, in conjunction with, like, weaknesses in my life, but I realize, like, a lot of the weaknesses, or tendencies, or negative thoughts I have are because of my trauma. And I was in the middle of that process when I got this tattoo. So it's kind of actually cool to see how, me not even knowing, or maybe asking the right questions about my trauma or even understanding it at all, the tattoo still played a role, because it spoke, or represented, my weaknesses or just my tendencies that are kind of unhealthy.

Among the participants there was an overall renewed passion for their existing tattoos and discussion of wanting to get more tattoos for newly actualized understandings of the role of their tattoos in their stories. Similarly, many of the tattoo artists had not been mindful of the therapeutic role of tattooing until the interviews, and many of them felt that the discussion strengthened their passion for their craft.

The initial contact with survivors was exciting; the recruitment process brought about many survivors who were excited to share their story about their tattoos and how it related to them as a survivor of sexual trauma. Many participants were curious themselves to explore if there was a relationship, which was evident by the content of the interviews. Adversely, the initial contact with the tattoo artists was more contentious; many artists related that they were reluctant to engage in any publication that would lend to the "mainstreaming" of tattoos. The artists often felt that tattoos were to be reserved for the societal outliers- those on the fringe of societally acceptable behaviors and they worried that by touting therapeutic benefits tattoo may

become even more mainstream. Further, many artists discussed how the prevalence of reality shows that made tattooing a contest was damaging the artistic value of the craft of tattoo, and worried that this study was an extension of that trajectory. Once many of them had been reassured that the purpose of the study was not to infer that tattooing should be an acceptable form of therapy, but rather to understand what tattoos mean for those who attain them, they switched from hesitation to curiosity.

Survivor Perspectives

The survivors were recruited through a snowball sample, and many of the survivor participants were known to the researcher since they were recruited through Facebook and word-of-mouth of acquaintances. The survivors were all eager to share their stories and expressed excitement at the study and the prospective findings. As mentioned previously, none of the survivors were questioned directly about their sexual trauma as the intent of the study was to investigate the motivations of their tattoos, not to delve into their traumatic history. Some participants did explain through the interviews briefly what their trauma was as it related to the questions or their explanations of their answers. The interviews were held locations that were mutually agreeable for the participant and the researcher and were made as comfortable as possible for the participants. Many of the participants had expressed that they had previously sought therapeutic services to resolve issues surrounding their sexual trauma, which may have contributed to the ease of the interviewing process and lack of overt emotional responses throughout the interviews. The quotes and dialogues presented use pseudonyms to protect their identities, and any other names mentioned in the quotes, as well as potentially identifying information has been changed as well.

Motivations

The research questions of this study intended to investigate if tattoos served as a healing or therapeutic process for the survivors of sexual trauma, as well as if there were specific processes related to the tattoo that were therapeutic. In order to investigate these questions, understanding the motivations of survivors of sexual trauma for getting their tattoos was essential. The following themes encompass the motivations for tattoo attainment that the participants in the study expressed.

Reclamation.

When I covered it up [old tattoo] with a new bright symbol that I had come up with, that was supposed to be a symbol of power, it felt really good, it felt very therapeutic. I felt I had set myself free from a story that I didn't want to tell anymore. -Missy

Reclamation was a persistent theme among the survivors accounts as it was cited as a motivation for getting a tattoo by half of the participants (N=5), and of those 5 participants, each of them indicated some form of reclamation at least twice. Still, their description of reclamation took different forms. In existing research which explored tattoo motivation, reclamation was a feminist theme that consisted of transforming the socially-accepted construct of beauty into one that was owned by individuals (Wohlrab, Stahl, & Kappeler, 2007). In the context of survivors of sexual trauma however, the meaning of that beauty was shifted to having a personal beauty that was separate from the association to the body prior to, and during, the trauma. Nan related the following, supporting the notion of reclamation to a personal ownership of the body from one that was “owned” by someone else:

But then when you get a tattoo, it's, 'Yeah, someone touched me, someone put something in me, someone did this, but I made that choice. I let them do this. I had control of the situation.' So, it really is, I think it is [a form of reclaiming identity], maybe not so much for every person.

This theme regarding reclamation as it is associated with an individual's trauma experience was further associated with the confidence the survivor had and the need for that reclamation to reinstate or promote self-confidence. Deliah related her experience with reclamation as one that involved a need for control to regain confidence, saying "I think the being able to reclaim your identity and your confidence and your control of the situation is hugely important in being able to heal from sexual abuse." Meanwhile, other survivor participants felt that reclamation was intrinsic to healing as a necessary mechanism to continue as a survivor of sexual trauma, one that promoted resiliency:

But it was kind of like, making sure I close this chapter. I'm still, people who have trauma never get over it, but you can reclaim your body and you can do things that are truly you, to close a chapter on trauma and continue that healing process. -Selena

Reclamation was also described as a cultural one, an act not only that reclaimed the body from the trauma, but also one that perpetuated racial and cultural freedom in an attempt to overcome systemic oppression aimed at people of color and the policing of their physical attractiveness and ideals of beauty. Marie expanded on the function of tattoos as a form of resistance, a way to reclaim culture while also maintaining individuality, explaining, "And so much, like culturally, so much was taken from people that look like me, or my ancestors, that to reclaim some of that is really important."

Catharsis.

Part of the healing process described by the survivor participants involved a catharsis; a purging or purifying experience that rid or released the person of negative emotions. Selena said in this regard, "I mean, it's [tattoo] just a way to reemerge, renew yourself and find what you really want." In the instance of the survivors of sexual trauma, the cathartic moment allows them to release control of past events or of other's actions. Estelle, who had decided that her next

tattoo would be a phoenix, described the motivation behind the design choice, saying, “I just loved that idea of being able to rise above the ashes, still being able to be you, just a better you, being a new you, being reborn, and so, that’s why I want that [a phoenix tattoo].” Other participants also related to the rebirth of their experiences and identities, through which a tattoo was a catalyst for. Missy revealed that getting a tattoo cover-up was cathartic, stating, “When I covered it up with the symbol that I had designed that was the letting go of a lot of early childhood darkness.” While Estelle and Missy described letting go of feelings and rising above, Shayla illustrated the catharsis she described as a “shedding”, detailing:

For me it was very therapeutic. It was like shedding, you know it’s on me, but it’s a shedding. A little bit of shedding of the shame, and not being able to tell people, you know “yeah, I was abused, and he raped me, and it’s not my fault.”

Another participant, Rob, explained how ridding oneself of these negative emotions and thoughts allows a person to also alter the behaviors related to the feelings:

I feel like I’m a very reflective person, but, like, it kills me that, like, no matter how much I’m willing to go to counseling, reflect, do hard things, be vulnerable, like, patterns, destructive patterns or negative thoughts, or things, constantly are a struggle. And it just kinda shows that, like, accepting these things can kinda be freeing in of itself. It’s kind of like a paradox. Accepting all this shit you have can allow you to be free from it.

And many participants echoed his sentiment throughout the interviews, simultaneously recognizing the importance of a cathartic moment for not only their healing process, but as a catalyst for personal growth and life changes in the future. Deliah supported this concept, indicating that tattoos provided her with this purgative experience, saying, “Like I said, I got them [tattoos] to cover some of the scars that I have and just the process of doing it releases that same energy.”

The pain of a tattoo is something that was not lost on the participants, with many of them citing the pain of a tattoo as the prompting agent in the cathartic moment. Previous studies have

indicated that the pain of tattoo and piercing, much like the less socially-acceptable outlet of “cutting” are an attempt to feel emotions (Carrol & Anderson, 2002), while Van der Kolk (2014) argues in *The Body Keeps the Score* that those who have experienced trauma seek pain as an analgesic, something to relieve them from emotional scars (p. 33). Many of the survivor participants in this study, however, discussed willingly feeling the pain as a process, one that they could overcome and come back from, providing them with a badge to symbolize their cathartic process. Selena explained this vividly:

It [getting a tattoo] does hurt. But yoga kinda hurts and it’s good for your body. Therapy hurts, too, like, go back into those recesses of your brain, hurt. But once it’s out, it can be cathartic. So, yeah. You walk out and you’re like, “Woah, I just sat through that and was like 2 hours and that kind of hurt the whole time but look what I got. This is awesome.”

Marie furthered this trend through a powerful memory of the connection of pain to her emotional healing:

And, one that I got on my calf, something happened during the tattooing that I’d never experienced before and it was like a physical release happened toward the very, very end. It was extremely painful and it got to the point where I was just literally bawling, uncontrollably. And it wasn’t even a cry from pain at all. It wasn’t a physical pain at all, but it felt like more of an emotional release of pain....It helped me feel something that I wasn’t aware that I was holding onto. And, I don’t know exactly what that was, but it was definitely something that was harboring a lot of internal, emotional pain. And I was able, through that ceremony of tattooing, I was able to release that.

Marie’s account was impassioned, she spoke with strong conviction, simultaneously this memory as she processed it her voice went from tense in the beginning to a lighter, softer tone, which really expressed the lightness she felt from the experience. All of the accounts that expressed this release or shedding of emotional pain ended with smiles from the participants, a feeling of accomplishment that was emanating from their faces.

Personal narrative. Simply asking the survivor participants questions about their tattoos opened up immediate divulging about their life events, life stories, the growth they had

experienced, and the expression of their personal narrative. Many of the participants had expressed that their tattoos were a road map to their lives, some of them using different terms all to mean a personal narrative or a way to tell their story. Exploring this, Jess said, “I think people that know me well see it as a representation of my life experiences marking me and how I integrate that into, ya know, things that have happened to me into my personality.” Jess also mentioned her most recent tattoo, which consisted of flowers and vines, as “My vine of life, and the plan is to add to it when I have other life experiences.” While some viewed their tattoos as connecting in some way, Shayla explained that her tattoos acted more like separate journal entries:

Even if I don’t necessarily want to be that person again, it’s a reminder of who I was. It’s like a journal entry that you just go back and read and you’re like “wow, what was I thinking?” but ya thought it.

Marie echoed that sentiment, however tying the individual experiences signified by the tattoos into a life journey:

Actually, I feel like they all tell a story for me. And some of them, after I got my first one at 18, I really started a journey of me becoming a better person and learning more about spiritual practice and that was actually, I was studying Buddhism when I was 18 and on, for a bit and at the time I didn’t feel like I was really a good person.

Rob delved further, noting that tattoo can be an expression of your story presented to the world and that the tattoo allows you to decide how much of your personal narrative to divulge:

Of course, the tattoo experience is its own, exclusive therapeutic process, but it’s definitely a unique way where, like, maybe the therapeutic process and your passions align in a very creative way. And, I think that’s kind of what I’ve learned and seen from other people because it allows you to share your story however little or however much you want.

Following questions regarding motivations, most of the participants readily shared their life experiences, including the important events that had prompted many of their tattoos. It became obvious that even the tattoos that had initially been sought out for impulsive means had some

deeper meaning once the individual examined the time in their life more closely. Rob discussed how he had initially gotten his tattoo as a symbol of his faith, however, after answering questions about his tattoo could relate the experience to his therapeutic process regarding his trauma as well as his growth as an individual. Similarly, Selena had initially reported that her one and only tattoo was a “silly cartoon” that she had gotten merely because she could. Again, upon further examination she realized that while the content was silly, when she looked in the mirror it held a larger meaning: she was strong, independent, in control. Deliah expressed this retrospective understanding directly, “I just wanted something beautiful. I just thought of it as a way of adorning yourself, like with jewelry. And that it meant something important, that’s what I really remember. I knew that even if I didn’t understand that it was important, I knew it was something like a milestone.”

These narratives provide not only those who inquire with a window into the individual’s life story, but also give the individual a lifetime marker of their life, one they can reflect on, remember, and expand upon. According to the participants, tattoos can be a rich personal narrative that is hidden in plain sight, only to be accessed by those who are given permission.

Life events in the story. There were many different life events within the larger story narrative that had prompted the survivor participants to get their tattoos, yet the events were as different as the individuals. Only one participant actively attained a tattoo as a conscious form of marking herself as someone who had overcome sexual violence, while the others either understood how their design choice involved their survivor status and others still only retrospectively attributed overcoming their trauma as a facet of the tattoo attainment process. Some were impulsive actions: the time and circumstances afforded the opportunity to get a tattoo either from a friend or at a lower cost than one at a shop, or they had simply turned 18 years old.

Others were to overcome painful events such as a miscarriage, in Jess's case, as well as Deliah's. Similar to existing research on tattoo motivation (Atkinson, 2014; Forbes, 2001; Wohlrab, Stahl, & Kappeler, 2007), four of the participants had tattoos memorializing the passing of someone close to them as motivation in addition to those memorializing their miscarriages. Rebecca and Nan discussed their stifling childhood environments that had prompted an act of visual defiance once they had become legal adults. Regardless of the individual event prompting the tattoos, it was very clear that the events became a small star in the constellation maps of their lives.

Control.

Jess said, "And I think a lot of survivors, um, they need that. They need to have something that is the choice that they make that happens to their body. Kinda take control again." Jess, like others, discussed the integral role of control in their healing. It was hard to distinguish differences between themes of control and reclamation, as the participants often described the two in an intersecting, conjoined manner. However, there were some key differences between the reclamation and control themes as the participants spoke, distinctly that control didn't always parallel directly with reclamation since oppression towards survivors of sexual trauma didn't just result from the perpetrator or the traumatic event itself, but also from familial and societal structures. As a result, there were unique ways that overcoming control motivated the participants, although still encompassing control from the trauma itself.

Control over the trauma. Reclaiming control and perceptions of control over recovery after sexual assault is integral to the recovery of a survivor of SA (Ullman and Hagene, 2014). The desire to ensure a person is safe and autonomous, deciding on one's own trajectory, these all seem to be psychologically natural consequences of a traumatic event that seized control from the victim. The participants embellished on this theme, expressing ways that the process of

tattoo- the choosing of the artwork, the choice of artist, and the action of obtaining the tattoo created a tangible sense of control for them. Seven (N=7) of the participants mentioned control as a factor in motivating them to have tattoos, either consciously or in retrospect. Estelle explained:

I felt in control of my body, cuz I was deciding. This is what is going to happen to me regardless of what any lover, or anyone else saying, “I don’t like tattoos” or “I don’t want these.” Well you know what? I do, and this is what I want.

Deliah was very open about the ways in which tattoo had become a purposeful act of autonomy from the person who had perpetrated against her:

With the sexual abuse, this person touched my body, this person invaded the one thing that is supposed to be mine, but, yet, I couldn’t do anything about it. But then when you get a tattoo, it’s, “Yeah, someone touched me, someone put something in me, someone did this, but I made that choice. I let them do this.” I had control of the situation.

Estelle recognized the therapeutic value of choosing tattoo as a form of control, mentioning “ to be able to make that healthy choice for yourself, being able to truly have control of your body, um it’s just, it’s an amazing feeling, to be able to do that.” Meanwhile, Jess processed that although her tattoos weren’t specifically designed with intention of overcoming trauma, they still filled a need for control, saying,

I think that, although none of my tattoos are directly related to, or the process, are directly related to the trauma, I think they are indirectly. I think that my need for control and to have something pretty on me, I think that it’s indirectly part of the motivation to get them.

The participants who spoke about how tattoo acted as a mechanism for control spoke with conviction and passion, each of them utilizing their vulnerability as a way to express their process.

Control from environment. The source of control was not always wrestled from the perpetrator of the trauma either, but often times from parental figures that created additionally

oppressive environments. Many of the participants expressed the ways in which they felt that their environments exacerbated their trauma, adding additional stifling all the more creating a desire for control. The passage from adolescence to adulthood by age in the United States, at 18, was often a catalyst expressed for the obtainment of the first tattoo, with control being a primary motivating factor for the initial plunge into body modification. Betsy mentioned that her first tattoo was “really just a situation where I was 18, it was my body. I got to do whatever I wanted, I saved up the money you know, so that’s what it [the tattoo] was about.” Nan echoed this, stating, “I was like part of this [getting the tattoo] was just gonna be because, you know, I’m an adult now and I can do this and you guys [her parents] can’t do anything about it.” Deliah explored the relationship between her oppressive home life and getting her first tattoo:

Honestly, it’s primarily because of the way I was raised. I’m not necessarily saying I’m acting out because, you know, I’m an adult and I can do these things and it’s my life, my choice blah, blah, blah. But, it’s mainly just because, I mean, I didn’t get... whenever I was living with my parents, I didn’t get to make a lot of my own choices. It was “You have to go to this place. You have to do this thing. You have to be in church 3 times a week. You have to do all these things and these are all expected of you.” Some of them were reasonable and some of them were not.

Betsy was more blunt regarding her feelings on this matter, stating “I was 18. It was my, I’m 18 so screw you mom tattoo, so...yeah”

Control over patriarchal construction of beauty. While parental control aligns with patriarchal systems, the participants expressed a different form of control relating to the social construction of femininity, beauty, and women’s place in society as a motivating factor for either getting a tattoo or the design choice. Not necessarily an act of counterculture, but rather a form of social change activism as a means to influence and shape Western perceptions of beauty and femininity. Further, shifting perceptions of women’s place in Western culture overall, particularly as it relates to women of color and their culture intersecting with the Eurocentric

Protestant culture typically privileged in the United States, was a motivating factor for some participants, as Marie disclosed,

Well, in reality, it's really not deviating from the historical norm, the indigenous norm. I've become much more aware of, this sounds so... patriarchy and colonialism and gender norms that are imposed on women of color, indigenous women of color and it is important that patriarchy doesn't fuckin' tell me what to do with my body.

Deliah explained that her choice in positioning was influenced by the gender norms placed on women, especially from Protestant backgrounds which insist that a woman remain modest and certainly not mark their skin, saying "That's exactly why mine got placed where it got placed was mainly as a 'Stick it to the man' kinda thing." Shayla related her perception of societal influence on tattoo, expressing "You're doing something that not all of society thinks is ok, but, you're standing up for yourself, you know. I like them, I'm doing it to spite what others might think of it. It's a little empowering, definitely empowering." Both Deliah and Nan embellished on their attempts to redefine femininity and women's roles using tattoo, Deliah passionately saying,

I think that is, a lot of older people have that mindset of women, that there's a certain expectation of you. That getting a tattoo is pushing that normative bounds. Heck, even going out and getting a job is, ya know, pushing that bounds.

Nan impressed upon the narrow expectations of women placed by Western society, particularly in the South, and how that informed her decision to get a tattoo by relating "Quite honestly, I didn't like the perfect little box that they were trying to fit me in. I don't think in a box, I think outside the box, therefore I want to be outside that box that they were trying to put me in."

Similarly, Selena explored the ways femininity, particularly for women of color, is so narrowly defined and her attempts to create a new narrative of female ownership of the feminine:

At 29 years old I started doing all of the things that were truly myself, like dyeing my hair, getting piercings, and getting a tattoo and then being like, "Oh, I love tattoos. I'm gonna get more." And just not giving a damn anymore.

She went on further to express a more concrete personal example:

I mean, I know there's a lot of people with tattoos, but especially here in Northwest Arkansas, maybe not as many women with tattoos. And then, being Latinx, there's definitely a prescribed way to be a woman in my community. Especially here in Northwest Arkansas. Maybe not so much where there's, ya know, generations of people who have lived in the US, but here it's still a lot more traditional people. And so, to eventually have a sleeve and a lot of tattoos on my back, that would be very deviant from the norm. And, yeah, to kinda show that I'm different. And not everyone is like that, and I like showing off my tattoos.

Estelle enhanced the sentiment that tattoo can shape the perception of women and that when women control what goes on their bodies, they control the narrative of beauty, regarding her young daughter's reactions to her tattoos, "So it's nice too that for her, it can be a symbol of strength and power, and just beauty, that she will grow up thinking that those things are beautiful, instead of all these stereotypes that go with."

Symbolism.

Humanity is intrinsically tied to symbolism. Symbols shape our culture, our progress, and even our ability to survive. Symbols predate spoken language and act as an alternate communication that serves to unite humanity regardless of other extraneous factors. Traffic signs denote fairly universal symbols to ensure drivers from other areas can effectively navigate their surroundings. Speaking with survivor participants illuminates this truth of tattoo as well; a symbol inked into skin is capable of creating meaningful conversations among people who vastly differ, they can create a calm comfortability in uncertainty, a uniting topic that creates bridges in understanding. Missy shared this sentiment, "Because it's [tattoo] actually a lifelong union with the symbol that you're going to have that stick to your skin." Additionally, spirituality creates another level of symbolism so ubiquitous to humanity, regardless of religious affiliation. The survivor participants explored the unification of symbolism and spirituality through their narratives about their tattoos, even when they didn't hold specific religious beliefs. They

expressed the deeper connection to the artistry through a long-lasting relationship with the symbol itself and the meaning it held for them. The common trend was that the more symbolic a tattoo was to the participant, that is, the more it held a deep meaning, the more favorable the design seemed to be; this was evident not only in their narratives, but in their facial expressions and voice intonations as it was noticeable when they would discuss the differences between the tattoos they had if they possessed more than one. When asked which tattoo was her favorite, Shayla mentioned that her favorite held that prestige “Because it has the most symbolic meaning, really. “ Naturally, the tattoos symbolized diverse things, and often multiple things at once. There were common themes however- symbols of growth and empowerment that provided visual representation of their personal transformation, symbols of spirituality and faith, and lastly, symbols that exhibited their current identity as a means to further expand their knowledge of self.

Symbols of growth, empowerment, and transformation. Many of the codes from the transcripts for “control” intersected with “empowerment” which is a meaningful takeaway from the participant’s experiences. In order to feel empowered, they had to feel they had control over their lives. There were many times where the two themes did not intersect directly however, and the design and process of the tattoo was less about control and more about feeling the power to change their trajectories and become creators of their own life stories. Marie explored empowerment as a deeper function than something tied to sexual assault; that empowerment is something that women, and especially women of color, have to fight for their entire lives:

Those tattoos were just a testament to my life; my ancestors’ survival and also as part of, like, further feelings from just growing up poor and feeling really powerless and cheated and really everything that, “I’m not defeated, I am not tarnished. I am, I come from a lot of love and that I can love myself and that I love others and that’s ok to do.” And so my last 3 tattoos came from that place.

For Missy, the empowerment came from the ownership of the tattoo through the process of designing it herself to getting it tattooed,

I found it encouraging and fun and because it was my design it was my picture it wasn't like just anybody did it, I did it. I really liked the fact that I was wearing a symbol that I designed that was based upon my personality and that other people enjoyed it too. That was empowering.

When asked if she knew anyone who had gotten a tattoo related to their sexual trauma, Betsy discussed a friend who got a large phoenix tattoo:

Ya know, my friend that had the phoenix tattoo definitely talked about her experience and talked about how, um, that, I mean, it was directly related to her, ah, sexual assault. So. and it was empowering for her. It was huge. It was a huge tattoo. It took several sessions and I think that it was almost like therapy, ya know. She just, like, went in there and this was her way of getting past it.

Similarly, Shayla talked about her tattoo that was specific to her identity as a survivor and how the visual nature of tattoo itself can be empowering, saying “And this one, like I said, it empowers me, it reminds me of who I am, even when I doubt myself. It a visual representation of... I don't have my scar... my scars don't show on the outside, and this is just, this IS my scar.” Like Shayla, many of the participants tied their personal growth and transformation to their empowerment, seeing necessity in marking their journeys to overcome residual behaviors that stemmed from their sexual trauma. In this instance, it seemed that personal growth created a transformation of self, which in turn allowed empowerment to blossom. Estelle also mentioned that tattoo design, in this instance the symbol of a phoenix, would allow her to overcome, or “rise from the ashes,” in a conscious effort to use tattoo as a way to facilitate that:

For me it [symbol of the phoenix] represented, kinda further than the spider does, my transformation into a confident person, that didn't let the past rule me as much anymore, you know especially my past in my twenties, and all my self-destructive behavior as a result of, you know, a lot of things that happened before, um, and, you know, just rising, even in high school I loved the idea of the phoenix.

Selena used similar language to express this as well, saying “ I mean, it’s just a way to reemerge, renew yourself and find what you really want.” Rob discussed that he felt getting his tattoo would propel his personal growth as it acted as a reminder of thought patterns that he found helpful to facilitate transformation, saying,

I think that’s why I got it [the tattoo]; because it challenges me and pushes me to always think and not just kinda take things for granted, or, like, it challenges me to think critically and, just kind of aligns with other things in life, uh, yeah, that also you just can’t explain why they happen.

Retrospectively, Rob related that during the interview he realized that his tattoo represented his growth at that point in his life as well, remarking, “But, yeah, I’m just seeing that even more now since you asked the question.”

Symbols of spirituality. Spirituality is not the most tangible subject, yet it aligns directly with symbolic interactionism in that it allows individuals to define their own spirituality, even when they consider themselves a part of any certain religion or defined spiritual belief. At its core, spirituality is the “concern of the human spirit or soul, as opposed to material or physical things” (Oxford Dictionary, 2017). Such a definition is open for remarkably vast interpretations, making the spiritual basis of tattoos all the more interesting. Many participants related the ways that tattoo represented their spirituality. Even though the study was done from a Eurocentric perspective since the participants (and researcher) are from the United States, and tattoo in the Western world has a different history than that of more indigenous origins, tattoo for the participants was still steeped in spiritual motivations. Many times, the integration of spirituality into the ritual and process of tattoo acted as a catalyst for the previously discussed transformative experience. Marie expanded upon the spiritual aspects of her tattoos, saying,

And my most significant tattoos were by some of my native friends and that was the time and period for me, where I was experiencing kind of like a big spiritual awakening in the sense of, like, embracing my ancestral legacy and really just kind of starting to

understand where my depression was coming from. Understanding just a lot of things, a lot of emotions about myself.

Marie also explained that the reason her favorite tattoo was her favorite was due to the ceremonial environment wherein the tattoo occurred,

Just because it has special meaning for the person that did it, I care about deeply and love so much and it was just a very intimate ceremony that happened. And it helps me remember where I need to walk, what direction I need to go. Yeah, I couldn't ask for a better reminder of that.

Missy too professed that ceremony and ritual was an important spiritual connection to one of her tattoos, also her favorite,

That's definitely my favorite one... Because it has the most powerful message of the tattoos that I have on me. This person was the only person to ever present tattoo as a ritual because it was in her home and she was my friend we talked about it. We discussed it and like there are some things that are meaningful to us to prepare for it and that made it....I was a lot calmer it didn't hurt as much as the other tattoos

Spirituality integrated into the tattoos also served as a reminder that even with trauma there is more to life beyond the pain and suffering caused by the traumatic event. Rob related that the spiritual origins for his tattoo and how comforting having a spiritual reminder was when reflecting on his trauma:

Because I wanted something outside of, like, cuz my faith, like, I want to believe in truth that God tells me, that I'm worth something, like, everything is not my fault and that I'm worth being loved. And so this tattoo, in a sense, represents that because it's symbolic of my faith but also, like, that mystery. Trying to understand those truths even though you don't understand why. It's a struggle to accept them every day. So, um, yeah.

Symbols of identity. Although existing research finds that tattoo motivations often include indication of group identity or personal identity formation (Mun, Janigo, and Johnson, 2012; Atkinson, 2003), identity for a survivor of sexual trauma is more complex as it involves not only typical developmental identity but also the integration of identity as a survivor, identity separate from the trauma, and connection to a beloved identity in spite of the trauma. Just as with

the theme of empowerment and control, it was important for survivors to carve out an identity that was their own, one they had shaped through processing their trauma, gaining strength and personal growth, and the identity that has formed in spite of their traumatic experiences. This new identity often was associated with a sense of pride and beauty, much like symbols of transformation, and tattoos served as a visual representation to the world the acknowledgment and acceptance of this new identity in the ever-evolving individual. Additionally, this new identity often came with newfound self-confidence, renewed self-worth, and an increase in self-ownership. Jess related the way tattoo acted to aid in the creation of a new identity when she related, “I think people that know me well see it [tattoo] as a representation of my life experiences marking me and how I integrate that into, I integrate, ya know, things that have happened to me into my personality.” Similarly, when asked what was gained from the process of getting a tattoo, Deliah simply said, “The ability to actually realize that I can have an identity on my own.” Nan described the loss of identity a survivor may suffer from and how tattoo can transform that. When asked if she thought identity was important to survivors of sexual trauma, she related, “Yeah, I think it is, especially with identity and stuff, that in situations like that, you kinda lose who you are because at that point, you become just another statistic.” Further, Nan related that new identity to healing, “I think the being able to reclaim your identity and your confidence and your control of the situation is hugely important in being able to heal from sexual abuse,” and discussed how tattoos have helped her solidify that new identity. Marie expressed the importance of outwardly displaying her identity in the wake of growing up surrounded by violence,

And so, part of that is, like, these tattoos are a way for me to heal from having to grow up in poverty, having to grow up within violence in my neighborhood and in my schools. Not in my home but always, the other parts of my environment is very violent. And so I just, each tattoo, it was significant, it was part of my becoming the person that I always

was, like being brave enough to be that person externally.

The emphasis on the tattoo coming first as dipping their toe into the water of their authentic identity was a common theme throughout the interviews. The tattoo was just the beginning in expressing who they were becoming, or would like to become. Much like the often discussed phoenix, which many of the participants felt closeness to as a symbol of renewal, transformation, and strength in spite of painful experiences, the tattoos for some began to represent the ashes from which they were rising.

Other Facets of the Tattoo Experience

Although the motivations of tattoo for survivor participants was integral to answering research questions focused on the therapeutic processes of tattoo, there were other themes that emerged regarding limitations to that therapeutic value. Most notably, was the importance of the relationship between the survivor and the artist. The function of this intimacy and comfort is discussed here.

Intimacy and comfort. For the survivor participants, the relationship with the tattoo artists was necessary for comfort and safety. Particularly once participants were mindfully obtaining tattoos for therapeutic purposes, they became aware of their limitations when it came to not only the artists but also the space on their bodies they had chosen for the tattoo to occupy. For some who were women survivors, it was very important that they had a female tattoo artist. So much of the trauma the participants had experienced had been perpetrated by men, and as a result, they didn't feel comfortable being vulnerable with male artists. Estelle explained her perception on considerations when getting a tattoo as a survivor:

Like some women, it may depend on the gender of their tattoo artist may be important, because it is an intimate thing, um, really consider location, based on what you've been on what has the most significance, or that you definitely don't want anyone to go near,

uh, I think some people probably should consider things differently things like that before.

She expressed further how intimate the tattoo process can be and why those considerations are so important:

Going in, getting a tattoo is such an intimate thing, even if you're getting it on your foot, you're letting someone permanently put art on you, and for a lot of people in any way, having someone touch their body after going through trauma, is a huge deal, so even just deciding where to get a tattoo, would have to be a big consideration.

Estelle recognized both the consideration for gender of the artist as well as the importance of recognizing how the location of the tattoo might affect a survivor. Selena furthered the sentiment of understanding the environment before getting a tattoo as a survivor, explaining the potential harms if a survivor isn't comfortable,

I have been a victim of sexual assault multiple times, like most victims. And making sure that you're in a place, since most artists are male, so making sure you're in a headspace where you can accept a male artist touching your skin. Or being in an environment that is predominately male. I mean, that's mostly male artists, mostly men are getting tattoos. And if you don't feel comfortable in that type environment, taking someone with you or really working through a lot more of the trauma that you've experienced before you put yourself in that type of situation. And you may become triggered without even realizing that it would trigger you.

The actual process of choosing the art and feeling comfortable enough with the artists to disclose the motivations behind the tattoo were also important to the participants. Through this process, rapport was built and intimacy was formed between them and their artists. For some, this was essential to their comfort during the tattoo process. Having an understanding that the artist was playing an active role in the healing process, even just by hearing the participant when they talked, had therapeutic value for the participants. Shayla related the importance of an invested tattoo artist to the process:

There's some that are just doing their job and there's some that are interested in why you're doing it, and I feel like when they put themselves into it, when he showed up, he put part of himself into it. It creates, it forges, almost, a connection. And then there's

others who just put it on, you know, buzzed it through really quick and that was it. And that wasn't as pleasant of an experience.

Marie explored the intimacy of tattoo beyond just the perspective of a survivor and wandered into the ritual and ceremony of tattoo as a symbol of the bonds of feminism. Due to her indigenous roots, she likened tattoo to a sweat ceremony, a time when women go to the sweat lodge together to create a bond through the heat and emotional catharsis that comes from the sweat. In that way, Marie was more comfortable with women simply because it was more ritualistic, creating a more comfortable environment to process feelings and shared experiences:

And so, within that, I'm not as comfortable around men doing this intimate work and I would prefer to do this type of rites of passage with other women. As a way to honor ourselves, but also for comfort. For feeling like, "I'm seen as a whole person and not being objectified. There's no opportunity for inappropriate behavior." You know, it feels safer.

Conclusion

The act of obtaining a tattoo for the survivor participants is meaningful and offers a therapeutic act. The act of interviewing the participants illuminated the magnitude of that therapeutic response for some of the participants; retrospectively understanding their motivations and intentions more deeply. Some of them mentioned how even just exploring the tie between their tattoos and their trauma was therapeutic. Others were more aware of the relationship between the tattoo and their traumatic experiences, more intentionally attaining the tattoos to signify their reclamation or transformation from the pain. Similarly, the catharsis involved that allows survivors to process their pain through a meditative pain response was something many of them actively sought out, and that process aligns with existing therapies for PTSD and anxiety. Unsurprisingly, control was a motivational factor for all of the participants. As a survivor of sexual trauma myself, I actively recognize the necessity of control to function- control over my body, control over my healing process, and control over my life trajectory. More surprising to me

was the attention to creating an active life map through tattoos; a timeline of events that was therapeutic itself as it tracked the participant's life achievements and allowed them to have a constant visual reminder of commitments they had made to themselves and others, some regarding personal growth. The beauty in the meaning of the visual life-map the participants created was moving to me, and allowed me to truly recognize the value of tattoo for not only survivors of sexual trauma, but of any incident that had led to some form of grief. Tattoo is a transformative tool; the participants mentioned many times the transformation that tattoo facilitated, acting as a catalyst for them to "rise from the ashes" of their experiences and emerge "renewed" and ready for the next plot on their timeline. Perhaps the most difficult part of analyzing the participant's contributions was limiting myself as there were so many moving quotes and the depth of the themes and the ways they interconnect and intersect is so vast and interesting. Indeed, the themes presented here were the most evident and perhaps the most important for the message of the research, however, there is still much to be explored within the words of the survivors.

Artists Perspectives

Those performing the tattoos had a sometimes surprisingly deviant perspective on tattoo motivation from the survivor participants. While all of them were tattooed themselves, some very heavily, many of them were much more dedicated to the craft of tattoo than to the meanings behind individual tattoos. The artists, as mentioned previously, were extremely protective of their art form; many of them expressing the desire to keep it as professional and sacred as possible. Upon further inquiry, it became more obvious that the motivations for the secrecy and interest were rooted in feeling slighted by mass media and proliferation of tattoo as a profession in recent years. One of the main reasons the artists felt angry with the media portrayal of tattoo

was because it normalized attaining tattoos and they felt that tattoos, historically reserved for societal outliers, should remain that way.

Anti-Normative Expression

Almost all tattooing breaks down into two categories, and it's gonna to sound a little bit primitive but it's either to belong to the herd or otherness. Ok? -Ruth

Ruth had been tattooing for 17 years when she was interviewed and when she was initially contacted to participate she was hesitant, defensive, and even abrasive. After she understood the intent of the study, not to advocate for tattoo as a viable therapy but rather to understand what, if anything, about the process was beneficial to survivors of sexual assault, she was on board to participate. Her initial hesitation was hashed out in the interview- she wanted to hold on to her "otherness" as she called it, and was unwilling to allow yet another entity to report on tattoo in a way that would make it more palatable to the mainstream. She observed that many people got tattoos to remain "others," a status outside the status quo, regardless of other motivations. Ruth explained further that people can get a tattoo and feel unique, but those who are already societal outliers cannot choose their "otherness" as simply as choosing to get ink. She related, "For people that fit in the otherness category, our otherness is there no matter what. It's simply expanding upon that and making the outside look like the inside." She furthered this desire to keep tattoo as a non-normative behavior:

It's a big difference because so many people have pushed that envelope and it has become so mainstream for the people that are others are having to step further and further outside to remain different. That's not always good either, that makes things even more drastic.

Cameron supported Ruth's position as well, stating "To stick out. I mean, you're in a world with a bunch of similar people, you want to stick out somehow, ya know." Jeff also felt that some people want to feel non-normative, "I guess it makes them feel more interesting to have

something tattooed on them.” Existing research endorses non-normative motivations as well, Atkinson (2014) found that women sought out tattoos as a way to deviate from societally accepted notions of beauty, and John-Roberts (2012) found that societal deviancy and countercultural expression were a primary motivation for tattoo attainment among the participants in that study. Historically, in white, Euro-centric culture, tattoo has been the marking of the deviants, the societal outcasts, and those desiring to not adhere to societal trends (Carroll & Anderson, 2002; Foltz, 2014; Forbes, 2001). Accordingly, the perception of the tattoo artists that tattoo motivation is still tied strongly to the culturally subversive is not surprising.

Therapeutic Role

The main purpose of this study was to investigate in what way tattoos can serve as a healing process for survivors of sexual trauma. One of the research questions exploring this was “To what level do tattoo artists participate in the therapeutic process of tattoos if there is one? Do the tattoo artists experience a therapeutic role?” Every tattoo artist that participated in the study expressed that tattoos play a therapeutic role for many people, some more acutely aware of it than others. A few of the tattoo participants when reached for recruitment to the study responded to the initial Facebook message with various forms of “I *do* feel like a therapist.” Cameron specifically said “I’ve thought about opening up a therapeutic tattoo shop” in his response. When asked if people share their reasons for obtaining tattoos, Raven responded “Yeah, we’re little therapists. We are. You know, when you’re sitting there for 2, 3, 4 hours, all walls kind of break down and I’ve only had two people ever not share why they’re getting their tattoo.” Indeed the theme of being a “stand-in therapist” was repeated by many of the artist participants, Dave outright said “I feel like a therapist sometimes.” Through expansion on this thought, Dave explored what was therapeutic about tattoos, and he mentioned the pain of the process requires

an instant rapport with the artist, which then would prompt the survivor to talk about their life experiences. He also explained that the permanence of tattoo was different than other types of processing:

Taking control. And it's something that you can't take back. I can get into my friend's car, put my makeup on, look all gaudy and then take it off and rebel a little bit that way, but I'm taking it off when I get home. You're not really facing it. If I put that tattoo across my chest and then I go home, there's no going back from that.

Jeff too, mentioned that tattoos were therapeutic to some people, noting that it depends on the individual:

Some do [talk about their motivation for tattoo]. Some people, I mean you have your different groups. You have some people that it's really an experience for them. It's therapeutic and they want to talk about why they're getting what they're getting. Some people just, you know, like to share everything about themselves too.

Three of the artists declared that they personally chose tattoos to overcome events in their lives, and Owen even likened the experience to a meditative process, and again explained the importance of the "forced rapport" that happens when an individual gets a tattoo:

Yeah, and I'd say therapy in a way. Because if it's a tattoo that takes any real amount of length of time, you're being forced in a way to sit down and talk with another human being. And if that thing, if your tattoo has any meaning, you're gonna get on that and you're going to be talking about the thing. So you get a chance to...I think that's the biggest thing in any therapy for people on events, is just talking with another human being. So just being put in a situation where it's present, you're going to. It's available and there's another human to talk to.

Cameron also expressed the reason tattoo artists so readily fulfill the therapist role, providing a perspective on the difference between a tattoo artist and a traditional therapist:

That I think opens the door a lot easier for people to talking to someone who they don't know. And because of the undergroundness of, like I was saying, the society thing, I think people are more comfortable talking about what they have going on because they don't feel like they're going to get judged. When you get talking to a suit and they're staring at you all judgmental, that closes a lot of people off.

The parallels of traditional therapy and tattoo was clearly not lost on the tattoo artists, never fully advocating for tattoo as an accepted form of therapy, but rather a process that some people choose to address their psychological distress. Tattoo has long been a non-normative experience, and as such the tattoo shop seems to provide the individual with an environment that breeds comfort with the different, whether it is the desire to cover one's body in ink or if it's a shadowed past that has been stigmatized by societal norms. The artists noted they had tattooed people who were sexual trauma survivors and domestic violence survivors, people recovering from addiction, and people who had been battling a mental illness of some kind, and those who were previously felt suicidal or deeply depressed. In many of the stories shared, the people getting the tattoo were aware of the process- they actively were seeking a tattoo as a means to give them a badge of honor for overcoming something they felt was important for their growth as a person, which is essential for any therapeutic process.

Intimacy on the Other Side

All of the artists expressed that they understood tattoo as a potential therapeutic experience for those getting them, however, they all had varying opinions on the function of the artist in that process and their personal role as "artist-therapist." Some of the artists were more withdrawn in their perception of the role of intimacy in tattoo; that being a tattoo artist is simply another job and "you just do your job and go home." Others, however, were deeply invested in their role for the client, expressing an importance of the "vibe" between the client and artist and an existence of some intimacy during the design and application process. Ruth continually laughed about sounding "crunchy" or "flakey" when she described the need for a bond between the artist and client, however, her perception resonated among the other artists too. She discussed the role of her own openness in the process and related,

Because it's a weird spectrum of issues. To design something for someone you have to be open enough to connect to them. Let go of your stuff so that you're not running your own filter. So you need their flow of energy to figure out what it is and to coax them out with it. Because, quite often, what people say isn't really what they're wanting to say. To get the real feelings behind what they want and designing for that. So you do have to be open enough. But at the same time, it's sometimes too open, especially with trauma survivors.

Cameron mentioned the necessity for a mutual connection in order to feel at peace with the art he created for the client:

Through the process of designing it. Once I start, I really have an idea. But I really like, especially if it's a complex piece, I really like for them to sit with me and tell me who the person is that's getting it. Who is it for? What did this person like? That really does help design it. So, yeah.

Dave also felt that if an artist takes the time to know the client, the client will be happier with the end result, and intimacy was an important factor for that:

You know, you get into a little room with a guy and you're like, "ahh, I don't know what to do." It's kinda nerve-wracking. He's wanting to get it done real fast. That guy's not going to get opened up to by clients. But the guy who took the time to learn what you wanted even though you didn't really know you wanted it and then y'all pulled it out together, he's made that bond. And now you're tattooing them and then you tattoo them over and over again. I don't know about trauma survivors but I tattoo a lot of life survivors. You know what I mean? Everybody's a trauma survivor at this point.

Another common theme relative to intimacy was the pain of getting a tattoo. The artists often discussed ways in which the pain would create an instant intimacy, one in which the conversation flow was a natural product, again relating to a therapeutic experience for the client. Raven expressed this succinctly, "People don't like to scream. People don't like to let people know they're in pain. That's a very private thing. And so, whenever somebody starts to be in pain, they start to open up." Dave also felt pain was a catalyst for immediate intimacy between client and artist,

A lot of trauma survivors have, a lot of their trauma there's a physical pain attached to it. From all types of abuse. I mean we're talking about from PTSD, all kinds of things that, and when you, I mean I'm inflicting a pain on somebody. It's a controlled pain; it's a

pain that they're choosing. And I'm sure there's all kinds of theories as to why, but that opens a person up.

Regardless of whether pain, connection, or personal "vibe" created the intimacy, the artists all felt that their art was better when they knew the client better. Further, if the client shared the motivation for the tattoo, the artist could make it a more personal experience and the clients were more satisfied with the end result. Having the story made the job more enjoyable for the artist as well, creating a sense of purpose and connection to other humans that was satisfying. Cameron summed this sentiment up nicely, saying:

I like people's stories, and you know, like any job it can get tedious and you can have your moments where you're doubting whether you love it or not, but, I do like really enjoy connecting to people. So, it's never their stories that drain me.

Conclusion

Since this study was voluntary, the artist participants naturally had a preexisting fascination for the therapeutic potential of tattoo. As such, their responses cannot serve to represent tattoo artistry as a whole, but just their personal experiences with tattoo as an art form. However, their responses were still helpful in understanding their role as provider of tattoos for those who have experienced trauma. The narratives that explored therapeutic value for their clients deepen the understanding of motivations for attainment of tattoos by survivors, and can give a unique perspective on the use of not only tattoo for transformation, but the process of art in general. Perhaps the biggest contribution of the artists to this study was a more balanced perspective, as they could readily say "some people have deep meanings for tattoos, while others just want a laugh," which offset the impassioned quotes of the survivors. Similarly, they could express how important their relationship with the client is to the outcome of the tattoo, since the process and artistry relied on the uniqueness and story of the individual. Moreover, their

experiences with the therapeutic value of tattoo validate the narratives of the survivor participants, supporting the idea that there are others who seek tattoos for similar reasons.

Chapter 6- Limitations, Implications, and Conclusion

Methodological Limitations

The qualitative study design required that the sample size be relatively small (N=17). Since the recruitment process was using snowball sampling, the diversity of the sample was also limited to those who were either known to the researcher or were acquaintances of those known to the researcher. The limitation of sample size and sample diversity reduce the generalizability of the study findings to the population that participated in the study.

Every attempt to reduce researcher bias was made, however, the qualitative data analysis process relies on the experiences and perceptions of the researcher when defining and operationalizing codes for themes. Even though codes were evaluated by other professionals familiar with the research to improve inter-rater reliability, even then the codes are subject to the geographical, cultural, and personal experiences shared among the reviewers. Additionally, the participants who were willing to be included in the study were also subject to geographical and cultural norms that may have shaped their understanding of the interview questions and terms such as “therapeutic.” These meanings attached by the participants could have influenced the way the data was interpreted, as well as the emotional responses that were exhibited during the interviews. A mixed-methods design could produce findings that are more generalizable. Additionally, the codes were read by three people, however, each person was familiar with the work and the initial study proposal. To enhance inter-rater reliability, recruiting professionals from outside the study could provide more objective views of the content and a more diverse perspective on the coding process. Similarly, a larger, more diverse sample could provide

participants that have different cultural contexts regarding tattoo and sexual trauma, and therefore may have differing answers to the interview questions.

Another limitation of the study was language used in recruitment. In recruiting the survivor participants, the language used was “survivor of sexual trauma.” It is possible that other people who qualified for the participant criteria may have not been accessed through this language, identifying instead as “victims of sexual trauma” or “victims of sexual assault.” The way a person identifies may have led them to believe they were not qualified to participate, or the recruitment flyer may simply not have resonated with them using this language. Using more encompassing terms may have identified qualified participants at different places in their healing journey, and as such, may have limited those who volunteered to participate.

Because the approach to recruitment was to allow participants to self-identify as survivors of sexual trauma, without specific parameters for this definition, this study also did not attempt to identify or address severity, type, or duration of sexual trauma. Thus, it is possible that there are differences in motivations and processes of getting a tattoo depending on severity, type, and duration of sexual trauma that were not explored in this study.

Implications for Further Research

Further research should include a larger sample size with more diverse demographics, as well as a mixed-methods study design wherein statistical survey information would be interwoven with personal narrative to support the findings more robustly. Further, research outside of the geographic confines of this study may provide results that do not support the findings of this study, as there are cultural differences in symbolic meaning and symbolism related to tattoo even within different states in the United States. Additionally, exploration of differences between tattoo motivations among those identifying as having indigenous heritage

and those without that heritage may yield results that show a disparity in motivations as the populations have different historical cultural perspectives informing their symbolism of tattoo.

Additionally, further research could examine severity, type, and duration of sexual trauma in an attempt to identify any differences in processes and therapeutic value of tattoos between and among those subgroups. Similarly, recruitment could have language that encompasses more of the experience of survivors of sexual trauma by expanding on recruitment language to include “victim” and “sexual assault” or even specific types of sexual trauma such as “rape” or “childhood sexual abuse.” This identifies may yield differences in the experiences related to tattoo attainment for survivors of sexual trauma.

The nature of the findings indicates that a study on tattoo motivation for other mental health issues such as depression, anxiety, and specifically PTSD diagnoses might be beneficial to the literature base. Further, explorations into tattoos obtained by survivors of eating disorders, domestic violence, and even war (combat veterans) could strengthen the argument for clinicians to regard tattoos as having valuable, therapeutic meaning for their clients. During the course of this study’s data analysis, many incidences within social media and “viral” videos and technologically-based landscapes were unearthed wherein groups of individuals were expressing use of tattoo to overcome their “battles” with mental illness, their escape from harmful relationships, and their transformations occurring due to personal growth. As such, research that examines social media comments or other anonymous online forums for motivations may yield useful information for a subsequent study on therapeutic benefits of tattoo for a wider and more diverse sample.

Implications for Social Work Practice

Life narrative. The Multi-Systems Life Course analysis of this study provided several implications for social work practice. Foremost, if tattoos act as a personal narrative or journal of life events, then clinicians have a unique opportunity to approach tattoos much like a genogram; simply asking a client to share about their tattoos can help build rapport and gain deep insight into the client's experiences, contextual understanding of the systems around them, and the meaning they place on certain symbols and life events.

During the interviews, the participants began talking fluidly about their experiences to the researcher when prompted by the question "tell me about your tattoos." Although the researcher had some previous knowledge and relationships with some of the participants, the response was the same regardless of pre-existing relationship. Discussion of that tattoo acted as a safe, non-threatening way to explore trauma, as though the participant them self was removed from the events and the tattoo was "doing the talking." In this way, clinicians could easily explore life events with a client in a way that doesn't expose them or create vulnerability before it is expected.

Further, the use of narrative, and specifically recalling the trauma narrative, is an evidence-based practice for working with survivors of trauma (Robjant and Fazel, 2010). Narrative Exposure Therapy (NET) helps survivors of trauma and those with PTSD repeatedly recall traumatic events in an effort to reorganize their memories of the events into a chronological representation of events (Robjant and Fazel, 2010). The initial session of NET involves creating a visual representation of their life in timeline form with symbolic figures to represent life events (Robjant and Fazel, 2010). Creating this narrative allows survivors to have control over the narrative and over their healing (Robjant and Fazel, 2010). Participants in this

study related that their tattoos acted as a life timeline, a personal narrative of experiences, and as such, tattoo could be used to begin a narrative therapy intervention.

Symbolic Interactionism and rapport building. Tattoo can offer the clinician a window into the culture of the person- the roles the client feels are important, what values they hold dear, and how they interact with their families, communities, and the world around them. Additionally, while this study focused on tattoo art, it is reasonable to assume that these findings can extend to other art forms; sketchbooks, journaling, painting, and crafting may also be viable options as tools to assess clients, particularly ones who have a trauma history. Asking a client to share and elaborate on their tattoos or art sketchbooks can give a clinician an understanding of how the client perceives the world around them, their role in their community, and the dynamic of their families and interacting systems.

Similarly, when assessed at a community level, tattoo can give social workers insight into issues that have impacted a community as a whole as well as their culture. Having an understanding of tattoo and the meaning it has for a community can inform practice as it provides a social worker with a historical, generational, and current understanding of the way the community has been developed, interacts with the systems it is involved in, issues that are common among its members, and the meanings the community places on certain symbols as a whole. For example, at this current time, there is a larger protest underway at the Standing Rock Reservation in North Dakota. The protest was developed with the intent of stopping the Dakota Access oil pipeline from running through the Missouri River, with the potential to ruin the tribe's water supply. The protest has prompted many members to get tattoos regarding the meaning they place on the importance of water, their spiritual ties to the land, and to signify their resistance to the oil company and local law enforcement. Tattoo can act as an anthropological tool that

assesses a community even in present day, giving social workers who do macro and mezzo level work the opportunity to understand historical and generational issues, as well as understanding the individual's experience of those events at the micro level.

Using MSLC with tattoo. Nine (N=9) of the survivor participants indicated that their tattoos served as a visual representation of significant life events they had experienced, some of them mentioning it multiple times relative to different tattoos. Bringing in MSLC to analyze the data highlighted the importance of this theme as it reveals that tattoos can likely be used by clinicians as a talking point to better understand how these symbolic life events have shaped the trajectory of the client. Similarly, the key theme of personal narrative, is likely to extend to entire communities which may be assessed by the themes of their tattoos, perhaps illuminating mezzo-level life experiences shared by those in communities or cultures.

A tattoo can also act as a genogram in some form, a visual understanding of the familial dynamics an individual experiences, as well as the system-level impacts on their lives. For instance, a tattoo memorializing a deceased family member can allow a clinician to assess other aspects of the family if the topic of that particular tattoo is approached. Further, tattoos may indicate frustrations with systems-level impacts on personal lives, such as racism, sexism, and any systemic function that induces oppression.

One participant, Estelle, explained the meaning a spider tattoo held for her, which is very different than other representations of spiders have been,

The second one is a tribal spider, which is hilarious because I hate spiders, but for me...it was after the divorce, it was a couple years before I could afford it, and it just represented strength, and power, and being able to make my own choices and follow through.

As evidenced by the quote, the symbolic interactionism that is inherent in MSLC also provided further understanding of the key themes that had emerged. While some symbols may be deemed

as having universally acceptable meanings, the interviews with survivors indicated that designs can be chosen based on the individual's assignment of meaning to the symbol which supersedes larger societal constructs. By asking an individual what their tattoos means to them personally, a clinician has astonishing insight into not only what is meaningful for the client, but also the ways that the client constructs meaning as well. This development can shape treatment as it allows the clinician a window into the client's functioning as well as build lasting rapport.

This study was designed using a symbolic interactionism framework, one of the main components of MSLC. The intention with using symbolic interactionism was that the experiences of the survivors were individual and the meaning of their tattoos was for them to define and disseminate. The research questions were designed with symbolic interactionism as the guide, however, the three other theoretical perspectives that MSLC contributes (Life-Course theory, Social Change theory, and Ecological theory) added depth to the analysis of the data. MSLC provided additional potential themes that were then translated into codes for analysis of the data. Indeed, codes relative to overcoming stigma, shifting perspectives on beauty, and altering the culture of patriarchy within our society heralded complex interactions of Symbolic Interactionism, Ecological Theory, and Social Change theory. Similarly, historical references to culture or family systems were coded to present aspects of Life Course Theory and Ecological Theory as well, resulting in a comprehensive framework to develop and analyze the codes as they emerged from the narratives. MLSC allowed the coding process to integrate more critical thinking and complexity when assigning meaning to the words being spoken, and as such, was fundamental in the data analysis process.

Change stigma in society and clinical practice. Understanding the importance, value, and meaning tattoo has for so many people has the potential to alter stigma attached to tattoo.

Through casual discussion on this research, the researcher experienced many instances where other social workers were amazed by their own perceptions of tattoo once the researched challenged their own assumptions. Often times, discussion of the research prompted social workers to share their experiences with tattoo; whether their own, a client's, or someone they knew. These exchanges often resulted in the social worker's own admission of ignorance to the motivations of tattoos, as well as a verbal commitment to not place stigma on those who have them due to the new knowledge they had. In this way, the findings of this research offer clinicians a chance to self-reflect, assess their own bias, and shift their perspectives on individuals who have tattoos. Consequently, that personal shift can permeate larger societal shifts which allow the narrative surrounding tattoo to be more inclusive of those who have attained their tattoos for a therapeutic motivation.

Conclusion

The findings of this study support further inquiry into the role of tattoo in modern American society, particularly for those who have experienced trauma. The artists in this study had somewhat varying opinions on the way tattoo is utilized as a therapeutic mechanism for survivors of sexual trauma and the general population, however, they all agreed that tattoo has therapeutic value for many individuals, themselves included. The artists had a more distanced approach to the use of tattoo to overcome residual psychological conflicts from trauma, whereas the survivor participants more readily discussed the conscious use of tattoo as a catalyst for personal change, growth, and healing. This conscious approach to re-writing the narrative of their lives in their own skin aligns with existing therapies on multiples levels. The symbolic timeline in which survivors used tattoo to shape their own narrative and trajectory as a means of control is akin to the process of Narrative Exposure Therapy, particularly if they are comfortable

re-telling their story of trauma. The pain of getting a tattoo, and the cathartic release often associated with it in this study, is much like the therapeutic rewards of strenuous exercise. Further, the meditative state often required by the individual to endure the pain of tattoo, aligns comfortably with the mindfulness activities, yoga, and meditation that often yields results for trauma survivors and those with PTSD. Due to the alignment with existing therapies and the depth of the meaning related, these benefits expressed by the participants and the artists should be considered by practitioners who engage with survivors of trauma with tattoos. The findings of this study offer a valuable tool with which to engage with clients. Additionally, the perspectives shared within this study present the necessity of clinicians' continued growth in the realms of personal bias and cultural perception; as mindfulness of the personal experiences of clients is essential to effective and empathetic clinical practice.

References

- Allen, K. and Jaramillo-Sierra, A. (2015). Feminist theory and research on family relationships: Pluralism and complexity. *Sex Roles*, 73, 93-99.
- Antoszewski, B., Sitek, A., Fijalkowska, M., Kasielska, A., and Kruk-Jeromin, J. (2010). Tattooing and body piercing- What motivates you to do it? *International Journal of Social Psychology*, 56(5). doi: 10.1177/0020764009106253
- Atkinson, P. (2015). Rescuing interactionism from qualitative research. *Symbolic Interaction*, 38(4). 467-474. doi:10.1002/symb.183
- Atkinson, M. (2002). Pretty in ink: Conformity, resistance, and negotiation in women's tattooing. *Sex Roles*, 47(5).
- Barnes, V.A., Rigg, J.L. & Williams, J.J. (2013). Clinical case series: Treatment of PTSD with Transcendental Meditation in active duty military personnel. *Military Medicine*, 178 (8), 836-840.
- Beers, K. Santa Clarita tattoo artist helps women reclaim their bodies after cancer. Retrieved from: <http://www.hometownstation.com/santa-clarita-latest-news/santa-clarita-tattoo-artist-helps-women-reclaim-their-bodies-after-cancer-169577>
- Caplan, Jane. *Written on the Body*. London: Reaktion Books.
- Carmen, R. A., Guitar, A. E., & Dillon, H. M. (2012). Ultimate answers to proximate questions: The evolutionary motivations behind tattoos and body piercings in popular culture. *Review of General Psychology*, 16(2), 144-151. doi:10.1037/a0027908
- Carroll, L., & Anderson, R. (2002). Body piercing, tattooing, self-esteem, and body investment in adolescent girls. *Adolescence*, 37(147), 627-637.
- Center for Disease Control (2000). *Full report of prevalence, incidence, and consequences of violence against women* [Data file]. Retrieved from: <https://www.ncjrs.gov/pdffiles1/nij/183781.pdf>
- Chahal, P. K. (2013). A trainee counseling psychologist's considerations in CBT informed practice with adult survivors of childhood sexual abuse. *Counseling Psychology Review*, 28(3), 30-42.
- Chandler, H., Alexander, C.N., Heaton, D.P. (2005). The Transcendental Meditation Program and postconventional self-development: A longitudinal 10-year study. *Journal of Social Behavior and Personality*, 17(1).
- Clark, E. & Smythe, L. (2011). The effects of childhood sexual abuse on labour and birthing: An exploration to assist midwives. *New Zealand College of Midwives Journal*, (45), 21-24.

- Coia, L., & Taylor, M. (2013). Uncovering our feminist pedagogy: A co/autoethnography. *Studying Teacher Education, 9* (1), 3-17.
- Cogle, J., Timpano, K., Sachs-Ericsson, N., Keough, M., Riccardi, C. (2010). Examining the unique relationships between anxiety disorders and childhood physical and sexual abuse in the National Comorbidity Survey-Replication. *Psychiatry Research, 177*(1).
- Culbertson, L., Agee, M., Makasaile, C. (2007). *Penina Uliuli: Contemporary challenges in mental health for Pacific peoples*. Honolulu: University of Hawaii Press.
- DeMello, Margo. (2000). *A cultural history of the modern tattoo history*. Durham and London: Duke University Press.
- Easton, S.D., Coohy, C., O'Leary, P., Zhang, Y., and Hua, L. (2011). The effect of childhood sexual abuse on psychosexual functioning during adulthood. *Journal of Family Violence, 6*(1), 41-50.
- Foltz, K.A. (2014). The millennial's perception of tattoos: Self-expression or business faux pas? *College Student Journal, 48*(4).
- Forbes, G.B. (2001). College students with tattoos and piercings: Motives, family experiences, personality factors, and perception by others. *Psychological Reports, 89*.
- Gaon, A. K. (2013). Dissociative symptoms as a consequence of traumatic experiences: The long term effects of childhood sexual abuse. *Israel Journal of Psychology and Related Sciences, 50*(1), 17-23.
- Gibson, L. and Leitenberg, H. 2001. The impact of child sexual abuse and stigma on methods of coping with sexual assault among undergraduate women. *Child Abuse and Neglect, 25* (10), 1343-1361.
- Grumet, G. W. (1983). Psychodynamic implications of tattoos. *American Journal of Orthopsychiatry, 53*(3), 482-492. doi:10.1111/j.1939-0025.1983.tb03392.x
- Hébert, M., & Bergeron, M. (2007). Efficacy of a group intervention for adult women survivors of sexual abuse. *Journal of Child Sexual Abuse, 16*(4), 37-61 25p.
- Hendriks, L., de Kleine, R., van Rees, M., Bult, C., & van Minnen, A. (2010). Feasibility of brief intensive exposure therapy for PTSD patients with childhood sexual abuse: A brief clinical report. *European Journal of Psychotraumatology, 1*.
- Hutyrová, M. (2016). Utilization of narrative approach in art therapy in children with behavioral problems. *Review of Artistic Education*. Issue 11/12, p284-289. DOI: 10.1515/rae-2016-0034
- John Roberts, D. (2012). Secret ink: Tattoo's place in contemporary American culture. *Journal*

- Of American Culture*, 35(2), 153-165. doi:10.1111/j.1542-734X.2012.00804.x
- Karakurt, G. & Silver, K. (2014). Therapy for childhood sexual assault survivors using attachment and family systems theory orientations. *The American Journal of Family Therapy*, 42, 79-91. doi: 10.1080/01926187.2013.772872
- King, A., & Wardecker, B. E. (2015). Personal mastery buffers the effects of childhood sexual abuse on women's health and family functioning. *Journal of Family Violence*, 30(7), 887-897.
- Krutak, L. (2006). *Crest tattoos of the Tlingit and Haida of the Northwest coast*. Retrieved from: http://www.vanishingtattoo.com/crest_tattoos_tlingit_haida.htm
- Marshall, M.N. (1996). Sampling for qualitative research. *Family Practice*, 13.
- McEwen, B. S., & Gianaros, P. J. (2010). Central role of the brain in stress and adaptation: links to socioeconomic status, health, and disease. *Annals Of The New York Academy Of Sciences*, 1186190-222. doi:10.1111/j.1749-6632.2009.05331.x
- McGregor, K., Thomas, D., & Read, J. (2006). Therapy for child sexual abuse: women talk about helpful and unhelpful therapy experiences. *Journal of Child Sexual Abuse*, 15(4), 35-59.
- McGregor, K., Gautam, J., Golver, M., and Julich, S. (2013). Health care and female survivors of childhood sexual abuse: health professionals' perspectives. *Journal of Child Sexual Abuse*, 22(6), 761-75.
- National Center for Victims of Crime (2012). *Child sexual abuse statistics*. Retrieved from: <https://victimsofcrime.org/media/reporting-on-child-sexual-abuse/child-sexual-abuse-statistics>
- New Zealand Tattoo (2017). Maori tattoo: The definitive guide to Ta Moko. Retrieved from: <http://www.zealandtattoo.co.nz/tattoo-styles/maori-tattoos/>
- Oanta, A., Stoleriu, G., Irmie, M., Branisteanu, D.E., and Morariu, S.H. (2014). Tattoos-History and actuality. *Bulletin of the Transilvania University of Brasov Medical Sciences*, 6 (7.2), 125-132. Retrieved from: <http://0search.proquest.com.library.uark.edu/docview/1658461336?accountid=8361>
- Pack, M. (2011). Discovering an integrated framework for practice: a qualitative investigation of theories used by social workers working as sexual abuse therapists. *Journal of Social Work Practice*, 25(1), 79-93 15p. doi:10.1080/02650533.2010.530646
- Padgett, D.K. (2008). *Qualitative methods in social work research*. New York: Sage.
- Rape, Abuse, and Incest National Network (RAINN) (2016). *Statistics*. Retrieved from: <https://www.rainn.org/statistics>

- Robjant, K. and Fazel, M. (2010). The emerging evidence for Narrative Exposure Therapy: A review. *Clinical Psychology Review, 30* (8), 1030-1039. <http://0-dx.doi.org.library.uark.edu/10.1016/j.cpr.2010.07.004>
- Rutledge, T., Nidich, S., Schneider, R. H., Mills, P. J., Salerno, J., Heppner, P., Rainforth, M. (2014). Design and rationale of a comparative effectiveness trial evaluating transcendental meditation against established therapies for PTSD. *Contemporary Clinical Trials, 39*(1), 50-56. doi:10.1016/j.cct.2014.07.005
- Sassi, R. (2011). Abstract thinking: Trauma and the mind-body connection. *Journal of the American Academy of Child and Adolescent Psychiatry, 50*(7), 631-632. <http://0-dx.doi.org.library.uark.edu/10.1016/j.jaac.2011.04.012>
- Stirn, A., Oddo, S., Peregrinova, L., Phillip, S., and Hinz, A. (2011). Motivations for body piercings and tattoos—The role of sexual abuse and the frequency of body modifications. *Psychiatry Research, 190*(2-3), 359-363. doi:10.1016/j.psychres.2011.06.00180/02668734.2010.526331
- Sarnecki, J. (2001). Trauma and tattoo. *American Association of Anthropologists Journal of Consciousness, 12*, 35-42.
- Schachter, J. (2011). Review of Under the skin: A psychoanalytic study of body modification. *Psychoanalytic Psychotherapy, 25*(2), 209-211. doi:10.10
- Schwarz, M. T. (2006). Native American tattoos: Identity and spirituality in contemporary America. *Visual Anthropology, 19*(3/4), 223-254. doi:10.1080/08949460500297398
- Smith, D., Pearce, L., Pringle, M., and Caplan, R. (1995). Adults with a history of child sexual abuse: evaluation of a pilot therapy service. *British Medical Journal, 310*, 1175–1178
- Strecker, Erin. (2016). Lady Gaga gets matching tattoos with sexual assault survivors from Oscars. Retrieved from: <http://www.billboard.com/articles/news/6898250/lady-gaga-matching-tattoos-sexual-assault-survivors-oscars>
- Mee-Mun, J., Janigo, K., and Johnson, K. (2012). Tattoo and the self. *Clothing and Textiles Research Journal, 30* (2), 134-148. DOI: 10.1177/0887302X12449200
- TV Guide. (2014). Ink Shrinks. Retrieved from: <http://www.tvguide.com/tvshows/ink-shrinks/698918/>
- Ullman, S. E., & Filipas, H. H. (2005). Gender differences in social reactions to abuse disclosures, post-abuse coping, and PTSD of child sexual abuse survivors. *Child Abuse & Neglect, 29*(7), 767-782. doi:10.1016/j.chiabu.2005.01.005
- Ullman, S.E., & Peter-Hagene, L. (2014). Social reactions to sexual assault disclosure, coping, perceived control, and PTSD symptoms in sexual assault victims. *Journal of Community*

Psychology, 42(4), 495-508. DOI: 10.1002/jcop.21624

Van der Kolk, B.A., Stone, L., West, J., Rhodes, A., Emerson, D., Suvak, M., and Spinazzola, J. (2014). Yoga as an adjunctive treatment for posttraumatic stress disorder: A randomized control trial. *Journal of Clinical Psychiatry*, 75(6), 559-565. DOI: 10.4088/JCP.13m08561

Van der Kolk, B.A. (2014). *The body keeps the score*. New York: Viking.

Waechter, R., & Van, M. (2015). Sexual violence in America: Public funding and social priority. *American Journal of Public Health*, 105(12), 2430-2437. doi:10.2105/AJPH.2015.302860

Wohlrab, S., Stahl, J., and Kappeler, P.M. (2007). Modifying the body: Motivations for getting tattooed and pierced. *Body Image*, 4(1). DOI: 10.1016/j.bodyim.2006.12.001

Appendices

Appendix A: Human Subjects Application and Approval Letter

IRB Project Number

UNIVERSITY OF ARKANSAS INSTITUTIONAL REVIEW BOARD PROTOCOL FORM

The University Institutional Review Board recommends policies and monitors their implementation, on the use of human beings as subjects for physical, mental, and social experimentation, in and out of class. . . . Protocols for the use of human subjects in research and in class experiments, whether funded internally or externally, must be approved by the (IRB) or in accordance with IRB policies and procedures prior to the implementation of the human subject protocol. . . . Violation of procedures and approved protocols can result in the loss of funding from the sponsoring agency or the University of Arkansas and may be interpreted as scientific misconduct. (*see Faculty Handbook*)

Supply the information requested in items 1-14 as appropriate. Type entries in the spaces provided using additional pages as needed. In accordance with college/departmental policy, submit the original and one copy of this completed protocol form and all attached materials to the appropriate Human Subjects Committee. In the absence of an IRB-authorized Human Subjects Committee, submit the original of this completed protocol form and all attached materials to the IRB, Attn: Compliance Officer, MLKG 109, 575-2208. Completed form and additional materials may be emailed to irb@uark.edu. The fully signed signature page may be scanned and submitted with the protocol, by FAX (575-6527) or via campus mail.

1. Title of Project

Phoenix Ink: Psychodynamic Motivations for Tattoo Attainment by Survivors of Trauma

2. (Students **must** have a faculty member supervise the research. The faculty member must sign this form and all researchers and the faculty advisor should provide a campus phone number.)

Phone	Name	Department	Email Address	Campus
Principal Researcher	December Maxwell	Social Work	dmaxwel@uark.edu	
Co-Researcher				
Co-Researcher				
Co-Researcher				
Faculty Advisor	Dr. April Rand	Social Work	arand@uark.edu	

3. Researcher(s) status. Check all that apply.

Faculty Staff Graduate Student(s) Undergraduate Student(s)

4. Project type

Faculty Research Thesis / Dissertation Class Project Independent Study/

IRB Project Number

Staff Research

M.A.T. Research

Honors Project

Educ. Spec.
Project

5. Is the project receiving extramural funding? (Extramural funding is funding from an external research sponsor.)

No Yes. Specify the source of funds

IRB Project Number

6 Brief description of the purpose of proposed research and all procedures involving people. Be specific. Use additional pages if needed. (Do not send thesis or dissertation proposals. Proposals for extramural funding must be submitted in full.)

Purpose of research: The purpose of this study is to understand motivations for undergoing body modification (tattoos) and to determine if tattooing is a source of therapeutic process for those who are survivors of trauma and victimization.

Procedures involving people: Snowball sampling will be used to recruit participants for this study given that reaching participants that possess the combination of a tattoo and survivor of sexual violence may be difficult in other sampling methods. To recruit survivors of sexual violence/trauma, the initial informants will be ones known to the researcher who are familiar with and fulfill the criteria for the study. Further referrals will be made by these initial informants with a flyer outlining the purpose of the study, any risks involved with participation, the voluntary nature of the study, and any benefits of participation. To recruit tattoo artists, the initial informants will also be known to the researcher and will make further referrals with a flyer indicating the purpose of the study, any risks involved with participation, the voluntary nature of the study and any benefits of participation. Additionally, recruitment flyers may be posted at local tattoo shops per permission of the owner. In both recruitment cases, the flyer may be shared on social media to recruit participants.

The participants will be either tattoo artists or those with tattoos who are survivors of sexual violence/trauma. The target sample size of 10 tattoo artists and 15 survivors. That tattoo artist participants must have been practicing tattoo art for at least one year and be at least 18 years of age. The survivor participants must be at least 18 years of age, have at least one tattoo, and identify as a survivor of sexual violence or abuse.

The interviews will be conducted between May 5, 2016 and August 5, 2016 at a location that is safe for both the researcher and participant and is mutually agreed upon. This may include phone interviews that will be recorded provided participant has given informed consent. Informed consent will be obtained from each participant. Participation is voluntary and the participant may withdraw from the study at any time. The researcher will answer any questions they may have and explain how the participant's information will be held confidential. Participant demographics will be recorded on a pre-existing form (attached). Two pre-determined interview guides (attached), separate guides for each type of participant (tattoo artist or survivor), will be used to guide the interview process. The interview guides are developed to examine the psychodynamic motivations for attaining tattoos among survivors of sexual violence as well as the level of therapeutic involvement of tattoo artists. The interviews will be 45-60 minutes long and semi-structured to allow the participants and researcher variability and to intuitively shape the interview. There will be one initial interview per participant, however, a follow-up interview may be arranged if it is mutually agreed upon between participant and researcher. The interviews will be digitally recorded and transcribed pending permission of participant. If the participant declines permission to record, notes will be used to record participant responses. The digital recordings will be transcribed verbatim and will be stored in Atlas.ti, a qualitative analysis software and analyzed through rounds of open and focused coding.

7. Estimated number of participants (complete all that apply)

_____ Children under 14 _____ Children 14-17 ___5___ UA students
(18yrs and older) ___20___ Adult non-students

8. Anticipated dates for contact with participants:

IRB Project Number

First Contact May 23, 2016 Last Contact August 05, 2016

9. Informed Consent procedures: The following information must be included in any procedure: identification of researcher, institutional affiliation and contact information; identification of Compliance Officer and contact information; purpose of the research, expected duration of the subject's participation; description of procedures; risks and/or benefits; how confidentiality will be ensured; that participation is voluntary and that refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled. See *Policies and Procedures Governing Research with Human Subjects*, section 5.0 Requirements for Consent.

- Signed informed consent will be obtained. **Attach copy of form.**
 Modified informed consent will be obtained. **Attach copy of form.**
 Other method (e.g., implied consent). **Please explain on attached sheet.**
 Not applicable to this project. **Please explain on attached sheet.**

10. Confidentiality of Data: All data collected that can be associated with a subject/respondent must remain confidential. Describe the methods to be used to ensure the confidentiality of data obtained.

All information will be kept confidential to the extent allowed by applicable State and Federal law. Data will remain anonymous and separate from any identifiable information. Interview transcriptions will be kept in a separate, secure and locked location from informed consent forms or any other identifiable information. Consent forms and all reports will be secure in a locked location. Participants will be assigned a number and demographic information will be recorded separately and demographic forms will be kept in a locked and secure location. Data and transcription will be kept on a password protected computer. Transcription from digital recording will make use of a pseudonym in place of actual name and any identifiable information will not be published. Digital recordings will be destroyed following transcription.

11. Risks and/or Benefits:

Risks: Will participants in the research be exposed to more than minimal risk? Yes X No Minimal risk is defined as risks of harm not greater, considering probability and magnitude, than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests. Describe any such risks or discomforts associated with the study and precautions that will be taken to minimize them.

The possible risks of participating in this study include mild psychological discomfort not exceeding that which would be experienced during a therapeutic session or from routine daily life. In the event a participant becomes uncomfortable, the researcher will stop the interview. The participant can also stop the interview at any time. In addition, at the close of the interview, the participant will be given a resource list in the event that they feel they may need more services.

Benefits: Other than the contribution of new knowledge, describe the benefits of this research, especially any benefits to those participating.

There are no other known benefits.

12. Check all of the following that apply to the proposed research. Supply the requested information below or on attached sheets:

IRB Project Number

- A. Deception of or withholding information from participants. Justify the use of deception or the withholding of information. Describe the debriefing procedure: how and when will the subject be informed of the deception and/or the information withheld?
- B. Medical clearance necessary prior to participation. Describe the procedures and note the safety precautions to be taken.
- C. Samples (blood, tissue, etc.) from participants. Describe the procedures and note the safety precautions to be taken.
- D. Administration of substances (foods, drugs, etc.) to participants. Describe the procedures and note the safety precautions to be taken.
- E. Physical exercise or conditioning for subjects. Describe the procedures and note the safety precautions to be taken.
- F. Research involving children. How will informed consent from parents or legally authorized representatives as well as from subjects be obtained?
- G. Research involving pregnant women or fetuses. How will informed consent be obtained from both parents of the fetus?
- H. Research involving participants in institutions (cognitive impairments, prisoners, etc.). Specify agencies or institutions involved. Attach letters of approval. Letters must be on letterhead with original signature; electronic transmission is acceptable.
- I. Research approved by an IRB at another institution. Specify agencies or institutions involved. Attach letters of approval. Letters must be on letterhead with original signature; electronic transmission is acceptable.
- J. Research that must be approved by another institution or agency. Specify agencies or institutions involved. Attach letters of approval. Letters must be on letterhead with original signature; electronic transmission is acceptable.

13. Checklist for Attachments

The following are attached:

- Consent form (if applicable) or
- Letter to participants, written instructions, and/or script of oral protocols indicating clearly the information in item #9.
- Letter(s) of approval from cooperating institution(s) and/or other IRB approvals (if applicable)
- Data collection instruments

14. Signatures

I/we agree to provide the proper surveillance of this project to insure that the rights and welfare of the human subjects/respondents are protected. I/we will report any adverse reactions to the committee. Additions to or changes in research procedures after the project has been approved will be submitted to the committee for review. I/we agree to request renewal of approval for any project when subject/respondent contact continues more than one year.

Principal Researcher _____ Date

Co-Researcher _____ Date

Co-Researcher _____ Date



May 17, 2016

MEMORANDUM

TO: December Maxwell
April Rand

FROM: Ro Windwalker
IRB Coordinator

RE: New Protocol Approval

IRB Protocol #: 16-05-737

Protocol Title: *Phoenix Ink: Psychodynamic Motivations for Tattoo Attainment by Survivors of Trauma*

Review Type: EXEMPT EXPEDITED FULL IRB

Approved Project Period: Start Date: 05/16/2016, Expiration Date: 05/15/2017

Your protocol has been approved by the IRB. Protocols are approved for a maximum period of one year. If you wish to continue the project past the approved project period (see above), you must submit a request, using the form *Continuing Review for IRB Approved Projects*, prior to the expiration date. This form is available from the IRB Coordinator or on the Research Compliance website (<https://vpred.uark.edu/units/rscp/index.php>). As a courtesy, you will be sent a reminder two months in advance of that date. However, failure to receive a reminder does not negate your obligation to make the request in sufficient time for review and approval. Federal regulations prohibit retroactive approval of continuation. Failure to receive approval to continue the project prior to the expiration date will result in Termination of the protocol approval. The IRB Coordinator can give you guidance on submission times.

This protocol has been approved for 25 participants. If you wish to make any modifications in the approved protocol, including enrolling more than this number, you must seek approval *prior to* implementing those changes. All modifications should be requested in writing (email is acceptable) and must provide sufficient detail to assess the impact of the change.

If you have questions or need any assistance from the IRB, please contact me at 109 MLKG Building, 5-2208, or irb@uark.edu.

Appendix B: Consent Forms

Phoenix Ink: Psychodynamic Motivations for Tattoo Attainment by Survivors of Trauma Consent to Participate in a Research Study

Principal Researcher Name: December Maxwell, MSW Student
Faculty Advisor: Dr. April Rand

INVITATION TO PARTICIPATE

You are invited to participate in a research study about motivations for tattoo among survivors of trauma and victimization. You are being asked to participate in this study because you have a tattoo and are a survivor of trauma and victimization.

WHAT YOU SHOULD KNOW ABOUT THE RESEARCH STUDY

Who is the Principal Researcher?

December Maxwell, MSW Student, University of Arkansas School of Social Work, drmaxwel@uark.edu

Who is the Faculty Advisor?

Dr. April Rand, University of Arkansas School of Social Work, amrand@uark.edu

What is the purpose of this research study?

The purpose of this study is to understand motivations for undergoing body modification (tattoos) and to determine if tattooing is a source of therapeutic process for those who are survivors of trauma and victimization.

Who will participate in this study?

We expect 25 total participants. 10 tattoo artists (over age 18) who have been practicing for at least one year and 15 adults (over age 18) who have tattoos and are survivors of trauma and victimization are the targeted participants for this study.

What am I being asked to do?

Your participation will require the following:

Answer questions in an interview format (either individual or group format depending upon comfort of participants) regarding motivations for obtaining your tattoo(s) to be held at a location that is safe and comfortable for both you and the researcher and is mutually agreed upon prior to interview. The interview will last between 45 and 60 minutes. Per your permission, the interview will be digitally recorded, however you may opt out of giving permission for recording and your responses will be recorded in note form instead. It is possible you may be asked to participate in a follow-up interview, which you can accept or decline and are in no way obligated to participate in.

What are the possible risks or discomforts?

The possible risks of participating in this study include mild psychological discomfort not exceeding that which would be experienced during a therapeutic session or from routine daily life.

What are the possible benefits of this study?

Participation in this study will contribute to the knowledge base that informs therapeutic practice. Findings from this study may improve our knowledge of the therapeutic value of tattoos for survivors of trauma, which has the potential to reduce stigma and improve the therapeutic process for survivors of sexual violence.

How long will the study last?

One 45-60 minute interview with the opportunity for a follow-up interview if participant is willing. Interviews will take place between May and August, 2016.

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Will I receive compensation for my time and inconvenience if I choose to participate in this study?

No compensation will be given to participants in this study.

Will I have to pay for anything?

There is no cost for participation in this study.

What are the options if I do not want to be in the study?

If you do not want to be in this study, you may refuse to participate. Also, you may refuse to participate at any time during the study. Your job, your grade, or any affiliation with the University of Arkansas will not be affected in any way if you refuse to participate.

How will my confidentiality be protected?

All information will be kept confidential to the extent allowed by applicable State and Federal law. Data will remain anonymous and separate from any identifiable information. Interview transcriptions will be kept in a separate, secure and locked location from informed consent forms or any other identifiable information. Consent forms and all reports will be secure in a locked location. Data and transcription will be kept on a password protected computer. Transcription from digital recording will make use of a pseudonym in place of actual name and any identifiable information will not be published. Digital recordings will be destroyed following transcription.

Will I know the results of the study?

At the conclusion of the study you will have the right to request feedback about the results. You may contact the faculty advisor, Dr. April Rand amrand@uark.edu, or Principal Researcher, December Maxwell drmaxwel@uark.edu. You will receive a copy of this form for your files.

What do I do if I have questions about the research study?

You have the right to contact the Principal Researcher or Faculty Advisor as listed below for any concerns that you may have.

December Maxwell, drmaxwel@uark.edu

Dr. April Rand, amrand@uark.edu

You may also contact the University of Arkansas Research Compliance office listed below if you have questions about your rights as a participant, or to discuss any concerns about, or problems with the research.

Ro Windwalker, CIP
Institutional Review Board Coordinator
Research Compliance
University of Arkansas
109 MLKG
Fayetteville, AR 72701-1201
479-575-2208
irb@uark.edu

I have read the above statement and have been able to ask questions and express concerns, which have been satisfactorily responded to by the investigator. I understand the purpose of the study as well as the potential benefits and risks that are involved. I understand that participation is voluntary. I understand that significant new findings developed during this research will be shared with the participant. I understand that no rights have been waived by signing the consent form. I have been given a copy of the consent form.

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Approved: 05/16/2016
Expires: 05/15/2017

I consent to digital recording of the interview (initial here) _____

IRB #16-05-737
Approved: 05/16/2016
Expires: 05/15/2017

**Phoenix Ink: Psychodynamic Motivations for Tattoo Attainment by Survivors of Trauma
Consent to Participate in a Research Study**

Principal Researcher: December Maxwell, MSW Student

Faculty Advisor: Dr. April Rand

INVITATION TO PARTICIPATE

You are invited to participate in a research study about motivations for tattoo among survivors of trauma and victimization. You are being asked to participate in this study because you are a tattoo artist who has been practicing for over a year.

WHAT YOU SHOULD KNOW ABOUT THE RESEARCH STUDY

Who is the Principal Researcher?

December Maxwell, MSW Student, University of Arkansas School of Social Work, drmaxwel@uark.edu

Who is the Faculty Advisor?

Dr. April Rand, University of Arkansas School of Social Work, amrand@uark.edu

What is the purpose of this research study?

The purpose of this study is to understand motivations for undergoing body modification (tattoos) and to determine if tattooing is a source of therapeutic process for those who are survivors of trauma and victimization.

Who will participate in this study?

We expect 25 total participants. 10 tattoo artists (over age 18) who have been practicing for at least one year and 15 adults (over age 18) who have tattoos and are survivors of trauma and victimization are the targeted participants for this study.

What am I being asked to do?

Your participation will require the following:

Answer questions in an interview format (either individual or group format depending upon comfort of participants) regarding your observations of tattoo choice, level of personal disclosure among those receiving tattoos, and any other observations in trends of motivations for tattoos you've observed in your time as a tattoo artist. The interview is to be held at a location that is safe and comfortable for both you and the researcher and is mutually agreed upon prior to interview. The interview will last between 45 and 60 minutes. Per your permission, the interview will be digitally recorded, however you may opt out of giving permission for recording and your responses will be recoded in note form instead. It is possible you may be asked to participate in a follow-up interview, which you can accept or decline and are in no way obligated to participate in.

What are the possible risks or discomforts?

The possible risks of participating in this study include mild psychological discomfort not exceeding that which would be experienced during a therapeutic session or from routine daily life.

What are the possible benefits of this study?

Participation in this study will contribute to the knowledge base that informs therapeutic practice. Findings from this study may improve our knowledge of the therapeutic value of tattoos for survivors of trauma, which has the potential to reduce stigma and improve the therapeutic process for survivors of sexual violence.

How long will the study last?

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Expires: 05/15/2017

One 45-60 minute interview with the opportunity for a follow-up interview if participant is willing. Interviews will take place between May and August, 2016.

Will I receive compensation for my time and inconvenience if I choose to participate in this study?

No compensation will be given to participants in this study.

Will I have to pay for anything?

There is no cost for participation in this study.

What are the options if I do not want to be in the study?

If you do not want to be in this study, you may refuse to participate. Also, you may refuse to participate at any time during the study. Your job, your grade, or any affiliation with the University of Arkansas will not be affected in any way if you refuse to participate.

How will my confidentiality be protected?

All information will be kept confidential to the extent allowed by applicable State and Federal law. Data will remain anonymous and separate from any identifiable information. Interview transcriptions will be kept in a separate, secure and locked location from informed consent forms or any other identifiable information. Consent forms and all reports will be secure in a locked location. Data and transcription will be kept on a password protected computer. Transcription from digital recording will make use of a pseudonym in place of actual name and any identifiable information will not be published. Digital recordings will be destroyed following transcription.

Will I know the results of the study?

At the conclusion of the study you will have the right to request feedback about the results. You may contact the faculty advisor, Dr. April Rand amrand@uark.edu, or Principal Researcher, December Maxwell, drmaxwel@uark.edu. You will receive a copy of this form for your files.

What do I do if I have questions about the research study?

You have the right to contact the Principal Researcher or Faculty Advisor as listed below for any concerns that you may have.

December Maxwell, drmaxwel@uark.edu

Dr. April Rand amrand@uark.edu

You may also contact the University of Arkansas Research Compliance office listed below if you have questions about your rights as a participant, or to discuss any concerns about, or problems with the research.

Ro Windwalker, CIP
Institutional Review Board Coordinator
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I have read the above statement and have been able to ask questions and express concerns, which have been satisfactorily responded to by the investigator. I understand the purpose of the study as well as the potential

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Approved: 05/16/2016
Expires: 05/15/2017

benefits and risks that are involved. I understand that participation is voluntary. I understand that significant new findings developed during this research will be shared with the participant. I understand that no rights have been waived by signing the consent form. I have been given a copy of the consent form.

I consent to digital recording of the interview (initial here) _____

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Expires: 05/15/2017

Appendix C: Recruitment Letters

Tattoo Motivations Study

Be a part of an interesting research study

Are you 18 years of age or older?

Do you have a tattoo?

Are you a survivor of trauma or victimization?

If you answered YES to these questions, then you may be eligible to participate in a tattoo research study.

The purpose of this study is to understand reasons people get tattoos and to determine if tattooing is a source of therapeutic process for those who are survivors of trauma and victimization.

We are looking for individuals with tattoos that are survivors of trauma or victimization to take part in a 45-60 minute interview (either group or individual depending on comfort of participant) to answer questions regarding motivations for getting a tattoo. Study will consist of one initial interview with the potential for a follow-up interview.

The interviews will be conducted in a mutually agreed-upon location for the comfort and safety of the participant and researchers. The interviews will take place between May 2016 and August 2016. This study is being conducted by Dr. April Rand and December Maxwell, MSW Student, University of Arkansas School of Social Work.

For more information, please call or email

December Maxwell, MSW Student

Tattoo Motivations Study

Be a part of an interesting research study

Are you 18 years of age or older?

Are you a tattoo artist?

Have you been a practicing tattoo artist for more than one year?

If you answered YES to these questions, then you may be eligible to participate in a tattoo research study.

The purpose of this study is to understand reasons people get tattoos and to determine if tattooing is a source of therapeutic process for those who are survivors of trauma and victimization.

We are looking for individuals with at least a year of experience as a tattoo artist to take part in a 45-60 minute interview (either group or individual depending on comfort of participant) to answer questions regarding experiences with tattooing and client disclosure. Study will consist of one initial interview with the potential for a follow-up interview.

The interviews will be conducted in a mutually agreed-upon location for the comfort and safety of the participant and researchers. The interviews will take place between May 2016 and August 2016. This study is being conducted by Dr. April Rand and December Maxwell, MSW Student, University of Arkansas School of Social Work.

For more information, please call or email

December Maxwell, MSW Student

Appendix D: Interview Guides

Working Interview Guide

Interview Protocol

Interviewer will introduce themselves, provide informed consent form, and explain the study. Interviewer will answer any participant questions. Once the consent form is signed, interviewer will turn on recording device (with participant's permission) and begin the interview. The interview will be guided by a semi-structured interview guide. Following the interview, the participant will be provided with a resource list in the incident that they may feel they need therapeutic services or support.

Questions for Survivors

1. How old were you when you got your first tattoo?
 - a. What was your first tattoo?
2. How did you come to get your first tattoo?
 - a. Did you plan the tattoo for a while or just decide?
 - b. Did someone go with you to get your first tattoo?
 - c. Was there something that led to you getting your first tattoo?
 - d. Is there a special or personal reason that you chose the tattoo that you chose?
Subsequent tattoos?
 - e. Has this process changed with subsequent tattoos?
3. How many tattoos do you currently have?
 - a. If more than one, what is your favorite tattoo and why?
 - b. What if anything, do your tattoos say about you?
 - c. How often do people ask about your tattoos?
 - i. How does it make you feel?
 - ii. Are you comfortable sharing the reason(s) you chose your tattoos?
4. What is your favorite style of tattoo?
5. Would you get another tattoo?
 - a. If yes, do you know what it would be?
6. Did you feel differently about your body after you got a/many tattoo/s?
 - a. In what ways did you feel differently?
 - b. Is this a more positive or negative shift?

- c. If you have subsequent tattoos, did a certain tattoo have a stronger impact on your self-image or identity than others?
- 7. How do you feel about the experience of getting a tattoo?
 - a. Did you enjoy the process?
 - i. If yes, what exactly did you enjoy about it?
 - ii. If no, what made the experience unpleasant?
 - b. Do you feel like you gained anything from the process?
 - i. If yes, can you describe what you gained?
- 8. Would you recommend that other survivors get a tattoo?
 - a. If yes, why would you recommend a tattoo?
 - b. If not, why would you not recommend a tattoo?

Questions for Tattoo Artists

- 1. How long have you been a tattoo artist?
 - a. What made you decide to pursue this career?
- 2. Are there some trends you've witnessed in the types of tattoos people get?
 - a. Are there certain styles, colors, symbols, etc.
- 3. Do people share with you the reasons they get tattoos?
 - a. What types of reasons do people have for getting tattoos?
 - b. Does there seem to be any trend in the reasons people get tattoos?
- 4. Have you ever felt like there was more to the "story" for tattoos you have done?
- 5. Have you ever designed a tattoo for a survivor of sexual violence or other form of trauma?
 - a. If yes, can you describe that experience?
 - b. How did you guide the person through the tattoo experience?
 - i. For example, design choice, pain tolerance, touching of the body, etc.
 - c. Was it a positive or negative experience, and why?
- 6. Does the reason or genesis of a tattoo for a person you are creating art for concern/interest you?

Appendix E: Codebook

Abuse	Any mention of abuse
Accompanied	Had company while getting tattoo
Affirmation	Affirming a character trait that the person either possesses or worked hard to possess. Affirming ability and existence.
Age at first tattoo	The age at which the person got their first tattoo
Alone	Got the tattoo alone
Beauty	Something that is pretty, beautiful, creates a pleasant emotion by looking at it, makes the person feel pretty or feminine, is just enjoyable to look at.
Belonging	Belonging and being a part of a group. Part of group identity, attempts to fit in somewhere since they don't fit other groups. May not have family so making their own through this identity.
Catharsis	Cathartic relationship with either trauma or other life events. Release of either control for oneself or the control of others or past events; purging or purifying the self of negative emotions; releasing negative emotions.
Celebration	Any mention of celebrating something, anything.
Comfortable	Feeling comfortable in the space, feeling comfortable with the tattoo artists, needing comfort.
Commitment	Symbol of commitment to another person or to self, faith, or chosen behavior.
Communication	Importance of clear communication, particularly relating to between tattoo artist and person getting tattoo.
Confidence	Feeling better about themselves; having a more positive relationship with their body; feeling like they can be more social or have more self-worth.
Control	Getting a tattoo for control of oneself. "This is mine and no one can take it from me" The tattoo is "for me."
Cover-Up	Covering up of a previous tattoo for symbolic purposes.
Cultural Reclamation	Regaining a connection to an ancestral culture or "taking back" culture meaning to represent culture in the way it has historical and generationally been meant to be represented.

Diversity	Increased diversity in the art form; more complex designs.
Domestic Violence	Domestic violence is the type of trauma experienced
Draining	Emotionally exhausting, secondary trauma, something that requires regular self-care.
Empowerment	Empowerment, badge of honor, something that evokes pride or a feeling of pride.
Ethical Behavior	The act of tattooing something that may be ethically questionable. Ethics involved in how and what artists will tattoo.
Expression	The act of expressing internal emotions of personality through choice of tattoo art.
Feminism	Anything relating specifically to feminism, empowerment of women, balancing hierarchal structures, overcoming societal norms for gender, women using tattoos for overriding stigma.
Group Identity	Belonging (can be grouped with belonging), feeling of being a part of a group
Growth	Personal growth, change, shedding destructive patterns. Similar to catharsis but more over time.
Hidden	The tattoo is not normally visible while wearing clothing
Honor	Either to honor a person or to invoke the feeling of honor within oneself.
Identity and Image	Identity and image; the association with one's personal identity and how they portray themselves to the world around them; the image they project.
Intention	Setting an intention for the tattoo, what mental energy is being put into something.
Intimacy	Intimacy; feeling closer to the person performing the tattoo or feeling more intimate with one's self.
Judgement	Expressed judgement towards tattoos in general or certain designs. May depend upon the profession of the person.
Life Event	Life event that prompted the tattoo if there is one.
Life Story	Tells a life story, a life progression, a "map of life" or a journal of events in one's life.
Mainstream	Any mention of making something more acceptable to society, overcoming previously held societal construction.

Meditative/Meditation	Focus, meditation, calmness, zen, yogic, anything that mentions needing to calm emotions or focus emotions.
Memorial	A remembrance of either a death of a loved one or person of significance to them.
Mental Illness	Mention of mental illness
Molestation	Molestation is the type of trauma experienced
Negativity	Anything that discusses negative emotions, "darkness", a feeling that contributes to sadness or general negativity in one's life.
Non-Normative	Being "cool" as a means to be outside of societal norms. Being societal outliers, special, unique. Rebellion.
Pain	The pain associated with tattoo or with emotional trauma. It can be a positive or negative association with pain, especially regarding tattoo.
Patience	Needing to take the time to go through the process of tattoo.
Permanence	Anytime there's a discussion of the permanence of tattoo, how something will always be there, the commitment to the permanence of tattoo, the importance of the permanence of tattoo.
Personal	A meaning that is personal and is shared.
Preferred Design	The preferred style of tattoo
Pride	Feeling of happiness and pride relating to showing the tattoo, sharing growth related to trauma, etc.
Reclamation	Reclaiming the body for their own. Ownership of one's body; creating a boundary for self and others that indicates they now make decisions about their lives and their bodies.
Relationships	When a tattoo symbolizes a relationship
Retrospective	The meaning or symbolism of the tattoo is realized retrospectively.
Rite of Passage	A symbol that represents overcoming an obstacle that leads to a more aware person, becoming an adult, changing from one stage of life to another.
Ritual	Ritual and ceremony; whenever there is a thought-out and organized process that holds meaning.
Safety	The feeling of being comfortable to be open and honest and feeling physically safe.
Sexual Harassment	Sexual harassment was trauma experienced.

Sexualization	Anytime something has the sole purpose, or at least a prevalent purpose of creating sexual desire.
Shame	Feeling embarrassed, shameful, subversive, hidden regarding either a tattoo or the feeling relating to trauma.
Self-Worth	How they identify how they feel about themselves and their worth.
Spirituality	Spirituality, faith, divine, connection with others in spiritual sense. Anytime the topic conveys a reason that is faith-based or spiritual in nature.
Stigma	Any feeling of being judged based on a specific, existing societal construction.
Strength	Strength, toughness, feeling of "I can do anything because I endured the pain of a tattoo" or related to overcoming the weight of trauma.
Stress	Any mention of stress, anxiety, etc.
Symbolism	Symbolism of design, symbolizes, "means", "meaning", meaning-making and symbolic interactionism
Tattoo Design	The design of the tattoo
Therapeutic	Therapeutic, something that aided in overcoming negative emotions or destructive patterns, something that allowed one to become "happier" or "free".
Transformation	Transforming from victim to survivor; changing from one dominant personality to another; rebirth.
Trauma	Trauma or abuse (will be grouped with abuse)
Uneducated	In reference to the art of tattoo and the feasibility of a tattoo lasting and looking good for the maximum amount of time.
Unexpected	Either to symbolize unexpected personality traits or that having a tattoo is unexpected among others due to outward personality traits. Challenges stereotypes of those who have tattoos.
Unique	Something no one else, or few others have.
Validation	Validating the experiences one has been through, validating positive attributes one has, validation of their life path or life choices.
Visible	The tattoo is in a place visible while wearing clothes.