

THE EXPERIENCE AND MEANING OF TATTOOING AND PIERCING IN WOMEN
WHO HAVE EXPERIENCED RELATIONAL TRAUMAS

by

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Abstract

The aim of this study was to examine the experience and meaning of tattooing and piercing in women who had experienced relational traumas, defined as any context in which two or more human beings interact with one another in which a traumatic event occurs, whether these beings are relatives, friends, acquaintances, or strangers.

A phenomenological study was conducted. Seven women, ranging in age from 23 to 52, who identified as having experienced relational traumas, were interviewed in depth about their experiences of tattooing and piercing, and the meanings and purposes these body modifications served in their lives. Six prominent themes emerged from a thematic analysis of the data. These themes are: 1) Remembrance; 2) Connection; 3) Identity; 4) Permanence; 5) Healing, Coping, and Closure; and 6) The Significance of Pain.

The findings of this study revealed a great deal of complexity in terms of the reasons why women chose to tattoo and pierce following the experience of relational traumas. A connection is made between these findings and feminist literature that demonstrates the importance of relationships and connections in the lives of women, and how tattooing and piercing may aid in that regard. The literature on self-injurious behaviours, such as cutting, is also discussed, and some consideration is made as to whether tattoos and piercings may be, for some, socially acceptable forms of self-harm. The implications for practice and future research are also discussed.

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Dedication

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Chapter I: Introduction

Body modifications in the forms of tattoos and piercings have a long and well-established history. Tattoos have been found on the bodies of Egyptian mummies (Ferguson-Reyport, Griffith, & Straus, 1955; Rooks, Roberts, & Scheltema, 2000), and there is even discussion of tattooing and piercing in various books of the Bible (Morrison, 1998; Raspa & Cusack, 1990). Piercings have also been around since Biblical times, and piercings of different kinds were a part of ancient Egyptian, Aztec, and Mayan civilizations (Robertson, 2007). In many traditional cultures and societies such as the Maori in New Zealand (Romans, Martin, Morris, & Harrison, 1998) and in Samoa, body modifications (especially tattoos) have been an appropriate and acceptable part of the culture for hundreds of years. The word “tattoo” comes from the Tahitian word “tatau”, which means “to mark or strike twice” (Wikipedia, 2007). Captain James Cook, exploring the Polynesian islands, introduced the word to the English language after several of his sailors, impressed with the tattoos they had seen on Polynesian women, decided to get some themselves (Raspa & Cusack, 1990). This practice was soon followed by other sailors (ibid.), hence starting a tradition of tattooing by sailors that continues to this day.

In Western society, throughout most of the 20th century, there have been negative associations made about tattooing and piercing. They have been largely associated with marginalized groups, or what Atkinson (2003, p. 4) calls the “social underbelly” of society, such as criminals, drug users, risk-takers, and those with psychological disorders and mental illnesses. For example, Ferguson-Reyport and her colleagues (1955) found a link between the presence of tattoos and psychiatric illnesses such as schizophrenia and personality disorders. Others have found a link between tattooing and piercing and risk-taking

behaviours such as substance use (Brooks, Woods, Knight, and Shrier, 2003; Carroll, Riffenburgh, Robert, & Myhre, 2002), sexual activity, disordered eating, and even suicide (Carroll et al, 2002). Still other researchers have made a link between tattooing and violent behaviours (Roberts & Ryan, 2002), and criminality (Birmingham, Mason, & Grubin, 1999). Body modifications have, therefore, been largely considered “negative, problematic, deviant, and pathological” (Riley & Cahill, 2000, p. 262) in Western society.

In the last ten to twenty years, however, tattoos and piercings have become increasingly more acceptable in our culture (Atkinson, 2003; Atkinson, 2004; Carroll et al., 2002; Rooks et al., 2000), having become regarded as fashionable and trendy, such that males and females of all age groups, from young teenagers to older men and women, are often seen sporting one or the other, or both (though the trend does appear to be more common among teenagers (Brooks et al., 2003) and young adults). The popularity of tattoos and piercings nowadays has been seen by some as an impingement on the traditional subcultures associated with body modifications. For example, young women in the Riley and Cahill (2005) study made a clear and assertive distinction between those whose decisions to tattoo and pierce were motivated primarily by fashion, and those whose tattoos and piercings were “deeply meaningful, significant, and personal” (p. 273); the implication being that tattoos and piercings for the purpose of fashion are in some ways inferior or inauthentic (ibid.).

Relational Trauma

What is the experience and meaning of tattooing and piercing in women who have experienced traumatic events in their relationships with the people in their lives? Relatively little research has explored this topic in much detail, and this is the main question that this

study is attempting to answer. This study uses the term *relational trauma* to refer to events and experiences that are deemed to be traumatic to the individuals who have experienced them. However, a review of the literature on relational trauma could not find a commonly accepted definition of this term. Much of what exists discusses relational trauma in terms of traumatic events that occur in early childhood (e.g. Schore, 2001). For example, Sheinberg and True (2008) define relational trauma as “an event in which a child’s sense of emotional and/or physical safety has been ruptured or violated by the behaviors of adult caregivers” (p. 174). These authors cite divorce, a parent’s death, the witnessing of domestic violence, and the experience of sexual abuse as examples. Thus, the authors appear to be using the term *relational* in the literal sense of a child’s relatives (e.g. parents; caregivers). Similarly, Machoian’s (2001) use of an almost identical term, “relational-based trauma” is used to describe such traumas as “sexual and physical abuse, neglect, family violence, out-of-home placements, abandonment, and family alcoholism” (p. 23). Hardy and Fraenkel (date unknown), in a presentation on Trauma Based Family Therapy, *appear* to suggest that more current definitions of relational trauma may include other age groups beyond childhood, and may include relationships among friends and associates. This is more along the lines of the current study’s area of interest, whereby the word *relational* in my use of the term *relational trauma* refers in a broad sense to all forms of relationships people have with others, whether these be familial relationships, or friendships, casual acquaintances, bosses, co-workers, and even strangers.

The work of many feminist psychologists has demonstrated that for females, the development and preservation of relationships with others is an important part of their positive psychosocial development (Gilligan & Machoian, 2002; Miller & Stiver, 1997).

Being in relationships with others allows girls and women to feel a sense of connection and helps create feelings of self-worth, meaning and purpose in their lives. When relationships with others are either absent, damaged, or destroyed, a sense of psychosocial disconnection may occur. Disconnection may create many problems, including lowered self-esteem and depression (Miller & Stiver, 1997) and suicidality (Gilligan & Machoian, 2002), among others. It is fair to suggest, then, that the experience of divorce, domestic violence, and witnessing or otherwise experiencing the deaths of loved ones may constitute, for some, relational trauma.

Tattooing, Piercing, and Trauma

There appears to be relatively little research literature that looks directly at tattoos and piercings in relation to the experience of trauma. There are, however, many studies that discuss the connection of tattoos and piercings in relation to childhood sexual abuse (Inch & Huws, 1993; Romans et al., 1998); the separation from, or deaths of, parents, caregivers, and other significant others at a young age (Birmingham et al., 1999); as well as witnessing violence and being placed in foster care (ibid.). Most people would likely agree that these sorts of events may be considered traumatic to some degree, particularly when they occur at a young age (as is often the case with sexual abuse), or are sudden and unexpected.

Furthermore, there appears to be a strong association between tattooing and piercing and risk-taking behaviours such as violence, truancy, criminality, and drug and alcohol use and abuse (Birmingham et al., 1999; Brooks et al., 2002; Carroll et al., 2002; Roberts & Ryan, 2002). It is possible that involvement in risk-taking behaviours puts a person at greater risk of witnessing or being involved in potentially traumatic events. A person who is involved with a crowd of substance users may, for example, witness the death or near-death of a friend

who overdoses on drugs, or be involved in a near-fatal car accident. A person involved with violent peers may partake in, or be a witness to, others being hurt, maimed, or even killed. Again, it is likely that most people would agree that involvement in such events (regardless of the type or degree of involvement) could be considered traumatic by some.

Purpose of Study

It is certainly not the case that all tattooed and pierced people have experienced a traumatic event, nor that all traumatized people will get a tattoo or piercing. Nevertheless, there may be some meaning and purpose behind the use of tattoos and piercings for persons who have experienced a traumatic event. By *meaning*, I mean *significance* (e.g. this tattoo has meaning because the butterfly is symbolic of my deceased sister); and by *purpose*, I mean *function* (e.g. getting this tattoo is a way of forming closure on my sister's death; it gives me a constant reminder of her).

As stated earlier, there is a paucity of research on this topic, especially with regard to piercings (much more has been written about tattoos). Most of the existing literature does not address the topic directly, but focuses instead on related issues. When discussed, tattoos and piercings are generally mentioned in passing, or explored as a part of some other phenomenon (e.g. sexual abuse; risk-taking behaviours; criminality; psychopathology). The link between traumatic events and tattoos and piercings is thus mostly implied rather than stated directly, and almost none of the existing literature actually discusses the meaning or purpose behind them (and most that do, do so only briefly or as an aside, as in the Romans et al., 1998 study).

The purpose of the proposed study, therefore, is to attempt to fill some of the gap in the research literature by exploring the experience and meaning of tattooing and piercing in

women who have experienced relational traumas. Related to this exploration are several questions, including: What meaning do individuals who have experienced relational traumas place on their body modifications? What purpose (if any) do they serve? In what ways do the design, location, and number of tattoos/piercings relate to the meaning placed on them?

Definition of Relational Trauma

This study employed a broad definition of relational trauma. *Relational trauma* referred to any context in which two or more human beings interact with one another in which a traumatic event occurred, whether these beings are relatives, friends, acquaintances, or strangers. As long as some form of interaction has occurred, it may be said that these people had been “in relation” to one another. Thus, a woman who was sexually assaulted by a relative or by a stranger may be said to have experienced relational trauma. Examples of relational traumas, as stated earlier, include: sexual assault/abuse; rape; witnessing or being a part of domestic violence; abandonment/neglect (perceived or actual) by a relative or loved one; relationship breakup/divorce; and the death of a loved one. In all of these situations, a sense of loss of safety, and/or a loss of connection to another human, may be said to have occurred. Clearly, this definition is much broader than the one iterated by Sheinberg and True (2008), which restricts relational trauma to those occurring between children and their adult caregivers (i.e. relatives).

Definition of Body Modifications

The literature generally groups tattoos and piercings under the broader heading of *body modifications* (e.g. Romans et al., 1998), and in some cases, *body art* (e.g. Jeffreys, 2000; Riley & Cahill, 2005), and even *self-mutilation* (e.g. Jeffreys, 2000). Though these terms include more than just tattoos and piercings (such as cutting, implants, and

scarring/branding), for the purposes of the present study the term *body modifications*, when used, will refer *specifically* to tattoos and piercings, and exclude all other forms of body modification.

Some have suggested that it may be wiser to study tattoos *or* piercings, but not both. I chose to study tattoos and piercings together because of all the different forms of body modifications that exist, tattooing and piercing are considered to be the most socially acceptable in our society. Other types of body modification, such as burning, scarification, under-the-skin implants, and voluntary amputation, are deemed less socially acceptable and often relegated to particular sub-cultures of individuals. Furthermore, several studies (e.g. Brooks et al., 2003; Carroll et al., 2002; Claes, Vandereycken, & Vertommen, 2005; Jeffreys, 2000; Roberti & Storch, 2005) have studied tattoos and piercings together, suggesting that it is appropriate to consider these two forms of body modification collectively. Indeed, several of these studies have found a link between both tattooing and piercing and other behaviours, thus lending further support to this contention.

Chapter II: Literature Review

Body Modifications and Trauma

Inch and Huws (1993) briefly discussed four female psychiatric patients who had tattoos. Each reported having experienced sexual abuse throughout their lives. The authors suggested that the tattoos were directly tied to the abuse, either as “symbol[s] of physical strength and psychological aggressiveness” (p. 128), or as forms of violence and negativity toward oneself. The first interpretation speaks to the possibility of tattoos being signs of resilience, while the second suggests that tattoos may be indicators of risk in an individual (of violence, low self-esteem, depression, etc.). Though plausible, Arya (1993), in a critique of Inch and Huws, stated that all four women had been diagnosed with Borderline Personality Disorder, and that two were substance abusers, and that these psychological problems may in fact have been the impetus for getting tattooed, not the sexual abuse. In defence of Inch and Huws, however, I would suggest it is *possible* that the sexual abuse led to the development of the psychological problems in the first place.

Birmingham et al. (1999) explored the link between tattoos and psychological problems in a male prison population. Among other findings, they discovered a link between being tattooed and having a history of experiences including witnessing violence, being physically and/or sexually abused, being separated from loved ones, and experiencing the deaths of close others. Though Birmingham et al. did not actually use the term “trauma” when discussing these, these events can certainly be considered traumatic. Although this study was done using male participants rather than females, it nevertheless supports the contention that body modifications may serve some purpose for those who have experienced traumatic events.

Claes et al (2005) studied a sample of females with Eating Disorders. Among those who were tattooed, about one-third reported having experienced traumatic events, including sexual abuse and the loss of a loved one, around the time they decided to get tattooed. Although two-thirds denied any traumatic experiences at the time they got their tattoo, this does not mean that they had *never* experienced a traumatic event at *some* point in their lives, a possibility which was not explored further in this study.

Body Modification as Self-Injury vs. Self-Care and a Form of Communication

A large body of literature exists exploring the connection between the experience of traumatic events and self-injurious behavior, which tends to occur more often in women than men (Connors, 1996). The literature suggests quite strongly that experiencing a traumatic event, such as childhood sexual abuse, is predictive of self-injury later in life (Connors, 1996; Machoian, 2001). Other traumatic events associated with self-injury include “early parental loss, illness or surgery, marital violence, and familial impulsive self-destructive behavior, as well as loss...in adolescence” (Walsh & Rosen, 1998, cited in Shaw, 2002). Examples of self-injurious behaviors include cutting, drinking, overeating, substance abuse, smoking, head banging, and burning, just to name a few (Claes et al., 2005; Connors, 1996; Shaw, 2002). Most of the literature on self-injury that was reviewed *does not* include tattoos and piercings as forms of self-injury. For example, Claes et al (2005) defined self-injurious behavior as “any *socially unacceptable* behaviour involving deliberate and direct injury to ones [sic] own body surface without suicidal intent” (p. 11-12, emphasis added). Key to that definition is that the behaviour be socially *unacceptable*. Since tattoos and piercings are generally regarded as being socially acceptable, they would not be considered self-injurious behaviours under this definition. However, some authors (including Favazza, 1996; Favazza

& Rosenthal, 1993; and Walsh & Rosen, 1988) suggest that tattoos and piercings may be “socially accepted forms of self-harming behaviour” (Claes et al., 2005, p. 12). Connors (1996) includes dieting, overeating, over-exercising, playing hard contact sports, and even eyebrow plucking as other examples of self-injurious behaviours that are considered socially acceptable. What is significant about socially acceptable forms of self-harm is that, given their acceptance in our society, they are less likely to be thought of as stemming from the experience of a traumatic event than socially unacceptable forms such as cutting or burning oneself. A client who presents to a psychologist with visible signs of cutting is more likely to be asked whether the cutting is connected to some form of psychological distress than a client who presents with a tattoo or piercing.

Connors (1996) and Claes et al (2005) both state that a key consideration that must be made before labeling a behaviour as self-injurious is the context of the behaviour and the meaning the individual places on their behaviour. As Connors states: “The broad continuum of self-harming behavior is partly determined by social norms, the actor’s intent, the psychological state accompanying the act, and how the act affects not just the body but the self as well” (p. 198). A person who pierces, for example, may be doing so to harm oneself, or may simply wish to get a fashionable look. A person who plays a hard-contact sport like football may be doing so because he truly enjoys the game, or because the sport allows him to release pent-up aggression and anger. Thus, the same act may hold very different meanings and purposes for different individuals, depending on the context of the situation. And even within the same individual, a specific action “may constitute self-injury...at one point in time but not another” (p. 199). Thus, context and meaning are very important.

Shaw (2002), Machoian (2001), and others reframe the notion of self-injurious behaviour from a feminist perspective. Shaw (2002) analyzes the literature on self-injury and reveals the development of the different discourses over time, starting from the 1960s through to the early 21st century. Shaw states that a great deal of contemporary research in this field suggests that engaging in self-injurious behaviours may be ways of coping with traumatic events by managing the resulting “feelings of powerlessness, dissociation, intrusive memories, compulsions to re-enact the trauma and punish the body, and bodily alienation” (p. 199). The literature also states that self-injurious behaviours may be ways of responding to “symptoms of psychological distress such as dissociation, feelings of helplessness and anxiety...[and may provide] relief and a sense of control” (ibid.). Shaw states that a feminist reframing of self-injury views self-injury not as pathological, but as a way of engaging with others and establishing (or re-establishing) relational connections with others, especially when threatened with loss or abandonment. Self-injury may also be a form of “communication to others or to the self...[about] overwhelming psychic pain” (p. 201), and may be a “last attempt to have others take them seriously” (ibid.) when the spoken language fails. Viewed in this light, self-injury is seen as an adaptive way of coping with trauma, “albeit with serious consequences” (p. 203).

Machoian (2001) begins her article on self-injury by explaining how important human relationships are for the positive psychosocial development of girls. She states that from early adolescence on, girls “resist fraudulent relationships and fight for authentic or ‘real’ relationships—in which girls feel free to express the full range of their thoughts and feelings, and know that the person is listening” (p. 24). She goes on to state that girls “equate caring with listening” (ibid.) and they know that someone truly cares for them when

they listen genuinely to them. Machoian talks about trauma theory, and how traumatized people who self-injure may be doing so “in an effort to regulate unbearable and overwhelming internal affective states, thereby providing relief from numbing, dissociation, depersonalization, and agitation” (ibid.). This is very similar to Shaw’s discussion of the trauma literature as stated above. Machoian then expands on this, suggesting that girls’ experience of not being listened to—and thus realizing they are in inauthentic relationships with others—may contribute to their decision to self-injure. Machoian studied a group of adolescent girls who had a history of psychological trauma. She found that girls whose genuine needs were ignored or downplayed by others received the attention and response they needed when they decided to cut themselves. These girls discovered that the language of violence (in this case, cutting) was louder than their “speaking voices” (p. 25), and evoked action on the parts of others. A second major theme was that cutting led to “affect regulation” (ibid.). In other words, cutting was a way to control one’s emotions (cutting often releases endorphins, temporarily relieving feelings of stress, tension and anxiety, and leaving a person feeling good for a while). A third major theme was the importance of listening, and how cutting served as a form of communication in an attempt to have others truly listen to their needs and concerns. This is almost identical to Shaw’s (2002) conclusions as well. Also like Shaw, Machoian agrees that self-injury may be girls’ way of engaging in self-care (which she calls “self-preservation”) (p. 27), but that again this can have negative, unintended consequences.

Although neither the Shaw (2002) study nor the Machoian (2001) study discuss tattooing and piercing per se (self-injury in the Machoian study constituting cutting only, and in Shaw’s, cutting as well as burning and other “socially unacceptable” forms of self-injury),

they nevertheless speak to self-injury as forms of communication, of dealing with negative affective states such as distress and anxiety related to trauma, of regaining a sense of power and control in one's life, and other things associated with trauma.

If tattoos and piercings are forms of self-injury for some people (albeit socially acceptable forms), then tattoos and piercings may serve similar roles as cutting and burning for some women who have experienced trauma. There is certainly anecdotal evidence for this. For example, a 2007 article in British Columbia's Vancouver Sun newspaper explored the high incidence of suicide in a small northern B.C. community. The article described the experience of a seventeen year-old who had experienced a great deal of trauma in her life, including having her drunken father force her (at age thirteen) to attempt to kill him with a gun (the attempt failed, but only because the gun's safety mechanism was on), making numerous suicide attempts of her own, and having a personal history of alcohol and drug abuse. This young woman stated that she used to cut herself when she experienced stressful events such as depression: "Before, I was cutting myself all the time...on my arms and my legs. Now, when I feel that way, I pierce myself instead" ("Death's Doorstep", 2007). Some of the literature mentioned in the next section suggests this connection as well.

The Importance of Meaning

Romans et al (1998) studied the link between tattoos, sexual abuse and psychiatric disorders in women. They found that women with tattoos were significantly more likely to have experienced some form of childhood sexual abuse than those who were not tattooed. Furthermore, the presence of a tattoo was associated with the presence of psychopathology (e.g. disorders, greater alcohol use), something which had also been noted by a significant number of other researchers. Although they stated there was clearly a "rich personal

meaning” (p. 139) associated with the tattoos, they did not go into detail on these meanings. The meanings these women placed on their tattoos were relegated to a half-page appendix on the last page of the article, consisting mostly of two to three sentences for each of the ten participants. This is not to criticize Romans et al’s decision, for it was not their stated intent to study the meaning of their participants’ tattoos. Rather, it serves as an example of the lack of in-depth research literature exploring this topic, even when it is acknowledged that the tattoos hold deep meaning for the participants.

Riley and Cahill (2005), in their review of the literature on tattoos and piercings (which they termed “body art”) (p. 261), stated that past research on this topic generally equated body modifications with deviancy, criminality, and psychopathology. They contended, however, that while the link between body modifications and these things may be strong, one could not automatically assume that those who used body art were deviant or had some form of psychopathology. Riley and Cahill encouraged readers to consider body modifications in light of identity formation and meaning, and interviewed several young women for whom their body modifications held deep personal meaning to them. Among their findings, Riley and Cahill found that these young women used their BMs to “demonstrate and experience acts of bravery, independence, and action; resisting more traditional notions of femininity that are defined in terms of fragility, dependence, and passivity” (p. 266), as well as empowerment. These young women also made a very clear and assertive distinction between those like themselves who placed deep personal meaning and significance on their body modifications, and those who got body modifications merely because they were trendy and fashionable.

Finally, as discussed in the previous section on self-injurious behaviours, there is a strong association between self-injurious behaviours and the experience of traumatic events. In addition, it is *possible* (depending on the definition and context) that tattoos and piercings may be considered “socially accepted forms of self-harming behaviour” (Claes et al., 2005, p. 12). Key to this is the context in which the behaviour(s) take place, and the meaning which the individual ascribes to the experience of tattooing and/or piercing. It is possible, therefore, that the same behaviour may be a sign of strength and resilience in one individual, and a sign of pain or risk in another. This possibility was also discussed in Inch & Huws (1993).

Summary

The literature on body modifications discussed to this point has indicated a number of things. It has revealed that there is a strong association between body modifications and risk-taking behaviours, substance use and abuse, criminality, and psychopathology, among others. It has also shown that there is a strong association between relational traumas such as sexual abuse, the deaths of loved ones, abandonment or rejection by parents and caregivers, and witnessing violence, and having body modifications. The literature has discussed body modifications in terms of self-injurious behaviour, and explored the possibility that tattoos and piercings may constitute a socially acceptable form of self-injury. It also discussed how a feminist reframing of self-injury views self-injurious behaviours as adaptive (albeit harmful and hurtful) forms of communication to others when other forms of communication have failed. Finally, the literature has discussed the importance of exploring the meaning individuals place on their body modifications, and how very little of the research literature

actually does this in great depth, thus creating a gap in the literature that this study seeks to at least partially fill.

Chapter III: Methodology

Research Method

Phenomenology

This study utilized the phenomenological method of inquiry. The phenomenological method is a qualitative design that seeks to understand the individual's subjective experience of a given phenomenon (Jackson, 2003). Phenomenology "targets the understanding or interpretation of human meaning, the essence of how humans make meaning of real-world phenomena, primarily phenomena related to human action or interactions" (Nakkula & Ravitch, 1998, p. 41). Phenomenologists speak of participants' "lived experiences", which are "the everyday human experiences that are real to the individuals who experience them" (Jackson, 2003, p. 161). This method recognizes and respects that each individual understands and interprets their lived experience of a given phenomenon in a unique way, and allows participants to give voice to that experience. Phenomenology is a particularly useful research method for exploring the *meaning* a particular phenomenon has to an individual who has experienced it (Iaquinta, 2007). It is also a beneficial method when not much is known about the phenomenon in question and the researcher wishes to learn more about it (Colaizzi, 1978; Osborne, 1990).

The job of the researcher employing the phenomenological method is to "uncover and convey the true meaning or essence of the experience through the use of descriptive language" (Jackson, 2003, p. 161). The researcher accomplishes this, in part, by attempting to gain an empathic understanding of the experiences of the participants and "reproduc[ing] in [his or her] own mind the feelings, motives, and thoughts behind the actions of others" (Bogdan & Taylor, 1975, p. 14). The researcher does not impose his or her preconceived

opinions on the phenomenon being studied, but is open to whatever the participant brings to the table. The phenomenological method assumes that there are some commonalities among the participants that will come across during the analysis of interviews. Therefore, from the responses of the participants, the researcher may discover several emergent themes that convey the common essence of the experience of the phenomenon being studied (Jackson, 2003).

The phenomenological design was chosen, in part, because it appears there is little research that has explored the phenomenon of tattooing and piercing in relation to the experience of highly stressful and/or traumatic events, and the meaning individuals place on their tattoos and piercings. By utilizing this method, it would be possible to explore this phenomenon in some depth. Furthermore, most of the published studies on tattooing and piercing give little to no space for the voices of the actual participants to be heard, so the reader does not have the opportunity to hear the stories and meanings behind these body modifications. The phenomenological method allows the researcher to make space for these stories to be heard, and lets the participants' own voices speak to the meaning behind their experiences.

Personal Assumptions and Bracketing

Colaizzi (1978, p. 55) states that a phenomenological researcher "begins by asking not what is a convenient or merely interesting or scientifically approved topic of investigation, or how an experiment can be designed to investigate it, but instead he asks first, why am I involved with this phenomenon?" In answer to this question, my interest in this phenomenon arose from deeply personal reasons. I do not have any tattoos or piercings myself. However, several years ago I had close relationships with two women who each had

several tattoos and piercings, and who had both experienced multiple relational traumas in their lives. The first was a friend who had numerous tattoos and piercings, and who had lived a “hard life” that involved, at various points, connections with drugs, gangs, and other criminal elements, and several abusive relationships. The second was a girlfriend who, prior to our relationship, had been married to a man who had abused her verbally, physically, and emotionally in the time they had been married. After dating for a few months, our relationship ended in what I personally felt was a traumatic way, given that we had been very much in love and had discussed eventually getting married. I have every reason to believe that the breakup was traumatic for her as well, even though she had initiated it. Knowing both of these women, I had already started to wonder whether there was some connection between their relational traumas and their use of tattoos and piercings, but the potential connection became very salient for me when, about three weeks after my girlfriend and I broke up, we met up and she told me she had gotten two new tattoos and piercings (the tattoos were clearly visible, but the piercings were not immediately noticeable). Although she told me she got them simply because she had been wanting them for a while, this was the first I had heard about this, and I found the timing to be extremely suspect. After this encounter, my curiosity was piqued, and when I started my M.A. program in Counselling Psychology a year later, it was one of the first topics I began to explore in my research methods course.

Later on, in various professional counselling settings, I began to notice that of the clients who had experienced relational traumas in their lives, many also had tattoos and piercings. One female client had multiple tattoos and piercings, including a large “sleeve” (tattoos covering a large portion of her arm). Although we did not speak about her tattoos

and piercings, this client had a history of involvement with extremely traumatic events starting at a young age with the sudden and horrific deaths of both her parents, just a few years apart from each other. She also had a history of drug abuse and addiction, and of involvement in relationships with men who abused and beat her. Another female client had also experienced a significant amount of relational trauma in her life. Her father had committed suicide when she was a child, and this woman had experienced major conflicts with her mother, siblings, and other relatives growing up. Moving to British Columbia from another province, this woman entered into an abusive relationship with a man who forced her into prostitution, which she did for many years. She had also experienced significant traumas in the forms of deaths, some by murder, of significant people in her life. Through our discussions, she revealed that her back was covered with large tattoos. As with my previous client, this client's tattoos were not the focus of our work but rather came up in casual conversation. As this woman often wore heavy sweaters or her jacket during our sessions, it would have been impossible for me to know of her tattoos had she not told me about them.

I have also known, over the years, of many individuals who got tattoos to commemorate significant events (e.g. independence from a foster home at the age of eighteen), and loved ones who had died (e.g. a family of parents and siblings who all got a tattoo of a butterfly after their daughter/sister died in a car accident; and a woman who got a tattoo of a butterfly to symbolize her freedom from an unhappy and emotionally-abusive relationship). My experiences with all these individuals, mostly women, reinforced my interest in this topic. It was partly with the aim of learning more about this topic, and understanding the personal experiences of those who had experienced relational traumas and gotten tattoos and piercings, that I decided to conduct this study.

Another important question that Colaizzi (1978, p. 55) says phenomenological researchers must ask themselves is: “What are the hidden gains that I might acquire in investigating it, and in investigating it in this way?” To that end, there are at least three potential gains from studying this topic. The first two are very practical in nature. As part of my M.A. program in Counselling Psychology, one of the requirements is to complete a research thesis on an original topic. There does not appear to be a great deal of research on this particular topic; therefore, by conducting research in this area I will meet one of the major requirements to obtaining this degree. Indeed, upon completing this thesis, I will have also completed my M.A. degree and can graduate. A second practical gain is that, since there is little research studying tattoos and piercings relative to trauma, self-injury, and other topics, there is a great deal of potential for future research in this area. As I hope to work in academia in the future, this opens up many opportunities for researching a less-explored area, which has implications for future publications, research grants, and promotions. However, the third gain is the one which holds the deepest meaning for me. As mentioned earlier, I found the breakup with my ex-girlfriend to be extremely traumatic, in part because this had been the first relationship I had been in which I believed would turn into marriage. I believed, in part, that exploring this topic would help me understand the experiences of my ex-girlfriend better, and in doing so, would help me gain closure from the trauma of the breakup. It did, and it has, in ways that I could not have possibly imagined when this study began.

An important part of the phenomenological method is the researcher’s recognition that he/she may have some preconceived ideas, opinions, and assumptions about the phenomenon being studied, and must therefore find some way to set those aside, or at least

minimize them as much as possible, so they do not interfere with the collection or interpretation of the data being collected. This is referred to as “bracketing” (Cresswell, 2003). Bracketing involves thinking about, and usually writing down, what the researcher currently knows and/or believes and feels about the phenomenon being studied (Jackson, 2003). By doing this, it is presumed that the researcher will be able to put these beliefs aside and approach the study with a more open, and less biased, mind. When analyzing the data, bracketing may assist the researcher in recognizing when he/she is imposing his/her own preconceived notions about the phenomenon rather than accepting the interpretation provided by the participants. Ahern (1999) writes that proper bracketing “is a means of demonstrating the validity of the data collection and analytic processes” (p. 407).

As a result of my personal experiences with many individuals who had experienced relational traumas and had tattoos and/or piercings, and as a consequence of many of the readings I had done while researching this topic, I came into this study with a number of assumptions and preconceived opinions about this phenomenon. These included, but were not limited to, the following: 1) that people who had experienced relational traumas may have tattooed or pierced, in part, to obtain or regain a sense of control in their lives; 2) that people may tattoo and pierce as a way of representing their inner strength and resilience in overcoming their relational traumas; 3) that for some people, tattooing and piercing after a traumatic event would be an indicator of harm and risk of re-traumatization, and a sign of unresolved issues around the trauma; and 4) that tattooing and piercing may constitute, for some people, socially acceptable forms of self-harm, and be related to the experience of self-injurious behaviours such as cutting.

I expected to find that many of these assumptions would hold true for each of the women in my study. Recognizing that these assumptions would guide me as I interviewed my participants and analyzed their data, I attempted to set them aside so I would not inadvertently influence the responses of my participants and direct them (or as Osborne, 1990, p. 84 puts it, “lead the witness”) into giving me answers that confirmed my beliefs. Ahern (1999) writes that the ability to set aside one’s presumptions is more a matter of being reflexive rather than objective. *Reflexivity* is defined as “the capacity of any system of signification to turn back upon itself, to make itself its own object by referring to itself” (Myerhoff & Ruby, 1992, p. 307, cited in Ahern, 1999, p. 408). By reflecting on one’s experiences on the journey of researching a particular phenomenon, the “researcher’s energies are spent more productively in trying to understand the effects of one’s experiences rather than engaging in futile attempts to eliminate them” (Ahern, 1999). To assist me in setting aside my presumptions, and guided in part by Ahern’s (1999) ten tips for reflexive bracketing, I kept a journal of my thoughts and experiences throughout the project. My journal allowed me to express my thoughts, feelings, and concerns as the project unfolded. After interviewing each participant, I took a few moments to journal my thoughts on the interview and any presumptions I might have regarding their responses. I also journaled on my challenges and frustrations as I worked on this project. I found the journaling process to be a useful forum in which to reflect on this entire journey. It allowed me to identify, reflect on, and displace feelings which could impact the data, so I could return to a more objective stance as I analyzed it. I hope that this process made me a more ethical and open-minded researcher as a result.

Osborne (1990) points out that there are many similarities between phenomenological researchers and counsellors, in that “warmth, caring, openness, positive regard for others, ethical integrity and responsibility are important requisites for both” (p. 89). I therefore attempted to approach each interview with a fresh and open mind, and address each participant in a friendly, open, non-judgmental manner. In so doing, I hoped that my participants would feel accepted by me and be comfortable sharing their experiences as openly and honestly as possible, without fear of judgment or rejection by me, regardless of their responses. In this regard, I was guided by my skills and experiences as a counsellor, which I found were easily transferable to my role as a phenomenological researcher.

Research Procedures

Participant Criteria

This study sought to explore the experience of women who have experienced highly stressful and/or traumatic events in their lives, and who have tattoos and/or piercings. There were both practical and personal reasons for the decision to use female participants. From a practical point of view, much of the existing research studies have used female participants, potentially making it more practical to compare the results of this study to previous ones. From a personal standpoint, many of the individuals I have known in my personal and professional lives who had experienced traumatic events and had body modifications were women; thus, there is a personal interest in learning more about the experiences of women in relation to their body modifications.

To participate in this study, potential participants had to meet the following inclusion criteria:

- 1) Be an adult female aged 19 or older

- 2) Have at least one tattoo or piercing (with the piercing being in a location other than the nose or earlobe)
- 3) Have experienced at least one significantly stressful event involving a relationship (examples included, but were not limited to: breakup; separation or divorce; death of a loved one; sexual abuse/rape (acquaintance or stranger); abandonment by parents/caregivers)

The participants in this study consisted of seven women ranging in age from 23 to 54, with an average age of 32. Six of the seven women identified as Caucasian; one was of mixed ethnic background.

Participant Recruitment

Participants were recruited in several ways. A recruitment flyer was created by the researcher and hand delivered to tattoo and piercing parlours in the Greater Vancouver, British Columbia area (approximately 17 parlours; several others were either closed that day or had changed locations). These cities were: Vancouver, Burnaby, New Westminster, Port Moody, and Surrey. Most parlours expressed a willingness to display the flyer and/or speak to their clients and acquaintances about the study; only one parlour refused to participate. One tattoo parlour went so far as to place the information on their website, encouraging people to participate in the study. Various individuals affiliated with me also posted the flyer in their workplaces. Participants were also recruited through the social networking sites Plenty of Fish (www.plentyoffish.com) and Facebook (www.facebook.com), and via word-of-mouth.

The recruitment flyer outlined the purpose of the study, stated the university affiliation, the approximate amount of time required to participate, the criteria for

participating in the study, information about a \$50 cash prize being offered as an incentive for participating, and my contact information for further information or to participate in the study (see Appendix B).

Interested parties who contacted me were screened to ensure they met the inclusion criteria for the study. They were then provided with more details of the study, and informed that many of the interview questions would be of a potentially sensitive nature surrounding past highly stressful and/or traumatic life experiences in their relationships. Those who still felt comfortable participating were informed of the approximate time commitment of one hour and the fact that interviews would be audio taped. Participants were also asked to bring pictures of their tattoos and piercings to the interview, or to email these to me before the interview date. I asked participants to ensure that the pictures did not show their faces, in order to protect their identities. Participants were afforded the opportunity to ask questions before committing to participating in the study, and were informed that they could withdraw from the study at any time. Appointments were then set for the actual interview date. Interviews took place either in person or via phone. In-person interviews were held either in an office or in participants' homes. In total, seven women were interviewed for this study. There were several more who wished to participate, but due to scheduling factors, they were unable to.

Data Collection

At the time of the interview, but prior to beginning the formal interview, great care was taken to ensure that participants were fully aware as to what was about to take place. They were reminded again about the criteria for the study, mainly that they had experienced some form of highly stressful and/or traumatic experiences in their relationships at some

point in their lives, and that they had at least one tattoo or piercing. Participants were informed of their right to pause or end the interview at any time, and to skip or refuse to answer any questions they found too difficult to respond to. They were reminded that the interview would be recorded for later analysis, and that their real names would not be used at any time, either during the recording or in any write-ups that resulted from their data. At this point, they were asked to provide a code number (consisting of any letter in the alphabet and a number between 1 and 30), and a pseudonym that would be used to represent them in any future write-ups, including this thesis. It is important to note that the names of the participants listed in the Results section are not their real names, but pseudonyms that the participants chose to represent themselves.

Participants were asked to complete two consent forms and a demographics form. One was a general consent form outlining the purpose of the study, the potential risks and benefits of their involvement, and ethical rights such as anonymity and the right to withdraw at any time without any penalty or harm coming to them if they did so (Appendix C). The second consent form was for the current and future use of the pictures of their tattoos and piercings (Appendix D). The use of pictures in this study was crucial. During face-to-face interviews, the pictures were displayed on a computer screen for both me and the participant to observe and refer to. During phone interviews, I had the pictures on the computer in front of me, and participants were asked to have theirs displayed in front of them as well. Visually seeing the tattoos and piercings throughout the interview provided a far richer experience of the meaning behind them than a mere verbal description could possibly ever allow, particularly since many of the tattoos and piercings were in areas that were often hidden by clothing (e.g. the back or side). And by having the pictures displayed on the screen,

participants were able to in a sense, “speak *to*” their tattoos and piercings rather than just about them. It is not often, for example, that a person who has a tattoo on their back is able to look closely and directly at that tattoo. These pictures provided participants with that opportunity. All participants brought or emailed pictures of their tattoos and piercings prior to the interview, and all agreed to the future use of these pictures in whatever manner needed. The demographics form asked participants general information about their age, level of education, marital status, and other information that may prove useful when analyzing their data. A copy of both consent forms was given to each participant for their records; the demographics form was not.

Both a standard audio cassette recorder and a digital recorder were used to record the interviews (each providing a backup of the other, should something go wrong with either device). After completing the various forms, the recording devices were turned on and the interview began with the first question: “Tell me the story of your tattoos and piercings.” The interview followed a semi-structured format (see Appendix E). Earlier questions were left purposely open to elicit as much information as the participant was willing and able to provide, and many follow-up questions arose from their responses. Questions closer to the end of the interview asked about specific aspects of the tattooing/piercing experience that may not have been answered in earlier questions. In this way, I was able to obtain a full, rich understanding of the tattooing and piercing experience.

Throughout the interview, I asked participants how they were feeling and whether they were felt okay to continue or needed a break. All participants reported feeling fine throughout the interview. Although I am registered as a clinical counsellor in British Columbia, I endeavored to ensure that I did not confuse my role as a counsellor with my

current role as a researcher. I was very friendly, caring, and non-judgmental with my participants, and remained emotionally-present with them throughout the interview. However, I was keenly aware that I was not their counsellor, but a researcher learning more a particular phenomenon. I asked all the participants whether they were connected with people and resources should the interview trigger any emotional responses or re-traumatize them in any way; all participants indicated that they had a great deal of personal support should that happen, and many went so far as to tell me what those supports were. I also provided participants with a list of counselling resources that they could access if they needed to.

Interviews were expected to last between one and two hours. The majority were approximately one hour in length, with one interview being thirty-seven minutes long, and another being two hours long.

Data Analysis

All participant interviews were transcribed, and each participant received a copy of their transcribed interview for their review (discussed further in the section on Validation below). Osborne (1990), in writing about data analysis in the phenomenological method, acknowledges some of the challenges of analyzing phenomenological data:

Phenomenological methodology accepts the difficulty of representing human experience through language. Although there are non-verbal ways of communicating, most data are in the form of language which...does not necessarily convey lived-experience unambiguously. The meaning of verbal descriptions has to be interpreted by the researcher (p. 83).

Since a degree of interpretation must be done by the researcher, it was prudent to have as full and deep an understanding of the data as possible. To achieve this, I read and re-read each

participant's interview several times, attempting to immerse myself in the data in order to understand as fully as possible the meaning and experience of tattooing and piercing for the women in my study. In this matter, I was guided by the procedure outlined by Colaizzi (1978). Colaizzi's model of data analysis is very similar to Giorgi's (Giorgi, 2006) and Karlsson's (1993) models. Colaizzi's procedure involves several steps. By following these steps, it was expected that several themes would emerge both within and across the different participants' interviews. Briefly, the steps are:

- 1) Read all of the participants' transcribed interviews (called "protocols") to get a feel for, and sense of, their meaning.
- 2) Re-read each transcribed interview and pull segments (i.e. significant phrases and sentences) from them that relate directly to the phenomenon being studied.
- 3) Attempt to determine the meaning underlying each significant segment, using "creative insight" (p. 59) to distinguish between what the participants say and what they actually mean.
- 4) Arrange the meanings that emerge from the data into organized themes that are common to all (or most) of the participants, and compare these themes to the original transcripts in order to validate them.
- 5) Combine all the results into an "exhaustive description" of the phenomenon being investigated.

Validation

In addition to the validity established through the process of bracketing described earlier, each participant was emailed a copy of their transcribed interview and given the opportunity to review it and correct any mistakes or make any clarifications they felt were

needed. They were invited to make any additions, corrections, or deletions that they wished, and then return the transcripts to me. This step was intended to help ensure the accuracy of their statements and beliefs regarding their experiences of body modification in light of their relational traumas. It would further ensure that their experiences and voices were expressed as accurately as they wished. Of the seven participants, only one returned their transcript with one minor correction; the others did not, which suggests that they were either satisfied with their original responses, or simply did not have the time or opportunity to review it by the time this thesis was completed.

Chapter IV: Results

This chapter begins with a brief biographical description of each of the seven women who participated in the study. The purpose of this is to give the reader an overview of each of the women who shared their experiences with me. Each biography includes a brief summary of some of the relational traumas that occurred in these women's lives, as well as a description of their tattoos and piercings. As stated earlier, prior to the start of each interview, each woman chose a pseudonym for herself that would be used to represent her in this study. As such, no real names have been used in the results, in order to maintain the anonymity of each participant. After the biographies, there will be an analysis of the main themes that emerged from the interviews. One of the main purposes of this study was to give women a voice in the sharing of their lives and experiences with regard to their experience of trauma and the use of tattoos and piercings. As such, wherever possible, I will provide direct quotations from the interviewees themselves, in order to honour as much as possible the voices and experiences of these women.

Participant Biographies

Mitzi

Mitzi is a 24 year old Caucasian woman who is in college studying to be a counsellor. Although she has lived in Vancouver for two years, she is originally from the United States. Two major life experiences, both described by Mitzi as traumatic, seem to have shaped parts of Mitzi's life and her experience of tattooing. The first was being raised by an alcoholic mother (Mitzi's father "just wasn't really around"). As such, Mitzi found herself in the role of having to look after and raise her sister, who was two years younger than her: "I had to play mom all the time." Mitzi stated there were many childhood events that were traumatic,

including one experience where her inebriated mother drove the car and threatened to drive them all off a cliff, and another incident where her mother came home, drunk, and ordered Mitzi to turn off the computer and go to bed, even though it was only six o'clock in the evening. When Mitzi refused, her mother slapped her and Mitzi instinctively slapped her mother back. Mitzi's sister intervened before a more serious fight could ensue, but this incident left Mitzi in shock.

A second major life event was Mitzi's relationship with a man with whom she was in college. The two ended up living together. When the man decided to move to a small Midwest ski town, Mitzi, being in love, moved with him. Mitzi described the experience as "miserable". Being a small town, there were no colleges and little to do there. Mitzi was too young to drink, so opportunities to socialize were limited. After a year of living together and arguing constantly, Mitzi's boyfriend suggested having an open relationship, which Mitzi, out of frustration, agreed to. The next day her boyfriend was dropped off in the morning by another woman, making it appear that his suggestion of an open relationship was preplanned. She was further shocked to learn that her boyfriend had also been using cocaine for the past year. This experience left Mitzi feeling betrayed and deceived. Mitzi's experiences fit the criteria this study outlined for relational trauma.

Mitzi has a number of tattoos and piercings, though she describes the piercings as "mainly aesthetic", and unrelated to her relational traumas (though she does acknowledge that she got many of the piercings while dating her then-boyfriend: "I think a lot of the stuff was really related to him.") Mitzi's first tattoo was of two sparrows on her hips, representing freedom and her "desire to travel around the world".

The second is on her side, and consists of an old-fashioned key and a gun crossed over each other in an “X” fashion, with the gun on top. Above the key and gun are three nautical stars. Extending from the bottom of the “X” is a web. The gun’s trigger has presumably been pulled, as a flag bearing the word “BANG” is coming out of the barrel. Mitzi states that the key represents “the key to [her] heart”, with the gun protecting her heart. Mitzi acknowledges, however, that the gun is “obviously...not very strong” as it only fires the “BANG” sign and not actual bullets. The web represents Mitzi’s desire that “it takes a long time before I give my heart away”, while the nautical stars are there simply because she likes them. She got this tattoo towards the end of her relationship with the man described above.



Figure 4.1 Mitzi. (Used with permission.)



Figure 4.2 Mitzi. (Used with permission.)

Mitzi's third tattoo is on her back, and she got it soon after her relationship ended. It consists of a "sacred heel" with a blue rose on either side of it. Above the sacred heel are two diamonds with bat wings. Mitzi states that these tattoos represented her take on organized religion, as well as her anger at her ex-boyfriend over his "worshipping" of fashion and material things. This tattoo pokes fun at him and at the "darker side to having money".

The last tattoo is on her left hand, and consists of a sparrow resting on top of a scroll with her sister's name. On the fingers of her hand (excluding the thumb) are the initials MAC and a star. Her sister's name represents a connection to her sister from all the years of raising her, and the sparrow represents freedom from that particular role ("playing mom", as stated earlier). The initials and star on the fingers represent a character from one of Mitzi's favorite movies, who had the same tattoo on his hand. Mitzi stated that she relates to the character's quiet nature (he does not talk at all in the movie) with keeping quiet herself and not speaking what's on her mind, as well as the movie's general theme of everybody just "entertaining themselves and doing the best that they could with what they had". Mitzi plans on getting more tattoos in the future.



Figure 4.3 Mitzi. (Used with permission.)

Margaret

Margaret is a 52 year old Caucasian woman who is a mother of two. Margaret has only one tattoo, but this tattoo holds deep-seated meaning and purpose to her. A year ago, in 2008, Margaret's 20 year-old son died tragically when he crashed through the skylight of a restaurant and fell several stories after climbing onto the roof to watch the sunrise with a friend. The suddenness of his death and the shock that ensued were understandably overwhelming. Although Margaret had never before considered getting a tattoo, when her daughter mentioned that she was thinking of getting one, "the second that she said it I knew that was exactly what I wanted" as well. Margaret chose to place her tattoo on a prominent spot: her left wrist. The tattoo consists of one word: her son's name, facing her so she can have a daily reminder of him in her life. One of the prominent features of this tattoo is that the image is his actual signature, and not simply his name written in script. To Margaret, this holds so much more meaning: "It's like he is the one who has...written on my wrist."



Figure 4.4. "Tommy". Margaret. (Used with permission.)

Margaret has already booked an appointment to get her daughter's name on her other wrist, because she doesn't "want [her] life to be only about [her son]", and because she thinks about her daughter often as well and wants to commemorate her life too. Margaret has also discussed the possibility of adding to the tattoo representing her son every so often, perhaps marking certain events such as the five- or ten-year anniversary of his passing.

Diamond

Diamond is a 34 year-old Caucasian mother of four who has lived on the West Coast of Canada and is currently living in a more rural community. Diamond got her first tattoo about five or six months after having left a domestically violent relationship at the age of 17. This relationship was abusive in many ways, including physically, emotionally, verbally, and sexually. One of the major traumas connected to this relationship was when Diamond was violently abducted by her boyfriend and driven off in his car. A friend who witnessed this phoned the police and the boyfriend was eventually arrested at gunpoint. This was at least the second time that Diamond had been abducted by her boyfriend, as the same friend had witnessed the first abduction as well and had her ankle broken by him in the process.

A second relational trauma, years later, involved Diamond watching helplessly as her two oldest children were hit by a car. Although the children survived, Diamond was diagnosed with Post-Traumatic Stress Disorder (PTSD) as a result of the incident. Diamond has had other relational traumas in her life, including having a poor relationship with her father ("He was a deadbeat dad"), as well as leaving a marriage, which led to her taking her children and going to a safe house.

Diamond's tattoos are related in the sense that they are all of creatures that fly. They include an African Grey Parrot, a ladybug on her right ankle, and a dragonfly on her left calf.

The parrot represents “the illusion of freedom”, and was the first tattoo she got after leaving the abusive relationship discussed earlier, and the other two (as well as two more she is planning, a hummingbird and a butterfly) are meant to represent each of her four children.



Figure 4.5. Diamond. (Used with permission.)



Figure 4.6. Diamond. (Used with permission.)

Diamond has also had piercings at various points in her life, including a tongue ring that she got shortly after her divorce (representing, in part, her freedom from the relationship and celebrating the fact that she was single and available again), and a clitoral hood piercing that she got just as her new relationship was getting more serious (as a way of halting any chance of sexual intimacy with the new man until their relationship got more stabilized).

An interesting postscript to Diamond’s story is that a few days after our interview, Diamond wrote to tell me she was “so inspired by our conversation, and considering the deeper meanings of [her] already existing tattoos, [that she] got a very small Kanji tattooed on [her] inner left wrists...Chinese characters [meaning] ‘inner strength’”.

Charlie

Charlie is a 28 year-old Caucasian woman with several small tattoos. Charlie describes a childhood that was relatively happy, but a somewhat rocky adolescence characterized mainly by a relationship with her father that was filled with conflict, including

verbal, emotional, and physical abuse. Although Charlie is able to look back on this experience and say that her father was “trying to do [his] job [as a father] with the best intentions”, she states he did not do it “in the most healthy way”. Charlie also reports that there were some “things that happened” at that time of her life that “they may have been able to classify as sexual assault”. A second major relational stressor was when Charlie’s aunt, who had been struggling with mental illness for some time, died of a medication overdose. Compounding the tragedy was the inability to conclude whether her death was a suicide or an accident, as there was no note left behind. This incident was pivotal in helping Charlie realize the importance of family in her life.

Charlie’s first tattoo was of a set of footprints, placed on her big right toe. The rest have been Chinese characters for friendship (on her left shoulder), love (on her right ankle), and family (on her lower back). Each of these represents a particular phase or stage at the time of her life that she got them, and the last three in particular represent values that form a part of her core identity. Charlie plans on getting more tattoos; the next one will be the Chinese character for balance, possibly on the inside of her wrist.



Figure 4.7. Charlie. (Used with permission.)



Figure 4.8. Charlie. (Used with permission.)

Alexis

Alexis is a 34 year-old Caucasian woman who has experienced a great deal of relational traumas in her life, starting at a young age. Alexis describes the difficulties in living with an alcoholic father who was abusive toward her and controlled every aspect of her life. Her love/hate relationship with her father remained stormy throughout her life, until his sudden death a few years ago. Alexis moved out of her home at age 15, and grew up very fast. The environment in which she lived, and the people with whom she associated, included “bikers and gang members and drug dealers”, which led her to be personally involved in crime and drug use (and, for a time, addiction). Alexis has experienced the tragic deaths of friends, survived addiction and an eating disorder, drug overdoses, and suicide attempts. Today she is a successful woman working in the corporate world who is very much a strong and capable woman and the proud mother of a teenage daughter.

All of Alexis’s tattoos are on her back, either along the top or along the bottom. Alexis got her first tattoo at age 14 or 15, with her mother’s blessing (and accompaniment to the tattoo parlour), and her father’s disdain. It is of a rose on her back near her right shoulder. Her next tattoo is of a cow, on her lower right side. Alexis explained that she really loved cows and wanted something “goofy and fun and light-hearted” on her, to represent happy times. Her next tattoo, around age 20, is identical to the famous “Heart Breaker” tattoo on adult video star Jenna Jameson. Alexis explains that she grew up in a “prude, cold, unloving family” where she had been led to believe that showing affection was dirty and wrong. At age 20, she entered an adult video store with her then-boyfriend, and saw pornography for the very first time. The experience was enlightening for her. Though mortified and uncomfortable watching the adult video, she was also struck by Jenna Jameson’s beauty and

intelligence. The experience made her more socially aware and helped her “come out of [her] shell”. Though she had absolutely no desire to be a porn star or live the kind of lifestyle that Jenna Jameson did, getting the tattoo was nevertheless “sexually liberating” for her, and symbolized the experience of awakening that she had. Alexis’s next three tattoos are all related to her family life and Scottish cultural heritage, which she got around age 25. They consist of her family crest (which contains the family motto that translates to “never forget”) on her back near her left shoulder, a Celtic cross in the middle of her back, and a triangular Celtic knot work on her lower back. These were all ways of connecting with her background and heritage, and family. In particular, the motto on her family crest serves as a regular reminder to Alexis to “never forget when people are good to you, and...never forget when people treat you like garbage”. It also serves as a reminder of some of her other values in life, which include being a good person and helping others whenever possible.



Figure 4.9. Alexis. (Used with permission.)

In addition to her tattoos, Alexis has had multiple piercings, counting at least 27 at one point. These include multiple piercings in both ears, belly button, nose, a Monroe (upper left lip), tongue ring, and a labret (middle lower lip). She has inserted and removed many of these over the years. Alexis plans on getting more tattoos and piercings in the future. She is currently working on a tattoo to commemorate her deceased father in the hopes of bringing some closure to their troubled relationship.



Figure 4.10. Alexis. (Used with permission.)

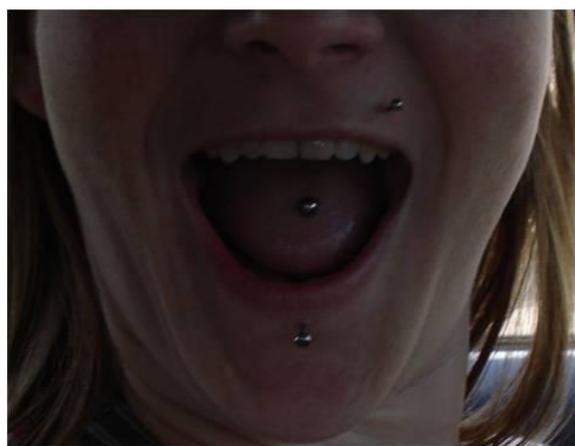


Figure 4.11. Alexis. (Used with permission.)

Rosarita

Rosarita is a 27 year-old massage therapist and graduate from both massage school and art school, of mixed ethnic ancestry (her father is from Trinidad and her mother is Caucasian; her paternal grandmother is Chinese). When Rosarita was 3 years old, her mother gave birth to a stillborn baby. Rosarita states that this experience “messed her [mother] up”, which then had a ripple effect on the rest of the family. Her mother went from being “very involved, very caring, very, you know, Mrs. Suzy Homemaker” to delving back into work. Rosarita says that the transition from seeing her mother every day to not seeing her at all caused a great deal of resentment and feelings of abandonment: “It actually caused a lot of

anxiety for me which...turned into depression". Rosarita's father, though present, was "pushed...out of that role" by her mother, which he accepted because her mother is "a difficult person most of the time". School was also difficult; Rosarita talks about gaining a lot of weight in her early years and being teased in school throughout her life. "I spent the whole day with people who teased me and came home and there was nobody there." Rosarita experienced a great deal of social anxiety, and to this day is still being treated for depression.

Rosarita has several tattoos, most of which she designed herself. The first, which she got at age 16, is of the Canadian flag on her foot, which she says does not signify patriotism for the country, but rather is an image that holds meaning for her, particularly after returning to Canada from visits abroad. Her second tattoo, at age 19, is on the front of her shoulder. This tattoo has roses and a blue symbol that represents her zodiac sign, Libra. There is also a blue line representing the Earth, and a line with a bump above it signifying the rising sun. The roses do not have stems, but have barbed wire instead, because Libras "are prone to mood swings...so we can be...nice as roses or mean and painful as barbwire. The third tattoo is a spiral on her lower back that she got around age 21 or 22. The spiral "represents eternity, and the low back is a...body part that represents the Libra". The fourth is on her left shoulder and is one she designed while in art school. It consists of a multi-coloured weave design. Rosarita got this tattoo to commemorate completing art school. It symbolizes her sense of individuality and being a "nation unto [her]self". Rosarita's fifth tattoo is of a phoenix, and is located on her right shoulder. This tattoo, though not yet completed, is intended to commemorate her graduation from massage therapy school. The phoenix is symbolic of "rising out of the ashes", and Rosarita describes finishing massage therapy school as a "trial by fire".

Rosarita describes her experiences growing up, and progress through her art and massage therapy programs, as being moderately to severely stressful but not necessarily traumatic. Nevertheless, it could be argued that Rosarita did experience various forms of relational trauma; most notably, abandonment and neglect by her parents, as well as verbal and emotional abuse from the teasing incurred during her early school years. Furthermore, the need to explore her past experiences through counselling as part of her massage therapy program may have re-opened unhealed wounds from these past relational traumas, thus contributing to the stressful experience of being in that particular program. Rosarita states she can definitely see herself getting more tattoos in the future.



Figure 4.12. Rosarita. (Used with permission.)



Figure 4.13. Rosarita. (Used with permission.)

L'Quisha

L'Quisha is a 23 year old Caucasian woman who works with children. L'Quisha has described her use of tattoos as very healing in coping with difficult events in her life, and most of her tattoos are related to family in one way or another. She got her first tattoo around age 17 or 18 to commemorate her grandfather, who had passed away a few years earlier.

When she told the tattoo artist she wanted to put the tattoo in a painful and unique spot, he suggested the top of her foot. She immediately agreed to this. The tattoo is of an anchor, in part to represent a nautical theme (her grandfather was part of the Marine Corps), but also because her grandfather was L'Quisha's "anchor" in life. L'Quisha described the eagle wings surrounding the anchor as an "inside joke" with her grandfather; it referred to an experience that they both shared together. A similar tattoo on her other foot represents her grandmother. This tattoo is of a lantern, symbolizing that L'Quisha's grandmother was her grandfather's "shining light". L'Quisha spoke lovingly about both her grandparents throughout the interview, and how they often matched in terms of their clothes and even how they physically looked. She wanted to have them both symbolically together on her body, and the two tattoos, being on either foot, are also similar in terms of size and colour. A third tattoo on the back of L'Quisha's neck is of her mother's maiden name (also the name of the grandparents described above). L'Quisha explained that she is very proud of her family, and proud of their name, and wanted something to symbolize that. A fourth tattoo on her lower back is the Japanese kanji for "winter", meant to represent her father. L'Quisha stated that her father has had many health problems in his life, and during one particular period when he was really sick and she was worried he might die, she decided immediately to get a tattoo to represent him and to deal with the stress of the situation. She chose the symbol because winter is her father's favorite season, and it reminds her of how much he loves it.

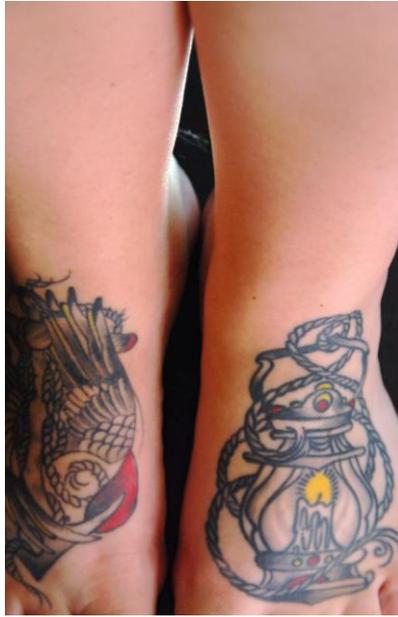


Figure 4.14. L'Quisha. (Used with permission.)

L'Quisha's most recent tattoo is a half-sleeve on her right arm depicting a stormy ocean with a hollowed out rock, and a cherry blossom tree with a moon behind it. The tree is deeply rooted in the ground. When L'Quisha was 19, she was in a horrific car crash that caused her to go flying out of the windshield of the car. She broke both legs, both arms, both collarbones, and fractured her skull. This was a life-changing experience for her, and she recognized that she could easily have died, especially when all of her friends kept commenting that by all accounts, she "should be dead". L'Quisha chose to get this tattoo, in part, because she wanted a tattoo to symbolize her ability to face difficult challenges and overcome them, and to be a strong and focussed even when everything around her was in upheaval. L'Quisha is still having work done on this tattoo, and plans on getting more in the future.



Figure 4.15. L'Quisha. (Used with permission.)

Common Themes

An in-depth analysis of the interviews from the seven female participants revealed several broad themes that were common to the majority of participants. Most of these broad themes could be further divided into several sub-themes. These themes are: 1) Remembrance, 2) Connection, 3) Identity, 4) Permanence, 5) Healing, Coping, and Closure, and 6) The Significance of Pain. Each of these themes will be discussed in further detail below.

Theme 1: Remembrance

One of the most striking themes emerging from the data was the use of body modifications, mainly tattoos, as a way of remembering some aspect of a person's life or experience. The theme of Remembrance can be further divided into three sub-themes: a) Reminder to self, b) Commemorating a person, event, or goal, and c) Fear of forgetting.

Reminder to self. A theme that arose for all seven participants was the use of a tattoo or piercing as a reminder to themselves of the things that are important to them. For some, it

is a constant, daily reminder of a significant person or event in their lives. As Mitzi explains: “Well I look at this one all the time, and it just, sort of reminds me of how much I love my sister, how much I love my family. It reminds me of my feeling of closeness with them, even though I’m away.” Similarly, Margaret’s tattoo gives her a regular reminder of her deceased son: “Well, it’s just that he’s always there. I mean he’s always there anyway, I think of him every day anyway, and uh it’s just...just to see it every time I move my hand....”

For others, it is a constant reminder of having lived through and survived a highly stressful or traumatic experience. Alexis explains: “It was really rough growing up and...I grew up with some pretty down and dirty...the lesser liked people in society if you will. And uh, it was just kind of a way of, almost a constant reminder of what I had been through, and [that] I didn’t want to relive that and what I had been through.” For Alexis, her tattoo reminds her of a difficult past life that she would prefer to avoid re-experiencing. Mitzi elaborates: “It reminds me of a very sad time. But...at the same time, I, I see the humour in it. I think that’s what helps me move on, is the humour. And the joke side of it.” Mitzi spoke of the “two-sidedness” of some of her tattoos and how these represent a “double-edged sword”. In this case, although her tattoo reminds her of a sad time, she is nevertheless able to see the humour in it, which gives her the strength to cope with her traumatic experience.

For still others, it is a daily reminder of important personal values in their lives. Charlie states: “I think they are more just really reminders of how important you know, the friendship, the love, and the family, and [they] serve as a kind of reminder of the value of all three of those things.” Later on, she adds: “It’s just always important for me to know that they’re there.” Similarly, Diamond speaks of the importance of her children in her life, and the value she places on her role as a mother. Seeing the tattoos that represent her children

“reminds me that I need to motivate myself” to get through the challenging days. L’Quisha relates her tattoo of a deeply-rooted tree in a sea of turmoil to her Christian lifestyle: “I mean, God has his disciples and he gives them strong roots to spread the word of God right and...for me it was like I needed something that was going to represent my strength and what I went through to get over that.” “The tree...will not fall over if its roots are very deep into the ground.”

Commemorating a person, event, or goal. The Merriam-Webster Online Dictionary (2009) defines *commemorate* as: “To call to remembrance”; “To mark by some ceremony or observation”; and “To serve as a memorial of”. All seven participants spoke of how they used their tattoos or piercings as a way to commemorate either a person, a significant event in their lives, or the achievement of a personal goal. Often, they did so in terms that conveyed a sense of ceremony or ritual to the experience.

Charlie speaks of the significance of her tattoo representing the value of family, which she got after the unexpected passing of her aunt, and the memories related to her: “I got it in the city where I lived with her before she passed, so just kind of thinking about all of the memories, all of the good times I guess, I had with my aunt...” In Charlie’s case, it was particularly meaningful to get this tattoo in the same city where she had once lived with her aunt, as a way of commemorating her life and their time together. L’Quisha speaks excitedly about how her tattoos representing her grandparents allow her the opportunity to speak about them on a regular basis:

It’s like almost spiritual it’s something that’s on you, and you need to show everyone. I could never ever do my grandparents justice in words, ever, I would never be able to tell someone about them and truly be able to capture

how amazing they were...and I feel like my feet and the art that this fellow did, has done that...people ask me all the time, and oh my gosh I get to tell them all the time this amazing story of how awesome my grandparents were. And I feel that it perpetuates them as human beings, and I'll never get to forget them.

Not all tattoos commemorating people are necessarily sad or of deceased people. Some participants chose to commemorate living persons as well. Mitzi spoke highly of an ex-boyfriend who is also a tattoo artist:

It was probably the most functioning relationship I've ever had [laughs], or at least the happiest out of all of them. And it ended up not working out and he was an amazing artist, he IS an amazing artist.... [And] I would still like to get a piece of his artwork on me that represents, you know, our time together.

Tattoos may also be used to commemorate significant events in one's life. Alexis explains how she would often get a new piercing after a breakup:

Where it was like...I had just gone through the worst thing next in my life; you know what, I'm just going to pierce it and move on. In a weird way it was like a new beginning but yet a burial at the same time. I got the piercing to kind of put that chapter of life behind me, and start fresh or start new, and move forward.

L'Quisha's near-death experience in a car accident had such a profound effect on her that she chose to commemorate it with a tattoo: "I'd been playing around with the idea of getting a bigger piece for quite some time and I'd been through a pretty traumatic car accident and uh...I kind of changed a lot through that, and I wanted to have something on my body to

represent um...stability in, in...a sea of turmoil.” Margaret, in her interview, spoke of the possibility of adding to her tattoo of her son over time: “I mean the thought does occur to me sometimes, maybe a 10 year anniversary or maybe a 5 year anniversary, you know, maybe marking some kind of passage of time....”

Some tattoos may not only commemorate stressful or traumatic events, but also mark achievements as well. Rosarita chose to get a tattoo to mark the passage of her graduation from massage therapy school, which had been a very stressful and trying experience for her: “I wanted to go for a bird. And I wanted the phoenix because of the whole rising out of the ashes thing. And um finishing massage therapy school was definitely a trial by fire.” “The whole time you’re getting that tattoo you’re thinking about ‘I’m getting it because I finished school’”.

Fear of forgetting. A minor theme emerged from the data around the fear of forgetting a loved one who has died. Only three of the seven participants’ responses fit this theme. However, it is important to note that only four participants could have possibly met the criteria for this theme (i.e. having experienced the death of a loved one and gotten a tattoo around it). Therefore, of the four participants who could have reported this theme, the majority (i.e. three) did. The wording that these participants used to describe this fear was very similar to each other. Margaret expressed the fear that both she and others would forget about her son: “I think there’s always the fear after...or at least I’ve noticed that I’m not the only one who feels this way... after a loved one dies that there’s this fear that...that not only will everyone else forget him but that...I’ll forget him, and so it seems that every possible way I can think of to remember him I want to....” Charlie expressed a similar concern about forgetting her aunt: “I think one of the fears at least for myself, when losing somebody is that

you will forget them, forget the little things, and so that was I guess my way of kind of reassuring myself...that they would always be with me.” Finally, L’Quisha, speaks of her fear of her memories fading over time:

It’s always has scared me like...when people pass away or people get sick that you know one day my memories aren’t going to be as strong as they were 10, 15 years ago.... And that has always terrified me...especially like with my grandparents. [...] I’ve never ever wanted to forget them and I always wanted their memories to be so vivid and I felt like getting uh you know a tattoo or something in a spot that’s very painful and...very vivid that I can always look at them and have them with me and like never ever be able to forget.

For these participants, the act of getting a tattoo served as a way to allay their fears of forgetting their loved ones who have passed on, and reassure them that these people would always remain strong in their memories.

Theme 2: Connection

A second major theme that all participants related to at some level was that of Connection. Although Connection is closely related to the first theme of Remembrance, it differs in an important way. Connection involves more than just remembering a loved one, event or experience in one’s life. In addition, it is an active attempt to remain engaged with that person, event or experience. It is an act that ensures, for better or for worse, that the individual remains connected somehow to the person, event, or experience, regardless of whether the connection is a good one or a bad one. The theme of Connection has several sub-themes, including: a) Connection with family, b) Connection with significant other, and c) Connection with the deceased.

Connection with family. Five of the seven participants gave examples of connecting with family members through their tattoos. Mitzi states, for example: “It just...reminds me of how much I love my sister, how much I love my family. It reminds me of my feeling of closeness with them, even though I’m away.” This tattoo allows Mitzi to feel connected with family members who live in another country. Similarly, Charlie says of her Chinese symbol for family: “I think family has always been very important to me to some respect, but not so much until I got a little bit older and also with the passing of my aunt that brought us a lot closer together and made me realize the value of family much more....” Alexis speaks with pride of her family-themed tattoos: “The Celtic knot one or the family heritage crest...was more of a cultural pride thing, like ‘this is where I come from, this is where I connect to’...those three in general [were] pretty much around that.” For these women, some of their tattoos represent a clear desire to remain in close connection with their family and/or culture of origin.

Connection with significant other. Some of the tattoos and piercings of four of the seven participants keep them symbolically connected to their significant others, even (for some) after they have broken up. The tattoos on Mitzi’s side and back were, for example, directly connected to the turmoil Mitzi faced as her relationship was ending: “This was one of the last things we did together.” Diamond’s decision to get a tongue piercing and a clitoral hood piercing were also directly connected to her relationships with significant others. Diamond got her tongue ring shortly after ending her relationship with her then-husband: “...the fact that I was newly single. I’m sure there was much of a connection there [between the ending of the relationship and getting a piercing]. I was like, ‘Hey, look at me, I’ve got a tongue ring, let’s go.’ You know?” Later, when getting into a serious relationship with a new

man, Diamond got a clitoral hood piercing precisely to avoid getting intimate too soon in the relationship. “I wanted to ensure we were there for a long time, before we were there for a good time.” Alexis’s decision to get a new piercing was specifically connected to the fact that her ex-boyfriend did not want her to get one:

It was kind of funny like with my ears, I gave myself a new piercing because my ex didn’t like [my] earrings so I gave myself another one. Same reason why I cut my hair the one time, because he hated my hair short. So it was almost like a “F-you” you know what you don’t like it, it’s almost like a revenge thing....

Connection with the deceased. Of the seven participants in this study, four had experienced relational traumas that included the deaths of loved ones. Of these four, all four of them had tattoos whose purpose was, in part, to keep them connected to that deceased loved one. L’Quisha speaks about the meaning her tattoo holds for her, in connection to her deceased grandfather:

Eagle wings um... is, is kind of like my inside joke to my grandpa. Um on his boat, like where his boat was moored...there were these giant pilings, and like these seagulls would come over and he called them shit hawks. And...he would spend like hours making pea shooters and he would teach me how to shoot peas to try and knock them off because he didn’t want the birds to poo on his deck, to not have to go clean it again. [...] Or we’d go out to...Wal-Mart and we’d buy...super soakers and come back and shoot the birds.... I just wanted something that I could look at, and smile about as well as kind of feel...a different connection.

L'Quisha's tattoo reminds her of a special connection she had with her grandfather that no one else shared; it was "their thing" to do together. This tattoo keeps her connected with her grandfather through the warm happy memories she has of those experiences.

Similarly, Alexis discusses her wish to get a new tattoo commemorating her father, who died a few years ago. Although she describes her relationship with her father as abusive and highly stressful (It was "a weird love/hate thing that we had"), she nevertheless expresses her desire to remain connected to him through a tattoo. This particular tattoo will also provide her with some closure: "And now that he's passed away...I will never ever be able to make peace [with him], so I have to make it within myself".

Theme 3: Identity

The theme of Identity speaks to the notion of self-discovery and self-knowledge through various life experiences. The participants in this study tattooed and pierced, in part, as a way of signifying who they were as unique individuals. The experiences of nearly all of the participants fall into the three sub-themes of a) History, b) Strength/Resilience, and c) Survival.

History. The mere re-telling of the stories surrounding their tattoos and relational traumas suggested that these stories were an important part of my participants' life histories. All seven participants spoke of particular events and experiences in their lives as being markers in their life histories. As Rosarita explains: "In a lot of ways they're like badges for me of things I've accomplished or things that are meaningful to me." Similarly, Mitzi states that her tattoos are "marking an important time in my life that I made it through." Charlie and Alexis both use the metaphors of stories, books, and chapters to explain their body modifications. For example, Charlie states: "It's almost kind of like a life story, so when I

look back I can see all the different things and what was important to me at that time in my life”. Similarly, Alexis explains that her “tattoos are more of a self-discovering thing in a sense of, I’ve got them to kind of tell a story. Whereas the piercings were to mark chapters in those stories.” And later: “Every time I got one [a tattoo or piercing] it was the beginning of a new chapter in my life...whether good or bad.”

The importance of body modifications signaling an important part of one’s history is especially salient in participants’ responses to questions surrounding regretting any of their body modifications, or their thoughts on removing their body modifications (tattoos especially) at some point in the future. Every single participant made an emphatic declaration, without any hesitation, that they neither regretted their tattoos, nor that they would remove them in the future. Charlie states: “No, it’s like life, I think that’s why I like my tattoos, cause I look at mine on my toe and I think what an idiot I was [laughs] in that life stage. If I didn’t go through that I wouldn’t be where I am today... I would hate to regret it, because it’s just a part of my history.” L’Quisha declared: “I don’t regret for a second anything that I ever put on my body. It would be a huge disservice to the people that passed away, and [to] my experiences to take them away from me and not be able to look at them.” Mitzi similarly stated: “I think that removing them would be... insulting in a way. It would be like trying to erase that memory or trying to erase the meaning behind it all, you know?” Clearly then, an important part of these women’s identities lies in the importance of marking historical moments and people in their lives, and commemorating that.

Strength/Resilience. Six of the seven women spoke of their tattoos and piercings as symbols and reminders of their personal strength or resiliency. L’Quisha, who experienced a very traumatic car accident when she was younger, wanted a tattoo “to represent [her]

strength and what [she] went through to get over that”. As a result, she got a tattoo on her arm that depicted a deeply-rooted tree in a sea of turmoil, with the tree representing her great inner strength. There are also rocks in the image, representing “the little road blocks that you get...that try to attack you [the tree]...but...you gotta really stay strong and try to focus on where you’re going.”

Alexis speaks of her tattoos and piercings as both internal reminders of her strength (as a way of building up your self-image as a strong person) and external indicators of strength (where others also see you as being a strong person):

Even if it’s just a psychological thing in a sense of getting that piercing and that’s one more piercing and you’re stronger because of it... And maybe people take your appearance as being stronger; that you’re a strong person because you’ve endured this pain of piercings and tattoos. That kind of feeds off of it too where you build up your internal emotional strength... to kind of face the world....

For Rosarita, her tattoos serve as “badges” that are “an everyday reminder of my own inner strength. [...] For me, that’s a great way for me to be able to say that ‘yes, I’m a strong person’, and that kind of thing.” The tattoo representing her zodiac sign is particularly illustrative of this, in terms of both her strength and overall identity:

I like astrology; especially through high school I really used that to help me understand myself, and being depressed all the time. And, it was really easy to go to a book and say okay Libras have these strengths; I have these strengths. [...] To focus on the strengths and that kind of thing was really important and so I used my zodiac and astrology for that quite a lot.

Survival. The sub-theme of survival plays out in participants' perceptions of themselves as people who have survived particular trials and tribulations in their lives. All seven participants describe in some detail the importance of using tattoos and piercings as markers acknowledging that they have survived something in their lives, and furthermore, that they have the capacity to overcome future challenges. Diamond's experience invokes the image of a tough warrior. Her tattoos: "keep...me in fighter mode, right? I can make it through, I can persevere, I've been through worse." Similarly, Rosarita's experience of survival has led her to develop a self-image of toughness and capability that is a core part of her personality:

The thing is that I am tough...I have the ability to endure things that a weaker person might not be able to. [...] I can handle a lot of pressure. I can handle a lot of difficult situations. I can survive a lot of things that would make other people crumble. [...] That's what it means to be tough. I made it through that, I can make it through this.

Margaret's tattoo of her deceased son's name reminds her that she has survived her son's tragic and untimely death, and it gives her the courage to face each new day and continue living her life:

It's like if you had a scar and you remembered surviving something or... There's something comforting about having it right there with me, close to me. [...] It is this huge wound...but I'm still alive...and I think, I think there is sort of a choice to be made, like... you can actually decide to...curl up and die yourself...or you can decide to go on living... It seems like I have to make

that decision a lot...every day, when I wake up, actually... Ok I think, "I'm...yeah, gonna be alive today" or whatever.

Alexis and Mitzi cite their tattoos as "proof" that they have survived something. For Alexis, her tattoos are "almost like war wounds.... A soldier comes back from the war and he's got bruises or cuts. He can probably tell you this one is from when we were fighting in the ditches here and yet I survived, I made it, I got through." Mitzi says that her tattoos signify that she "made it through these hard times, and I can do it—it's like *proof*, you know?" For all these women, the acknowledgement of surviving through difficult times, and commemorating these with tattoos and piercings, forms an important part of their identities.

The themes of History, Strength/Resilience, and Survival were the major sub-themes of the overarching theme of Identity. Some other sub-themes related to Identity arose from the data, though these themes applied to a smaller group of participants (three or four of the seven), and will not be discussed in detail here. They are worth noting, however. The sub-themes of Freedom and independence; Values; Image of toughness; and Control were significant for several of the women in this study in terms of their overall identities, and speak to the complex and multi-faceted nature of identity formation.

Theme 4: Permanence

The theme of Permanence arose out of the interviews of six of the seven women. This theme encompasses the knowledge that getting a tattoo is a permanent process; that once you have a tattoo, it is with you for life (of course, one can have a tattoo surgically removed, but this is often a very expensive and painful process that often leaves scars behind). Since piercings can easily be removed at any time, the theme of Permanence clearly applies to tattoos only.

For Charlie, the fact that her tattoos are permanent is one of the qualities that attracted her to the idea of getting them in the first place:

I think the fact that it is permanent...because they were pretty big life events, or whether it was a life change or life stage change, but I guess to me to get a haircut [instead of a tattoo], that can be gone really in three weeks, it grows a bit longer and changes, whereas these are representatives, it's almost kind of like a life story, so when I look back I can see all the different things and what was important to me at that time in my life... you know, it's just they'll always be there. I really like the fact that it will be permanent.

L'Quisha explains that the permanency of her tattoos means they are with her wherever she goes: "I'll have them forever. I am never going to misplace them, I'm never going to lose them. They're always with me."

For Alexis, some of her tattoos provide permanent reminders of her values:

[My] family motto "forget not" served as another reminder that you never forget when people are good to you, and you never forget when people treat you like garbage. I always try to make it a point in my life to help other people, I like to help and stuff that's just how I am.... I've had a lot of people screw me over too, like rob me, take a part of myself whatever. It was another permanent reminder of just "never forget".

For Margaret, the permanency of her tattoo was symbolic of the fact that her son once lived and breathed, and this played a significant role in her decision to get a tattoo. "Whereas I would never have considered having a tattoo [before] because they're so permanent, right? But his *death* is permanent, you know, and...his life... the fact that he *lived* is also

permanent. So it just suddenly seemed like a really good way of marking his life” [emphasis in Margaret’s voice during the interview].

Rosarita chose to get tattoos, in part, to have something marking her life that represented permanency and stability:

I chose those tattoos because I like art and I wanted something permanent that would be a part of me forever. [...] I was 18 and I decided I wanted one, I’d been through enough changes that I was ready for something that wouldn’t go away. I think that’s still something, that’s why I get the tattoos like. With all the [transiency] in life, it’s nice to have something that will always be there. That won’t wash off. Um, no matter the changes.

These women all made it very clear that they were aware of the permanency of their tattoos before they got them, and that they made conscious choices to get tattoos with that in mind, and in many cases, *because* of the fact that they would be permanent.

Theme 5: Healing, Coping, and Closure

A major theme emerging from the data was that the *process* of getting tattoos and piercings, as well as the tattoos and piercings themselves, helped participants heal, cope, and gain closure from their relational traumas. For example, several participants spoke of the process of getting a tattoo or piercing as a shock that broke them of the numbness they experienced as a result of their trauma. As Margaret explains: “I’m mean, you’re just walking around in such a fog after it happens, you know like nothing seems real. And the pain [of getting the tattoo] was real, so uh...it felt good, actually.” Diamond’s experience was similar: “You’re kind of numb. And you go through your days kind of in a blur. [...] It kind of just again, shocked the system back into learning how to take one step at a time again

and pick up your pieces and carry on.” Diamond further explains that this is not necessarily a conscious process: “I think it’s subconscious. I don’t think you clue in to that at the time. I don’t think you think, ‘I’m going to snap myself out of this [trauma] by getting a piercing.’ You know, I think that you just need to do something drastic for yourself. And that ends up being it.” L’Quisha uses the metaphor of a marathon to describe her experience of getting a tattoo:

It’s like running a marathon. At the very end of it you’re exhausted, but you feel like you’ve accomplished something and you know you’ve worked hard to get to that finish line. And you have this like, kick of endorphins after... it’s a really great feeling, like it may feel crappy while you’re doing it... like I mean who wants to run 26 miles...I wouldn’t right, but when you finish it, it’s like, “Yeah, look at what I accomplished!” I don’t blame people that [don’t understand it], but...it’s important to me. It’s just how I deal with trauma...and stuff like that.

For Rosarita, the healing process of getting a tattoo entails not just the actual tattooing itself, but everything leading up to it, including designing the tattoo with the artist. She compares the experience to having a spa day, or to experiencing a coming-of-age ritual:

The processes of going through, like making the appointments and designing them [the tattoos] and you know sitting in a chair with the artist. [...] And like the artist that’s working on the phoenix is particularly good. Like she’s a great artist and she’s a great person too, like she actually takes care of her clients. And so...it’s kind of like a spa day, but a pain spa day. And um, like if you think about tribal life and whatever, you have to go through certain um

trials like. I don't know if you know much about...American Indian or whatever history but like. You do...your first hunt...or whatever. Just the whole searching thing that they have to do.

Mitzi speaks of some of the unique ways her tattoos help her heal: "Yes, the tattoos do help in the healing process because it's a permanent reminder, of like, hey, you know...there's a lesson to be learned here but don't take it so serious. Like...there's always something funny about it, right?" Rosarita explains that her tattoos "help me stay calm I think [laughs]. Knowing that I have things that represent me without me having to say anything necessarily."

For some participants, the actual *physical* healing of the tattoo was also significantly meaningful, in terms of nurturing the physical wound that arises from a new tattoo or piercing. Alexis explains:

Well yeah, because there was a physical healing to it as well right. Like a broken heart, you can't see that. There's nothing you can do to get rid of that. You can't take something and make it go away. With a piercing you're physically having to care for that wound...and heal up. So it's almost a therapeutic thing in a sense where you're healing your internal wounds or your emotional wounds with a physical characteristic.

Rosarita's description is similar: "It's interesting like...it's like having a new pet or something to take care of. [...] And I do enjoy the healing a bit.... I think it makes me feel good to be able to do something like that [i.e. taking care of the new tattoo] correctly. It satisfies I think, especially women have, you know, the nurturing gene."

Finally, almost every participant indicated that getting a tattoo or piercing provided them with a sense of closure in their relational traumas. Rosarita says of her two shoulder tattoos: “The whole time you’re getting that tattoo you’re thinking about, ‘I’m getting it because I finished school’”. L’Quisha elaborates: “I felt like, like I had been liberated. Like I felt like those feelings that I had locked away for...four years had, you know, been released and I...I was crying because I was letting that pain go. I was kind of just being like, yeah you know what, I’m over this whole painfulness” [of her grandfather’s death]. For Alexis, a new tattoo she has been working on will hopefully allow her to gain a sense of closure over her tumultuous relationship with her father: [It was] a weird love/hate thing that we had. [...] [The new tattoo] will give me peace in a relationship that I couldn’t have peace in. And now that he’s passed away that I will never ever be able to make peace in so I have to make it within myself. Thus for Alexis, her plan is to use a tattoo to help *create* closure within herself, since it is impossible for her to have closure otherwise. The healing power of tattooing and piercing, in terms of both the process of getting them done and the final product, clearly play significant and meaningful roles in the healing process.

Theme 6: The Significance of Pain

The previous theme discussed, in part, some of the physical aspects of getting a tattoo or piercing in relation to the healing process of trauma. A minor theme emerging from the data speaks specifically to the experience of releasing one’s inner, emotional pain by transforming it into physical pain. Four of the seven women spoke directly on this theme, and because of how significant this theme is in relation to the trauma literature, I have decided to include it here.

For Diamond, the physical pain of getting a tattoo helped bring her back to the reality of life and start living again following one of her traumatic events: “[The pain is] kind of a shock to your system back into...whoa, real world, real life. You know but without...cause it’s not an emotional shock again it’s a physical.... You kind of start to live again almost. For me, it was kind of like the first major thing that got me back on the roll to, you know, normal life.”

Alexis, when speaking of the pain of getting a tattoo to deal with a relationship breakup, explains that the pain is “almost a therapeutic thing in a sense where you’re healing your internal wounds or your emotional wounds with a physical characteristic.”

For Margaret, the physical pain of getting her tattoo after her son’s death was significant in releasing her emotional pain:

There is something that was like a relief about having the physical pain, you know, because we were in so much emotional pain [cries], that uh...that just feeling that knife in the skin just felt like I was alive, you know, I wasn’t numb.... I’m mean, you’re just walking around in such a fog after it happens, you know like nothing seems real... And the pain *was* real, so uh...it felt good, actually [emphasis added].

Margaret compares the emotional release gained by the tattoo to other physical acts she encountered in her healing process:

I’ve had lots of sessions where I was just like...you know, wailing and...tearing my...you know just...unbearable stuff, and it feels like, uh...like you’d rather be dead, but...but after a session like that is when I’d feel alive again, and so if I didn’t have opportunities to do those crying

sessions or...ranting or...pounding pillows or whatever...um...then I would just walk around, just feeling like I wasn't feeling anything, like, like nothing mattered...[like] what's the point of anything, like life, there is no point to life....

The process of getting the tattoo, then, gave Margaret yet another opportunity to do something physical to transform her emotional pain into something tangible and, in a very real way, get the pain out of her system.

Although Margaret stated that she had never really thought about this particular aspect of her tattoo before she got it, for L'Quisha, not only was the physical pain of getting a tattoo significant, it was actually something she purposely sought out:

I went to the tattoo artist and I said, "Look, I want in on a spot that's really painful and really unique" and he said, "Why don't you do the tops of your feet?" and I was like, "Done". Uh, I mean you've seen the pictures. They're pretty massive. They're not little tattoos. They take up like 90% of my foot.

Although the pain was intense, L'Quisha somehow held herself together throughout the entire process, and the experience brought about a release of all the emotional pain she had been holding inside for years:

Um, it was excruciatingly painful [laughs]. I sat there, and I didn't say a word. I just took it and after that he was finally done the coloring and I felt, probably the best I had felt in regards to losing my grandpa, in years. *It was a complete and emotional release.* Like I went home and cried for like 3 hours. And I just felt like oh my gosh ok I'm over it...and he's on my body and he's going to walk me down the aisle when I get married. [...] I felt like, like I had been

liberated. Like I felt like those feelings that I had locked away for you know four years had, you know, been released [emphasis added].

Thus, the experience of transforming emotional pain into physical pain as a form of release was a meaningful experience for these women, and played a key role in their ability to heal from their relational traumas.

In summary, six major themes emerged from the interviews of the seven women in this study. These themes are: 1) Remembrance, 2) Connection, 3) Identity, 4) Permanence, 5) Healing, Coping, and Closure, and 6) The Significance of Pain. In the next section, these themes will be discussed in relation to the research literature and to the research questions this study was intended to answer.

Chapter V: Discussion

Restatement of the Purpose of the Study

The aim of this study was to understand the experience and meaning of tattooing and piercing in women who had experienced relational traumas in their lives. This study used a phenomenological approach in an attempt to answer the following questions: What meaning do individuals who have experienced relational traumas place on their body modifications? What purpose (if any) do they serve? In what ways do the design, location, and number of tattoos/piercings relate to the meaning placed on them? In-depth interviews were conducted, and the data analyzed for emergent themes. Six themes arose from this research: 1) Remembrance, 2) Connection, 3) Identity, 4) Permanence, 5) Healing, Coping, and Closure, and 6) The Significance of Pain. In answering the research questions, one of my main goals was to allow women's experiences to be heard through their own voices, by using their own words. In that regard, I have tried to remain as loyal as possible to their stories and experiences.

Comparison With the Literature and Research Questions

This study found that tattoos and piercings held a great deal of meaning and purpose to women who had experienced relational traumas. Recalling Riley and Cahill's (2005, p. 266) finding that women in their study used their tattoos and piercings to "demonstrate and experience acts of bravery, independence, and action; resisting more traditional notions of femininity in terms of fragility, dependence, and passivity", I submit that the women in my study did the same. The stories they shared and the meanings they derived from their tattoos and piercings spoke to their strength and resilience in overcoming relational traumas, and to their bravery in going against Western society's traditional norms of femininity to mark their

bodies in ways that were personally relevant and meaningful to them. The women in my study made it clear that they were aware that society still views women with body modifications, especially tattoos, in a less-than-positive light, and that they made the conscious decision to get them anyway because that was simply what they felt they needed to do to deal with their relational traumas. Most indicated strongly that they “did it for me and nobody else”.

The women in this study made it very clear that their tattoos and piercings served particularly important purposes in their lives. They served as reminders to themselves and others of loved ones who had passed away, of relationships with friends and significant others, and of key moments and events that defined their lives. They also served as forms of connection with family and friends, significant others, and deceased relatives. These findings fit well with the feminist relational theories discussed in the Introduction, that state that remaining in relationship and connection with others gives females a sense of meaning and purpose, and engenders feelings of self-worth and self-esteem. It also fits well with the feminist literature on psychosocial disconnection, which suggests that when relationships with key people in one’s life are absent, damaged, or destroyed, problems such as lowered self-esteem and depression (Miller & Stiver, 1997) and suicidality (Gilligan & Machoian, 2002) may result. It is clear that for the women in this study, getting a tattoo or piercing after facing a traumatic event helped them cope with and heal from the difficulties of the trauma; alleviate feelings of anxiety, sadness, and depression; and learn to live once again.

The data from the participants in this study did not support the contention, discussed in the Literature Review, that the experience of tattooing and piercing may be related in important ways to women engaging in self-injurious behaviours such as cutting. All the

women in my study framed their tattoos and piercings in terms of strength, resiliency, and having a sense of freedom and control in their lives. There was nothing to indicate, from any of the interviews, that tattooing and piercing were, for these women, indicators of self-harm, unresolved trauma, or future risk. Of the seven participants in this study, only three had ever engaged in cutting behaviours, and for them, the cutting occurred in their early teenage years. In the end, only one participant recognized a strong connection between her experience of cutting and later body modifications, and even then the connection was challenged:

There [are] similarities is the sense that you know like relief and adrenaline, euphoria and pain. There is that whole intertwined circle of emotion and physical feeling going with it. But at the same time, it's a different situation because the cutting more so relates to a negative self-image, whereas the tattoo or piercing is more of a positive thing because it's like I said, one it's socially acceptable, but two you're not doing it for the same reasons. You're not doing it because you're feeling bad; you're doing it because you want to feel good. So, it's almost like an opposite really.

The fact that these women did not, as a whole, endorse the possibility that tattooing and piercing are related to cutting does not, of course, mean that this connection does not exist. It simply means that for this particular group of women, the experience of tattooing and piercing were, by and large, unrelated to self-injurious behaviours. Given the small sample size, it is entirely possible that another group of seven women would have endorsed this contention wholeheartedly. This study's finding that many women tattooed or pierced as a way of transforming their emotional pain into physical pain as a form of release is particularly relevant, given that similar findings have been reported in the literature on

cutting and other self-injurious behaviours (e.g. Machoian, 2001; Shaw, 2002). This topic clearly bears further exploration, as discussed shortly.

As stated in the Introduction, there is a surprising and unfortunate lack of research that explores the deeper meaning that tattooing and piercing holds for people, and in relation to trauma in particular. One of the goals of this study was to begin to fill some of the gap in the literature by exploring this phenomenon in depth. In light of the findings of this study, I believe a good first step has been made in addressing this void. In addition, much of the existing literature associates tattooing and piercing with negative things such as criminality, mental illness, and the underbelly of society (Atkinson, 2003). This study, in contrast to many of the ones reviewed, casts tattooing and piercing, and the women who engage in the process, in a very different light. The women who participated in this study were educated, eloquent, and spoke of how much happiness, strength, and resilience were brought into their lives through their use of tattoos and piercings. In that regard, I am glad that this study was able to shed a positive light on tattoos and piercings, and break down some of the stereotypes that society holds about them, and the people who get them.

Limitations of the Study

As with any study, there are some limitations to this study that are worth noting. The first one deals with the methodology itself. The phenomenological method was chosen for this study in order to explore the lived experience of women who had experienced relational traumas and had tattoos and/or piercings. According to Giorgi (1986, cited in Osborne, 1990, p. 80), the goal of phenomenological research is “the understanding of persons’ experiences of their world(s) and not the generation of explanatory laws”. Therefore, the results of this study cannot be generalized to other groups of women who have experienced relational

traumas and have tattoos and piercings, nor can any causal or correlational claims be made about the phenomenon in question (Jaquinta, 2007). Other women who have experienced relational traumas and gotten body modifications may or may not recognize these findings as applying to them as well.

A second limitation concerns the changes in meaning that take place over time. The women in this study were attempting to explain the meaning and purpose behind their tattoos and piercings. For most of the women, it had been months, and more often, years since they had gotten a particular tattoo or piercing. The meaning and purpose behind their decision to get a particular body modification at the time they got it, and the meaning and purpose that the same body modification held at the time of their interview with me years later, could potentially be very different. It is natural over the course of time to forget all of the feelings, thoughts, and motivations behind one's decision to engage in certain behaviours. Additionally, the knowledge that they would be participating in this study could have led to the creation of meaning that heretofore had not existed. Many of my participants commented that they had done a lot of thinking on this topic, knowing that their interview date was approaching. It is possible that these thoughts may have inadvertently led to their making meanings and connections that had not existed before. Moreover, some of the questions being asked of the participants were of things they had never considered previously. In every single interview, there was at least one instance where each participant experienced a personal revelation about their tattoo or piercing that they had not made prior to being asked a particular question. As one participant stated:

It's pretty interesting...some of the things I've connected. You know like when you're actually describing these to somebody else about your thought

process behind it and looking back and connecting other things that you would never connect at that moment in time when you got the piercing or tattoo and stuff like that. It's pretty interesting.

In answering certain questions, therefore, did participants' responses truly reflect the actual meanings, or were they generated at the particular moment they were being asked the question? As Iaquina (2007, p. 212) points out, however, "phenomenology is interested in the meaning or sense that persons make of their experiences rather than factual information". Therefore, the meaning or purpose that participants place on their body modifications at the time of the interview, rather than the meaning or purpose at the time they got them, may be all that matters.

A third limitation revolves around the difference in definition between the experience of an event that is highly stressful versus one that is traumatic. At what point does a highly stressful event become traumatic? The boundary between the two is highly subjective. What may constitute a traumatic event for one person may be considered highly stressful, but not traumatic, to another. The existing research literature does not make a very clear distinction between these experiences either; indeed, I could find very little research that spoke on this topic. This presents a concern when evaluating a participant's claim that their experience was traumatic. Is that a true assessment of their experience, or was the event "merely" highly stressful? I have no answer to this question, but simply raise it as a matter for consideration.

A fourth limitation of this study concerns my relative inexperience as a researcher, conducting a phenomenological study. Prior to this study, I had never conducted qualitative research. Although I had a great deal of guidance and support from my supervisors, as well as peers who had used this methodology themselves, and although I had read through several

books and articles on the methodology prior to commencing the study, I believe it is impossible to fully comprehend a method until you have actually conducted research using it, much like not fully understanding the experience of driving a car until you actually get behind the wheel and start driving. Experience is a great teacher, and I have learned a great deal about conducting a study using the phenomenological method as a result of this experience. However, my lack of prior experience using this method may have influenced the way I conducted the interviews and/or analyzed the data. Given the opportunity to conduct phenomenological research in the future, I am certain there are things I would do differently. It is exciting to recognize that my understanding of this method has changed as a result of conducting this study, and that I have grown and developed as a researcher as a result.

A fifth limitation of the study revolves around the characteristics of my sample and the sample size. Osborne (1990) writes that the researcher in a phenomenological study “needs as many participants as it takes to illuminate the phenomenon” (p. 82). When no new information is added, and no new themes emerge, by including more participants, *saturation* is said to be reached. Regrettably, it was not possible to know whether saturation was reached since data collection had to be stopped due to time limitations. Seventeen women other than my participants had indicated an interest in participating but for various reasons (mostly due to scheduling conflicts) could not. All those who had indicated an interest did meet the inclusion criteria for the study, and would have been interviewed had it not been for those extenuating factors. I cannot help but wonder whether having a larger sample size would have illuminated this phenomenon even more. Particularly in light of the fact that Canada is a multicultural country represented by diverse races, ethnicities, and cultures, it is

unfortunate that this diversity was not represented in my sample, which, with one exception, consisted entirely of Caucasian women. That being said, seven participants was certainly a large enough number to shed an amazing amount of light on this particular topic. I was pleased that there was some diversity in terms of the age range of my participants, with the youngest being 23, and the eldest being 52. There was also some diversity in terms of the education levels of my participants, with some having little to no post-secondary education at all, to others either in progress or having completed diplomas and degrees, to another who was conducting a master's degree herself.

A sixth limitation revolves around some practical matters in conducting this study, particularly with regard to time and resources. For various personal reasons, the thesis needed to be completed at an accelerated pace. As already mentioned, the luxury of time to recruit and interview participants was limited, and partly as a result, many women who wished to take part in this study could not, given that they would not be available until much too late. I lament the fact that the experiences of these women could not be included in this study, and wonder about the added richness their data could have brought to further illuminating this phenomenon. Secondly, there may have been differences in my interviewing style in person versus on the phone, and/or differences in the responses participants were willing to give depending on the method of interviewing. Two of the seven women were interviewed in person, and five were interviewed over the phone. It should be noted, however, that I did not perceive any noticeable differences in the responses participants gave, no matter what method they were interviewed by. I found all participants to be highly open to discussing their experiences with me without hesitation. Thirdly, I would have enjoyed having the opportunity to conduct a follow-up interview with each

participant, to gain greater clarification on their particular meanings and provide further opportunities for the participants to review their data and make any changes that they wished. This would have made my validation process even stronger. Regrettably, I did not have the time to make this happen. Finally, although I attempted to bracket my assumptions about the phenomenon as I interviewed participants and analyzed their data, I am certain that I was not 100% perfect at achieving this goal. My understanding and interpretation of the data is, being human, undoubtedly subjective and imperfect. I am also certain, however, that given my inexperience in using the phenomenological method, I nevertheless did the best I could.

Implications for Practice

The results of this study suggest at least two very important implications for practice. While some forms of body modification (in the broader sense that includes cutting, scarring, burning, etc.) may be signs and signals of emotional or psychological pain and suffering (e.g. many people who are depressed will cut themselves on their arms and wrists), tattoos and piercings, as indicated previously, are less immediately recognized as indicators of potential psychological problems such as unresolved relational traumas. The popularity of tattoos and piercings today makes this issue even more salient. Counsellors, psychologists, psychiatrists, doctors, and other health care and social service providers may view the tattoos and piercings of others as merely “fashion statements”, and not consider that there may be a deeper meaning and purpose behind their body modifications, and their potential connection to relational stressors or traumas. The results of this study will hopefully encourage practitioners of all types to consider exploring the meaning and purpose behind their clients’ tattoos and piercings, and use these body modifications as vehicles for exploring their clients’ various concerns, as well as their coping strategies. Men and women who have

tattoos and piercings may be communicating important messages to the world through their bodies (Connors, 2002; Machoian, 2001), and a greater knowledge of that communication will hopefully serve practitioners in assisting their clients with their healing process.

A second potential implication for practitioners was suggested by one of the participants herself, Margaret, who wrote to tell me about the potential healing power of having a ceremony or ritual for a grieving person getting a tattoo, and being surrounded by their loved ones as they did so, particularly if the tattoo artist was one who specialized in tattoos for the bereaved. I think this is a brilliant idea. Although she was directing her idea toward people who are newly bereaved, I could see this sort of ritual being useful for people experiencing relational traumas of all kinds. Practitioners may wish to suggest this sort of ritual to their clients, or may wish to themselves specialize in an area dedicated to organizing such ceremonies for those who have had relational traumas.

Implications for Future Research

This study's findings provide a number of possible areas for future research. For various reasons discussed earlier, I chose to focus this study on female participants. It would be equally interesting to conduct a future study with men as participants, to see whether similar themes emerge for men around their experiences of tattooing and piercing after having experienced relational traumas. There are a great deal of societal norms and expectations in the tattooing and piercing process that differ for men and women. Certain locations that are socially acceptable for women to tattoo and pierce, for example, are often taboo for men. The so-called "tramp stamp" (a tattoo across the centre of the lower back) is considered a feminine tattoo and is rarely seen in men. The main exception is when the man's entire back is covered. Although this tattoo location was at one point extremely

popular with women, the stereotypes and derogatory connotations that are now associated with it (mainly that the women who have these are sexually promiscuous) have made many males and females alike disparage women who get this particular tattoo. In addition, certain tattoo designs are deemed more masculine or more feminine than others. Roses and butterflies, for example, are extremely popular with women and are less-often seen on men. Conversely, fire-breathing dragons, skulls, and other more “rugged” designs are more often seen on men. It would be extremely interesting to see what sorts of tattoos and piercings men who have experienced relational trauma choose to get, and the meaning they place on them and on the experience of getting them.

The possibility that tattooing and piercing may be socially acceptable forms of self-injurious behaviours also bears further study. Even though this idea did not resonate with the majority of the women in the study, it does not mean the relationship does not exist between these. Additional research should be done that focuses more specifically on self-injurious behaviours in men and women who also have tattoos and piercings. If my theory is correct that there are some important connections to be made between these, then the fact this is not currently recognized by society holds important implications for practice, as discussed earlier. We who are in the helping professions owe it to the people who self-injure to know more about their experiences so we can help them deal with their struggles and challenges in healthier ways.

One further interesting question arises. Many of the women in this study reported getting a tattoo or piercing after ending a relationship that was traumatic in nature. Although a piercing can be removed at any time, a tattoo cannot. One has to wonder what the experience is of having a permanent marker on your body that reminds you of someone in

your life who brought you misery and pain. For those participants for whom this applied, all reported that their tattoos and piercings were healing for them and helped them move on with their lives. And when asked what they felt, years later, when looking at a tattoo or piercing that reminded them of a person who caused them suffering, they all responded that it did not bother them at all. Still, one cannot help but wonder whether getting a permanent reminder of someone who caused you suffering is truly healing, or if it is a sign of unresolved trauma.

One woman that I know of personally got a tattoo of a butterfly after her unhappy relationship with an emotionally abusive man ended. She explained that at the time, she got the tattoo to symbolize, in part, her freedom from this man and her metamorphosis from being cocooned in this relationship to being beautiful and free. Years later, she now sees the tattoo very differently. The tattoo, now, is a daily reminder to her of someone she would rather forget, and seeing it makes her feel, in her own words, “sick to my stomach”. This woman further explained that she got the tattoo as a way of regaining a sense of control in her life after being unhappy for so long. As she stated though, she came to realize that “in the end, he wins”. He wins, in part, because she sacrificed a part of her body for him, while he did not do the same for her. He wins, also, because while he does not necessarily have a regular reminder of her, she has a daily reminder of him. In the end, this woman reasons, her sense of freedom and control in getting this tattoo was merely an illusion, and by her decision to tattoo, this man retains control over her and she remains chained to him whether she wants to or not. This is a boldly honest, painful, and very different experience than those reported by my participants who had been in similar situations. I do not make any claim that one experience or interpretation is more correct than the other. But it does cause me to wonder more about this particular aspect of tattooing and piercing. It also leads me to

speculate on the research literature that exists on attachment behaviours in adults. Adult attachment is gaining a greater amount of attention in the research literature, especially in regard to the experience of traumatic events. Future studies exploring healthy and unhealthy attachments in relation to trauma and body modifications could produce some fascinating insights.

Closure

One of the most meaningful experiences of conducting this study for me personally was the ability to make room for my participants' experiences to be heard by using their own words. I felt it would be fitting and appropriate to close this thesis by letting their voices speak one last time. As I reached the end of each interview, I asked my participants the following question: "If you could use a few words to describe the meaning your tattoos and piercings have for you, what would those words be?" These are their answers:

Mitzi: *Strength, Resiliency, and Opposition*

Margaret: *Love and Permanence*

Rosarita: *Secure, Predictable, and Reliable*

Charlie: *Personal, Spiritual, and Symbolic*

Diamond: *Stability, Hope, and Sense of Self*

L'Quisha: *Reflection, Calmness, and Gratefulness*

Alexis: *New Beginning and Closing Doors*

These simple words, in and of themselves, clearly reveal the deep level of complexity and meaning that tattoos and piercings hold for women who have experienced relational traumas in their lives.

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Appendices

Appendix A: Certificate of Approval

<https://rise.ubc.ca/rise/Doc/0/MGLIJQULV674DDACKLG61E2RCA/...>



The University of British Columbia
Office of Research Services
Behavioural Research Ethics Board
Suite 102, 6190 Agronomy Road, Vancouver, B.C. V6T 1Z3

CERTIFICATE OF APPROVAL - FULL BOARD

PRINCIPAL INVESTIGATOR: Marvin J. Westwood	INSTITUTION / DEPARTMENT: UBC/Education	UBC BREB NUMBER: H09-01116
INSTITUTION(S) WHERE RESEARCH WILL BE CARRIED OUT:		
Institution UBC		Site Vancouver (excludes UBC Hospital)
<p>Other locations where the research will be conducted: Although it is intended that all research will be carried out on the UBC campus, research *may* be conducted in either the subject's home or in my (Paulo Matos's) private practice office in Surrey. This may be due to comfort or convenience factors for the participants (e.g. they may feel more comfortable being interviewed in their homes), or due to proximity to the private practice office (e.g. if both myself and the participant live/work in Surrey, it may be easier to arrange an interview there rather than having both parties travel out to UBC). As mentioned however, all attempts will be made to conduct the research on the UBC campus rather than one of these alternate locations.</p>		
CO-INVESTIGATOR(S):		
Paulo D. Matos Richard A. Young Jennifer Shapka		
SPONSORING AGENCIES: N/A		
PROJECT TITLE: The Experience of Tattooing and Piercing in Women Who Have Experienced Significant Relationship Stressors		
REB MEETING DATE: June 25, 2009	CERTIFICATE EXPIRY DATE: June 25, 2010	
DOCUMENTS INCLUDED IN THIS APPROVAL:		DATE APPROVED: July 15, 2009
Document Name	Version	Date
Protocol:		
Research Proposal	N/A	June 12, 2009
Consent Forms:		
Consent Form for Pictures	N/A	July 10, 2009
Consent Form	N/A	July 6, 2009
Advertisements:		
Recruitment Advertisement	N/A	July 10, 2009
Questionnaire, Questionnaire Cover Letter, Tests:		
Interview Questions	N/A	June 12, 2009
Other Documents:		
Debriefing Form	N/A	June 12, 2009
<p>The application for ethical review and the document(s) listed above have been reviewed and the procedures were found to be acceptable on ethical grounds for research involving human subjects.</p>		
<p>Approval is issued on behalf of the Behavioural Research Ethics Board and signed electronically by one of the following:</p>		

<https://rise.ubc.ca/rise/Doc/0/MGLJJQULV674DDACKLG61E2RCA/...>

Dr. M. Judith Lynam, Chair
Dr. Ken Craig, Chair
Dr. Jim Rupert, Associate Chair
Dr. Laurie Ford, Associate Chair
Dr. Anita Ho, Associate Chair

Appendix C: Consent Form

**Consent Form:
The Experience of Tattooing and Piercing in Women Who Have
Experienced Significant Relationship Stressors**

Principal Investigator/Faculty Advisor:

Dr. Marvin Westwood, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-822-6457)

Co-Investigator:

Mr. Paulo D. Matos, Ed.M., Graduate Student, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-789-5041)

Co-Investigator:

Dr. Richard Young, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-822-6380)

Co-Investigator:

Dr. Jennifer Shapka, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-822-5253)

Purpose: Thank you for participating in this study, which is being conducted as part of the M.A. thesis of Paulo Matos, a Graduate Student in the Department of Educational and Counselling Psychology, and Special Education at UBC. **The purpose of this study is** to learn more about the experiences of tattooing and piercing in women who have reported experiencing significantly stressful relational experiences in their lives. **You have been invited, in part, because you:** a) are an adult female, aged 19 or older; b) have identified yourself as having at least one tattoo and/or piercing (in an area other than the ear or nose), and c) have identified yourself as having experienced at least one significantly stressful event involving a relationship (e.g. divorce; domestic violence; sexual abuse/rape, etc.).

Study Procedures: You will be interviewed one time, for approximately one hour. Interviews will be audio-taped (either through audio cassette or digitally via computer). You will be asked about your experiences of tattooing and/or

piercing, as well as about significant events in your life that may have influenced or contributed to your decision to get tattoos and/or piercings.

Potential Risks: There are a few potential risks that participants may experience during the study. Due to the personal meaning that many people attach to their tattoos and piercings, you may find it challenging or uncomfortable to speak openly about these. Similarly, it may be difficult or uncomfortable to revisit stressful or traumatic past events / relationships in your life, which may be asked about during the interview. You may also be concerned about identifying personal information such as your age, race, gender, and sexual orientation.

Steps taken to minimize these risks include:

- 1) You will be asked about your comfort level as the interview progresses, to give you the opportunity to express any discomfort or upset you are feeling as a result of the questions. You may, at any time, tell the interviewer you are uncomfortable with the direction the interview is taking, and pause or end the interview.
- 2) Prior to the start of the interview, you will be given a list of resources and referral information related to counselling services, should anything come up for you at any point before, during, or after the interview that leads you to seek counselling.
- 3) Demographic information (e.g. age, race, sexual orientation) will not be used to stereotype you or to form conclusions on the topic at hand. Rather, this information will be used simply to get a general sense of the background of all the participants in the study. This information may help the researchers to make sense of the overall data, and potentially lead to future research studies.

Potential Benefits: There are several benefits to participating in this study. Participating in this study will provide you with an opportunity to discuss at length and in detail, the meanings and purposes you attribute to your tattoos and/or piercings, and to share what the experience of tattooing and piercing means to you. In addition, there does not appear to be a lot of research literature looking at the meaning women place on their tattoos and piercings. Therefore, by participating in this study, you will be directly contributing to the scientific knowledge on this important subject.

If you would like to receive a copy of the final report, please provide your contact information below so that it can be sent to you:

Name: _____ Phone #: _____

Mailing Address:

Email Address:

Confidentiality: Your identity will be kept strictly confidential and will not be revealed in any way. Any notes, documents, or recordings will be identified only by a code name or number, and kept in a locked filing cabinet. All computer documents will be password protected to avoid unauthorized access. Participants will not be identified by name in any reports of the completed study. Pseudonyms (i.e. fictitious names) will be used in place of real names in any written reports of the study.

Please note that, in terms of limits to confidentiality, any reports or allegations of abuse (e.g. physical, sexual) must be reported to the proper authorities. If this must happen, it will be done in a way that is as safe and ethical to you as possible.

Remuneration/Compensation: As thanks for your participation, you will be entered in a draw to win a \$50 prize. The draw will take place once all interviews with participants have been completed. Please note that if you choose to withdraw your participation from this study at any time, you will still qualify for the prize.

Contact for Information About the Study: If you have any questions or desire further information with respect to this study, you may contact Paulo Matos at 604-789-5041, or Dr. Marvin Westwood (Primary Investigator and Faculty Advisor) at 604-822-6457.

Contact for Concerns About the Rights of Research Subjects: If you have any concerns about your treatment or rights as a research subject, you may contact the Research Subject Information Line in the UBC Office of Research Services at 604-822-8598 or if long distance e-mail to RSIL@ors.ubc.ca.

Consent: Your participation in this study is entirely voluntary and you may refuse to participate or withdraw from the study at any time without any jeopardy whatsoever. You may choose to withdraw your data until the data has begun to be analyzed by the researchers. Otherwise all data will be kept in a secure location on the UBC campus for a period of up to 5 years, after which the data will be destroyed.

Your signature below indicates that you have received a copy of this consent form for your own records.

Your signature indicates that you consent to participate in this study.

Participant's Signature

Date

Printed Name of the Participant

The signature of a Witness is not required for behavioural research.

Appendix D: Consent Form for Use of Pictures

Consent Form for Use of Pictures
The Experience of Tattooing and Piercing in Women Who Have Experienced Significant Relationship Stressors

Principal Investigator/Faculty Advisor:

Dr. Marvin Westwood, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-822-6457)

Co-Investigator:

Mr. Paulo D. Matos, Ed.M., Graduate Student, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-789-5041)

Co-Investigator:

Dr. Richard Young, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-822-6380)

Co-Investigator:

Dr. Jennifer Shapka, Dept. of Educational and Counselling Psychology, and Special Education, University of British Columbia (604-822-5253)

Purpose of Pictures: As this study is exploring the purpose and meaning behind your tattoos and/or piercings, it may be useful to be able to actually see these instead of speaking about them abstractly. As part of this study, you have been asked if you are willing to take and submit pictures of any or all of your tattoos and/or piercings. These pictures may be referred to as the interview progresses.

Confidentiality: Your identity will be kept strictly confidential and will not be revealed in any way. Similarly, pictures will not have any markings on them to identify who you are. Pictures might be identified by a code name (e.g. pseudonym) or number, and kept in a locked filing cabinet or a password protected location on a computer.

Consent to Use of Pictures: Your decision to take and/or provide pictures of your tattoos and/or piercings is entirely voluntary. Should you decide not to provide pictures of your tattoos and/or piercings, this will not affect your

participation in the study in any way. You may choose to withdraw your permission to use the pictures at any time until the data has begun to be analyzed by the researchers. Once the results of the study have been published, you may no longer withdraw the pictures.

Future Use of Pictures: Your signature on this form grants the researchers the right to retain the pictures you provide of your tattoos/piercings for future use. Future uses may include: in presentations or conferences, publications (e.g. journal articles), in posters, flyers and websites for future studies.

Please be advised that if your pictures are used in any of the manners described above, there is a possibility that those who know you may be able to identify you through your tattoos/piercings, if seeing those pictures.

Exceptions to Use of Pictures: If there are any particular uses of pictures for which you would not like your pictures to be used, please indicate these below:

Your signature below indicates that you have received a copy of this consent form for your own records.

Your signature indicates that you consent to participate in this study.

Participant's Signature

Date

Printed Name of the Participant

The signature of a Witness is not required for behavioural research.

Appendix E: Interview Questions

These questions will help guide the interview. They are meant to promote discussion of women's experiences of tattooing and/or piercing, and many follow-up questions will arise from their responses. Note that the questions may not be asked in this specific order every time, especially if the participant has answered them in earlier sections.

Orienting Question: Tell me the story of your tattoos/piercings.

- 1) In what order did you get each of your tattoos/piercings? Which came first?
- 2) What meaning do each of them have for you?
- 3) Do they serve any particular purposes in your life? (e.g. serve as reminders of strength or stressful times; look at them in times of need, etc.).
- 4) How do your tattoos/piercings play out in your every day life?
- 5) In what ways are the design, location, and number of tattoos/piercings you have significant?
- 6) What significant events (if any) were going on in your life at the time you chose to get a tattoo/piercing [and/or influenced your decision to get a tattoo/piercing]?
- 7) Were there any stressful or hard times in your life that influenced your decision to get a tattoo or piercing?
- 8) Would you consider any of these events to be "traumatic"?
- 9) Tell me a bit about your childhood/teenage years. (e.g. Stressful? Happy? Traumatic? Carefree?)
- 10) Tell me a bit about your decision process in getting a tattoos/piercings (i.e. what made you decide to get one?)
- 11) Distance in time between experiencing a stressful/traumatic event and getting a tattoo/piercing? (e.g. 6 months, 2 weeks, 1 year, etc.)
- 12) What influences the choice/location of your tattoo/piercing?
- 13) Tell me about the experience of getting a tattoo/piercing. What does it feel like for you (emotionally, physically, etc.)?
- 14) Society and body image questions.
- 15) What reaction do you notice others having to your tattoos/piercings?
- 16) Are you glad you got your tattoos/piercings? In hindsight, are there any you wish you hadn't gotten?
- 17) Have you ever considered removing your tattoos/piercings (either now or in the future)?
- 18) Have you ever engaged in self-harming behaviours such as cutting or burning your skin?
- 19) Have you ever sought counseling in the past for any of the stressful/traumatic circumstances you have mentioned?
- 20) Do you plan on getting more tattoos/piercings?

- 21) Some people say that getting tattoos/piercings are addicting? Do you agree/disagree?
- 22) When/what times/conditions encourage you to tattoo/pierce? (e.g. Happy times? Sad times? Angry times? Stressful times? Other?)
- 23) If you could use a few words to describe the meaning your T/P have for you, what would those words be?
- 24) Is there anything else you would like me to know that I haven't asked?