

Tattooing;

Stereotyping and Social Acceptance

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Abstract

The object of this study was to ascertain whether tattooing is more socially acceptable in this decade than ever before. It also aimed to discover whether the typical stereotype of the heavily tattooed individual holds any merit in today's culture. Therefore tattoo numbers were correlated against levels of social conformity, self-esteem and risk-taking behaviour. Qualitative questions were also asked to ascertain feelings towards heavily tattooed individuals. It was discovered that over 60% of 78 participants believed that any level of tattooing is now socially acceptable and only 1 participant believed that tattooing was not acceptable. Tattooed individuals were less likely to be recreational risk-takers but there was no difference between tattooed and non-tattooed individuals in any other domain tested.

Introduction

A mummy known as “the Iceman” was found in the Ötztal Alps in 1991. The remains were so well preserved that tattoos were still recognisable on the skin. This mummy, dated to be from around 3,300 BC, confirmed that the practice of tattooing has existed for over five thousand years. Evidence of tattooing as a form of punishment is seen in ancient Greek and Roman texts, and it has been deemed as barbaric in the bible and the Koran (Sanders, 1989). In 1990 Steward emphasized tattooing as a hallmark of social maladjustment, mental illness, criminality and unconventionality in people. While in Borneo, women tattoo symbols on their forearm to indicate their aptness at a particular skill, thus increasing her status and likelihood of marriage, and in Polynesian Culture, tattoos marked tribal communities, family, and rank. They are normality in such circumstances.

In recent times tattooing has become much more visible than ever before. A study carried out by the American Academy of Dermatology (2006) found that 24% of Americans between 18 and 50 are tattooed. They also found that about 36% of Americans age 18 to 29 have at least one tattoo. There were an estimated 20,000+ parlours operating in the United States at the time of the study. Statistics from Ireland, England, Japan and Tahiti also show a similar boost in tattoo popularity in the last decade

So who is correct? Are tattoos the domain of the depraved, unsocial individual or are they a form of art and a positive mark of social identity? Has the increase in tattoo numbers and availability led to an environment of acceptance towards this practice?

In order to answer these questions, this study will look for correlations between tattoo numbers and social conformity, self-esteem and risk taking behaviours. It will look for differences between tattooed and non-tattooed individuals in these same categories. Then, finally, it will assess attitudes towards tattooing and the tattooed individual in 2014.

In order to understand the nature of these variables this study must first define what is meant by "Tattooing", "Risk taking behaviour", "Self-esteem" and "Social conformity", and briefly look into leading theories in these areas. Then finally we will explore modern studies that link these theories to tattooing and tattooing attitudes.

Literature Review

In the case of this study we will take "tattooing" to mean; "an indelible mark or figure fixed upon the body by insertion of pigment under the skin". Webster's collegiate dictionary (2012). Body piercing, scarification or any other body modification is not included within this study.

The word "tattoo" is derived from the Tahitian word tatau which comes from "Ta" defined as "striking action" and "Tau" which broadly means to "anchor something". (pasefika.com. Culture article, 2014). The process of tattooing involves the insertion of pigment into the skin's dermis, which is the layer of skin underlying the epidermis. Once the initial injections are complete, pigment is dispersed throughout the damaged layer down through the epidermis and dermis. This foreign substance introduced into the skin activates an immune response, which in turn promotes healing. As healing continues the damaged epidermis layer begins to flake away

and finally heals over while pigment remains trapped within fibroblasts, in a layer just below the dermis/epidermis boundary (Kilmer 2013). Tattoos were traditionally either created by cutting designs into the skin and rubbing ink or ashes into the wound or else by tapping the top of a sharpened stick with another stick to create perforations in which ink would be placed. (Lombroso, Cesare, 1896). This latter method is still used today as a traditional method among many tribes, using needles in place of the sharpened stick. However the most common method of tattooing in modern times is an electric tattoo machine. This machine inserts ink into the skin by piercing it with an oscillating needle from 80 to 150 times a second.

Self-esteem is “the understanding a person creates of his or her worth, based on emotions and beliefs about how he or she fits into or performs in any given situation in life” Psychology glossary (2013) Alley dog.

Self-esteem can be said to be the level of regard the person has for themselves. Extremely high self-esteem may lead to the person being overconfident in their expectations of Self-efficacy. Extremely low self-esteem may lead to feelings of worthlessness, resulting in depression and anxiety. A moderately high level of self-esteem has been associated with good mental health (Coopersmith, 1968).

William James (1890) saw self-esteem as an evaluative process of how often one attains their “pretensions” or goals. As individuals attain more of these goals their self-esteem will increase. If a person’s self-concept includes being proficient in a particular area, their self-esteem is more easily effected by not meeting their goals in this area than it would be for another individual who expects to be competent in another area of expertise. Therefore failing in an area that is not important to the

individual would not result in a devaluation of personal worth. While we can see the merits of this approach, there are some issues also: Crocker and Park (2003, 2004) suggested that basing self-esteem on success or failure alone would leave individuals very vulnerable to low self-esteem as they avoid new experiences and potential successes out of fear of failure. Therefore basing self-esteem on competence alone seems like a narrow way of thinking with predictable outcomes.

Morris Rosenberg (1965) suggested that self-esteem was more likely based upon an attitude of worthiness- whether the individual feels a positive or negative attitude towards their self. If the person feels “good enough” self-esteem will be boosted and vice versa. Thinking of self -esteem in terms of an attitude formation made it measurable which gives it a big advantage over the work of James. However both Emler (2001) and Baumeister (2003) found that the predicted correlations between Self-esteem and behaviour were weak or non-existent except in the case of “happiness” when measured in this manner.

Nathaniel Branden (1994) took it a step further and suggested it from a multi-faceted approach, suggesting that self-esteem is best understood through both competence and worth. He agreed with Rosenberg that human beings have a fundamental need to feel worthy but this worth can only be achieved by acting competently/rationally in their decision making. Therefore self-esteem is not just feeling good about yourself for achievement of a certain skill but also about behaving in a way that adheres to this measure of worthiness or rationality within their actions.

When an individual is part of a society and that society influences how that person responds to stimuli can be said to be social conformity. The earliest psychological

studies of conformity include the work of Sherif (1936). The quality of being one of a kind, a singularity which is distinguished from all others is considered being unique.

Within this study “individualism” and “uniqueness” will be used interchangeably and should be taken to mean: “Belief in the primary importance of the individual and in the virtues of self-reliance and personal independence and the acts based on this belief” and “Social conformity” will mean “Action or behaviour in correspondence with socially accepted standards, conventions, rules, or laws”

Snyder and Fromkin (1980) suggested that people seek to establish and maintain a moderate level of individuality but do not wish to be too similar or dissimilar to others as it arouses negative emotions. They found that if an individual perceives that they are too similar to others they will engage in uniqueness affirming behaviour or attitudes. They also suggested that the need for individuality may be higher in individuals who base their self-image on being different. They are comfortable with a higher level of individuality than others as it may be the defining quality that helps them to feel special. This is especially true; they suggest, of individuals who feel that they need to stand out to be noticed- the middle child in a large family for example.

Ganster, McCuddy and Fromkin (1977) replicated these findings with changes in self-esteem as the defining factor. Although the need for uniqueness scale that came from this theory is a very useful tool to measure individuality we must also look at the theory's weaknesses to achieve balance. Lynn & Harris (1997) criticized the theory for placing too much emphasis on both public and socially risky demonstrations of uniqueness. They were so sure in this thinking that they developed a scale of their own known as the self-attributed need for uniqueness scale. This SANU scale is used to measure the tendency to express uniqueness in a more socially acceptable way than the original NU scale. In this same vein Tepper and Hoyle (1996)

suggested that individuals do not only pursue uniqueness in this risky way but also in a private and socially acceptable manner such as procuring rare and often expensive items.

“Risk-taking behaviour” refers to “the tendency to engage in behaviours that have the potential to be harmful or dangerous, yet at the same time provide the opportunity for some kind of outcome that can be perceived as positive ”

(<http://www.thefreedictionary.com/individualism>). Risk is seemingly inescapable in contemporary life. The positive and negative consequences of people's actions in the presence of risk are often dramatic. "Risk-Taking Behaviour" is an investigation of the psychological derivation and ramifications of these actions.

In this study the behaviours deemed as “risky” will adhere to the behaviours as listed in the DOSPERT scale. They consist of excessive consumption of alcohol, engaging in pre-marital or “casual” sex, gambling, risks of safety such as riding a motorcycle without a helmet etc.

Problem Behaviour theory (Jessor, 1968, 1977 and Jessor, Donovan & Costa 1991) takes a comprehensive look at the reasons why individuals may or may not be prone to engage in risky behaviour. It is comprised of three concepts: Perceived-environment system, the personality system and the behaviour system.

Within the perceived- environment system suggests that social control; role models and support are the main predictors in risky behaviour. Proximity to peers engaging in risky behaviour will directly impact the likelihood of the individual also partaking of that activity. Low support and control only furthers the likelihood of risky behaviour.

The personality system concept is more stable and enduring throughout the lifespan and is based on personal beliefs, values and attitudes towards the self and society that reflect past experiences and social learning. Problems occurring in this system, they say, can lead to lower valuation of education, higher value of individualism, lower self-esteem and a greater tolerance of deviance.

The behaviour system suggests that involvement in one type of risk-taking behaviour increases the likelihood of involvement in further problem behaviours in general.

One glaring issue that can be seen with this theory is that the perceived environment system section appears to be congruent with Erikson's (1950-1989) Identity vs. Role Confusion stage of development in that it is typical for a teen to pay more heed to a peer's advice and control than to that of their parents. Therefore it may be assumed that this theory is rooted in behaviour seen in adolescents and not an adult populace.

Research

Sperry (1991) indicated that tattooing in western civilisation is judged as disagreeable. A study by Forbes (2001) demonstrates that, although tattooed people appraise themselves no differently on the big 5 OCEAN personality scale than others, non-tattooed individuals suggested that they thought that tattooed people were "much different" from them.

Koch, Roberts, Armstrong and Donna (2010) presented a study suggesting that individuals with increasing evidence of body art procurement are more likely to report higher levels of deviant behaviour to maintain and/or increase distance from mainstream society. Forbes (2001) also supported the assumption showing that 33%

of males and 25% of Females in his study had tattoos and were more likely to use greater amounts of alcohol and smoke marijuana as well as having lower social conformity. Koch & Roberts (2005) similarly found that tattooed college students were more likely to have pre-marital sex and have sex at a younger age.

Interestingly, in the same study Koch, Roberts, Armstrong et al (2010) discovered that the individuals didn't see tattooing itself as a non-conforming behaviour until the level of tattooing reached a threshold of four or more. Beyond this threshold, participants were also more likely to participate in risky behaviour. But below this level there was no difference between tattooed and non-tattooed individuals.

This theme also permeates the study undertaken by Randle and Aitken (2009) which showed that self-esteem was likely to be lower in individuals who had three or more tattoos, while below that threshold there was no difference. They also discovered 4 main motivations for getting tattooed which were: rebellion, appearance, significance and group affiliation. Males were much more prone to getting tattooed to show group affiliation and it was these males who were most prone to regret them and have their self-esteem affected. However Crocker and Major (1989) suggested that tattooing could actually be a boon to self-esteem in the individual is socially accepted within a group.

With this research taken into account, we must, then, ask the question: is there merit to these claims? Is there a threshold of social acceptance and tattooing? Even the threshold seen in these studies were not seen in earlier studies such as Forbes (2001). Were the levels of social acceptance increased within society between the study of Forbes 2001 and Koch & Roberts in 2005? Although people with 4 or more tattoos were still seen as socially deviant it was a step up from the universal level of deviance for all tattoo owners in 2001. So will there be even more social acceptance

in 2014? Will this affect how tattooed people are stereotyped? And more importantly will there be a marked difference in self-esteem, social conformity and risk-taking behaviour in 2014? Or are the original studies correct in their thinking? In order to answer these questions, this study will ask qualitative questions as well as the quantitative parametric tests. This qualitative portion of the survey will include questions such as; what the participants consider to be heavily tattooed in this age, what they think of tattooing and heavily tattooed people and what number of tattoos do they feel is socially acceptable in 2014. These questions give participants the opportunity to answer in their own words and are an attempt to ascertain whether opinions on heavily tattooed people still fall into the Steward (1990) stereotype of the morally dubious, social outsider or are they seen in a better light in current thinking? This study will also investigate whether age or gender will play a role in how accepting participants are towards tattooing. Qualitative questions in this section are also asking what participants would consider to be a socially acceptable level of tattooing in this decade. This portion is in direct response to the suggestion of Randal and Aitken (2009) and Koch, Roberts, Armstrong and Donna (2010) that tattooing is seen as acceptable once the numbers are under 3-4.

Rosenberg's (1989) Self-esteem scale will also be used to test their other assumption that as self-esteem goes down, larger numbers of tattoos are more likely to be seen. The number of tattoos each participant has said that they have will be tested for correlation with their total self-esteem score.

Snyder and Fromkin's (1980) Need for Uniqueness scale will be used to ascertain how individual each participant feels that they are from society and check for a relationship between tattoo numbers and that move away from societal norms and finally; the Domain-Specific Risk-Taking (Adult) Scale (DOSPERT) (Blais and Weber

2006) will be used to test for a correlation between how likely the individual is to take part in risk taking behaviour and the number of tattoos they have gotten.

The study will, therefore attempt to ascertain whether tattooing, especially in large numbers; can be an effective indicator of other risky behaviours, low Self-Esteem and a high level of individualism or has tattooing become accepted to the point that these stereotypes are no longer true?

The rationale for attempting this is:

Having an indicator of risky behaviour levels is very useful, as according to Hayes and Weiss (2006) risky behaviour can lead to accidents. And accidents are one of the biggest causes of death among young adults. Along with suicide and homicide, and it is a bigger killer than any disease worldwide.

If a large number of tattoos are indeed seen as extreme individuality, this in itself (if we are to take Snyder and Fromkin's (1980) word on acceptance of individuality) could lead to a certain level of isolation, and lower self-esteem (Ganster, McCuddy and Fromkin, 1977) due to the fact that people are uncomfortable with being too dissimilar to others or others being too different from them.

Studies on the theme of Self-esteem and tattooing seem to be much divided with some, such as Randal and Aitken (2009) suggesting that tattoo numbers are suggestive of low self- esteem. While others, such as Crocker and Major (1989) suggest that tattooing can actually be a boon to self- esteem if it is accepted within a group.

Based upon Snyder and Fromkin's (1980) need for uniqueness theory, there may be a discrepancy between what non-tattooed individuals would see as a socially acceptable level of tattooing compared to those who are tattooed due to the fact that those considering themselves as more individual will have a higher threshold for accepting individuality. This will be investigated in this study.

Nearly all research found on these topics were carried out on adolescents and young college students. This study will use a wider demographic in order to test universal application of the hypothesis and to see if, when tested on adults, the outcomes of the studies and theories still prove true.

Jessor (1968, 1977) suggested that one problem behaviour will predict more problem behaviours- first this study will attempt to ascertain as to whether tattooing is still seen as a problem behaviour, and if so, it will then attempt to see if tattooing can predict further problem behaviours.

Finally, it will be useful to find out empirically whether any of these negative connotations are actually true of the tattooed individual or is this thinking outdated.

The basic hypotheses of this study, therefore is that there will be a positive correlation between tattoo numbers and risky behaviours, a negative correlation between tattoo numbers and Self-Esteem, a negative correlation between tattoo numbers and social conformity and there will be social acceptance of tattooing when the number of tattoos are 4 or under. Acceptance of tattoos will be higher in tattooed individuals than in non-tattooed individuals.

The null hypotheses for this study are that there will be no difference between tattooed and non-tattooed individuals in terms of self-esteem levels, risk taking

likelihood and individualism. There will also be no effect on these variables depending on tattoo numbers. Any level of tattooing will be considered socially acceptable and acceptance of tattooing will be universally high.

Method

Participants:

A total of 78 participants responded to a survey. 32 participants randomly volunteered on an online version of the study posted on the social networking site Facebook, 11 further participants were recruited through email with the Dublin Roller Derby team and the final 35 participants were recruited with a paper version of the survey from a 1st year Psychology classroom. The online and paper versions of the study were identical in questions and order of questionnaires given. The online version of the survey was created using Google Drive. The Facebook volunteers were a completely random sample, any user who came across the survey on my page or through their friends were welcome to complete the survey. The Dublin Roller Derby volunteers were gathered through snowball sampling. A link to the survey was sent to one member of the team and she distributed it from there. Finally the Psychology class were recruited by entering during their research methods seminar and handing out questionnaires to those who wished to participate. Permission was obtained from the class lecturer.

There were a total of 55 Female respondents (70.5%) and 23 Male Volunteers (29.5%). Ages ranged from 18 to 52 years old. The mean age of participants was 23.97. Two participants under 18 years of age had completed the questionnaires but their responses had to be removed due to the exclusion criteria placed upon the study. Under 18 year olds were excluded from the study due to legality of underage drinking, tattooing and sexual conduct. Participants over the age of 52 were welcome

and in the inclusion criteria but no responses of persons over 52 were completed. Participants were recruited from any race, religion or socioeconomic background.

Design:

This will be a descriptive quantitative and qualitative correlational survey using questionnaires and open ended questions. The tests used will be within groups, apart from questions concerning gender and whether they have tattoos or not. These two variables will be measured between groups. For gender participant data will be split into male and female to test for differences between males and females on the number of tattoos they have and whether they were more or less likely to have tattoos. Whether they have tattoos or not will be split into yes and no groups and run against self-esteem, risk taking behaviour, social conformity age and social acceptance of tattooing.

The main variables involved in this study are: Tattoo's (yes/no?), tattoo numbers possessed by participants, social acceptance of tattooing, Self-Esteem, Social Conformity and Risky Behaviours.

The predictor variable for this correlational study will be Tattoo's (yes/no?), tattoo numbers possessed by participants, social acceptance of tattooing, while the criterion variables will be Self-Esteem, Social Conformity and Risky Behaviours

Demographic variables used are: age, gender and number of tattoos.

Materials:

Three standardised questionnaires were used in this study alongside a 5 question qualitative page.

The qualitative page asked whether the individual had tattoos, if so, how many and if not, why not. This was used as a baseline to ask their opinion as to what level of tattooing they would deem to be socially acceptable, what they would consider heavily tattooed and their opinions on heavily tattooed people. These questions were asked to test whether:

1. There would be a difference in how socially acceptable tattooing is deemed between tattooed and non-tattooed people
2. There would be a difference in how they perceive a heavily tattooed individual
3. The hypothesis that there is level of tattooing that is deemed socially acceptable across the board is true. That is, that up to a certain number of tattoos is acceptable but beyond that is no longer socially acceptable.
4. Tattoos are more accepted now than ever before

After the demographic and qualitative questions were asked the participants were then to answer three standard psychological questionnaires

The first questionnaire was Rosenberg's Self-Esteem scale (Rosenberg, 1965) This is a ten question, 4 point Likert scale questionnaire used in order to test an individuals' level of self- esteem. Participants are asked to tick the box that most closely represents how they feel about the statement. The boxes were marked: SA, A, D and SD. The participants were instructed that: If you strongly agree with the statement tick SA, If you agree with the statement tick A, If you disagree with the statement tick D and If you strongly disagree with the statement tick SD. The

questionnaire is scored from SA=3, A= 2, D= 1 and SD= 0 with the exception of questions 2, 5, 6, 8 and 9 which are reverse scored. Scores are given from 0-3 and therefore the total scores can range from 0-30. With 0 being extremely low self-esteem and 30 being extremely high.

The next questionnaire in the packet given to participants was the Need for Uniqueness scale (Snyder & Fromkin, 1977). Measures individualism in a 32 statement 5 point Likert scale also measured from strongly agree to strongly disagree, but also adding a "Neutral" point. In this case the participants were indicated to tick: 1 = Strong Disagreement, 2 = Moderate Disagreement, 3 = Neutral, 4 = Moderate Agreement and 5 = Strong Agreement. The questionnaires are also scored on this scale with the exception of questions 2, 3, 5, 7, 9, 11, 13, 14, 17, 19, 22, 23, 26, 27, 28 and 31 which are reverse scored. These 32 measures are added to get a total ranging from 32 (Socially conformant) to 160 (highly individual).

The final questionnaire presented to participants was the Domain-Specific Risk-Taking (Adult) Scale (DOSPRT)-alternate 2006 shorter version- (Blais and Weber 2006) 30 question, 7 point Likert scale measures the likelihood with which respondents might engage in risky behaviours over five domains of life (Ethical, Financial, Health/Safety, Recreational and Social). The scale in this instance was: 1= Extremely unlikely, 2= Moderately unlikely, 3=Somewhat unlikely, 4= not sure, 5= Somewhat likely, 6= Moderately likely, 7= Extremely likely. Participants were asked to indicate the likelihood that they would engage in the described activity or behaviour if they were to find themselves in that situation and asked to place a number in the box beside each question that relates closest to how they feel about the statement. This questionnaire is split into 5 sub-sections measuring Ethical,

Financial, Health, Recreational and Social Risk-Taking. Each sub-section is added together to get a domain score that can range from 6 to 42.

Procedure

There are two parts to the procedure of this study.

The online version of the questionnaire was created using Google drive. A link was posted on the social networking site Facebook and the Dublin roller derby team captain was sent an email with a link to the survey and asked to pass it on to her team mates, coaches and others in the roller derby area. Participants were informed, through a written introduction that their answers would be anonymous and that they had the right to withdraw at any time before the data was collected but once past that point it could no longer be identified and removed from the pool. They could do the survey at their own leisure when and where they chose and told that this was a study on tattooing and attitudes towards tattooing. There was no mention of self-esteem, risky behaviour or social conformity in the initial brief. However, participants were told that if they required any further information or debriefing they were welcome to contact myself or my supervisor and relevant contact details were produced and informed of helplines available if the questions asked caused any discomfort.

The second part of the survey was conducted using pen and paper. It was conducted on a classroom of 35 psychology students. Upon entering the classroom printed versions of the questionnaires were taken out of three A4 sized envelopes and handed out. These questionnaires were asking identical questions in the same

order as the online version and the same introduction was written on both versions. The verbal introduction was the only change. As the participants in this classroom were psychology students and not naive participants they were given the further information that the study was also looking at self-esteem related to tattoo numbers.

All three groups were informed that the survey would take approximately 15 minutes to complete the survey. The majority of participants in the classroom finished in this time scale with one or two exceptions, who were allowed to take the questionnaire with them, complete it and return it through their class tutor in one of the anonymous envelopes distributed. When the class time had ended questionnaires were gathered into bundles and placed back into the envelopes which were then sealed.

Detachable helpline sheets were included with the questionnaires and participants were instructed to keep this sheet.

Results

The purpose of this study was to test whether stereotypes of tattooed individuals were true or false and to test to see how socially accepted tattooing is today. It therefore took three aspects typical to stereotypes of tattooed people: low Self-esteem, Individualism and Risk-taking behaviour and tested to see if there was any correlation between the number of tattoos an individual had and these three variables. It was also to test whether there was a correlation between the number of tattoos possessed by a participant and their level of acceptance towards tattooing in society. And finally it was to test the assumption that tattoos in general were more accepted in modern times. This was done by asking participants how many tattoos they thought were socially acceptable and testing to see if age played a factor in this acceptance.

Descriptive statistics

Table 1: *Breakdown of gender*

Gender	Number	Percentage
Male	23	29.5
Female	55	70.5
Total	78	100.0

Respondent numbers separated by gender.

Age of respondents ranged from 18 to 50 years, with a mean of 23.97 and a standard deviation of 5.93.

Table 2: *Qualitative means*

Variable	Mean	Standard deviation
Number of tattoos	2.46	3.62
Social acceptance of tattoos	3.68 (out of 5)	1.35

The average number of tattoos participants reported having was 2.46 (with a range from 0 to 14 tattoos) while social acceptance of tattooing (in large numbers) was relatively high in comparison.

The next table to be presented will show the breakdown of the answers in the latter category.

Table 3: *Break up of answers on social acceptance of tattoos*

Social acceptance groups	Frequency	Percent
0	1	1.3
1-3	19	24.4
4-7	9	11.5
7+	2	2.6
Any Amount	47	60.3

More than half of the participants (60.3%) who answered the survey felt that any level of tattooing was socially acceptable in today's culture. With only 1 participant of the entire 78 stating that they believe tattooing to be unacceptable at all.

Table 4: *Dependant variable descriptive statistics*

Variable	Mean	Standard Deviation
Self-Esteem	20.28	5.59
Individualism	104.67	12.57
Ethical DOSPERT	12.88	4.86
Financial DOSPERT	14.81	6.16
Health DOSPERT	19.22	6.20
Recreational DOSPERT	24.05	8.32
Social DOSPERT	31.67	5.56

Breakdown of means and standard deviations of the dependant variables used in this study. Self-esteem was scored from 0-30. SE scores were averagely high across the board. Individualism/need for uniqueness was scored from 32- 160. With an average of 104.67 and DOSPERT domains were measured from 6-42.

Inferential statistics

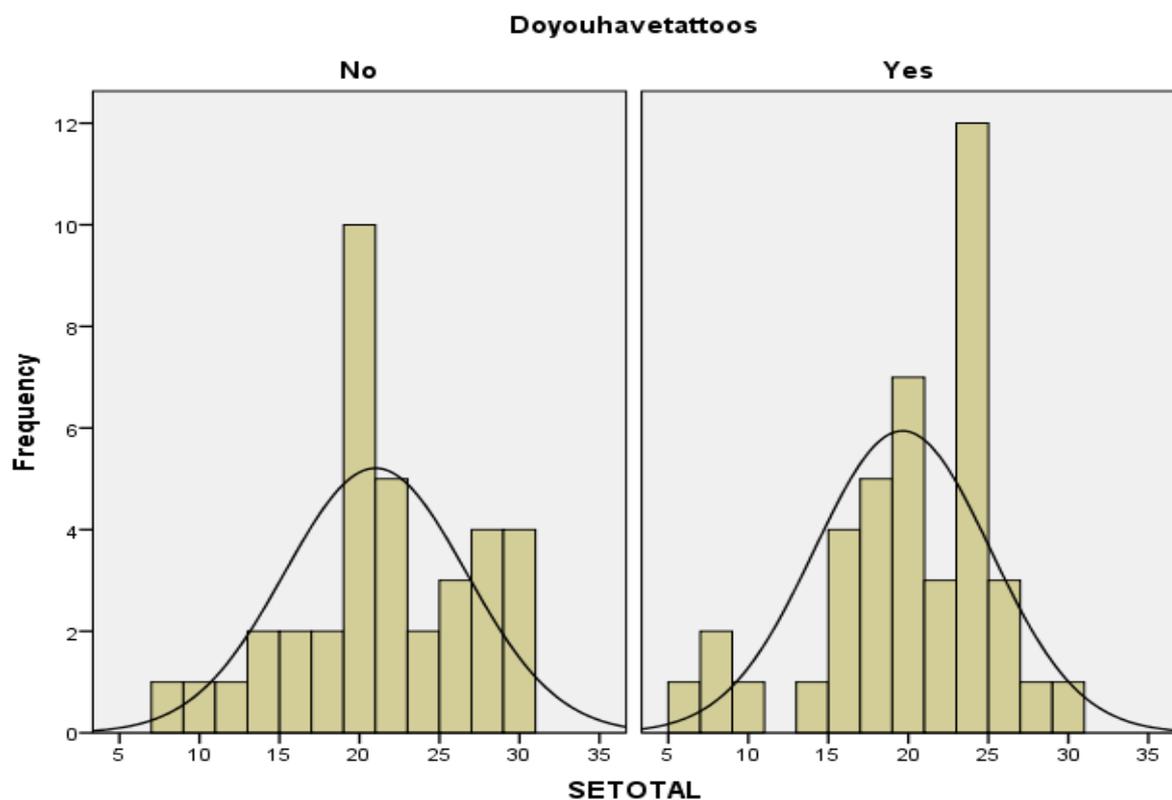
A Mann-Whitney U test showed no significant difference in numbers of tattoos possessed between Males (n= 23) and females (n=55) $U= 574.0$, $z=-.680$, $p=.497$

Amazingly, as the age of participants increased so did the level of social acceptance towards tattooing. Age was measured against social acceptance of tattooing using a Spearman's Rho correlation test as both variables were unevenly distributed. There was a medium positive correlation between the two variables, $r =.32$, $n = 78$, $p = .005$

The number of tattoos participants possessed also increased as age increased with participants between the ages of 26 and 40 reporting the largest number of tattoos. Age was measured against number of tattoos possessed using Spearman's Rho. In this case there was also a medium bordering on strong correlation between the variables, $r = .47$, $n=78$, $p= .000$

To test the hypothesis that there will be a correlation between the number of tattoos possessed and how socially accepting of tattoos the individual will be; a Spearman's Rho correlation was run between the two. As to be expected there was also a moderate to strong positive correlation between the two variables. $r =.47$, $n = 78$, $p = .000$.

Figure 1.0

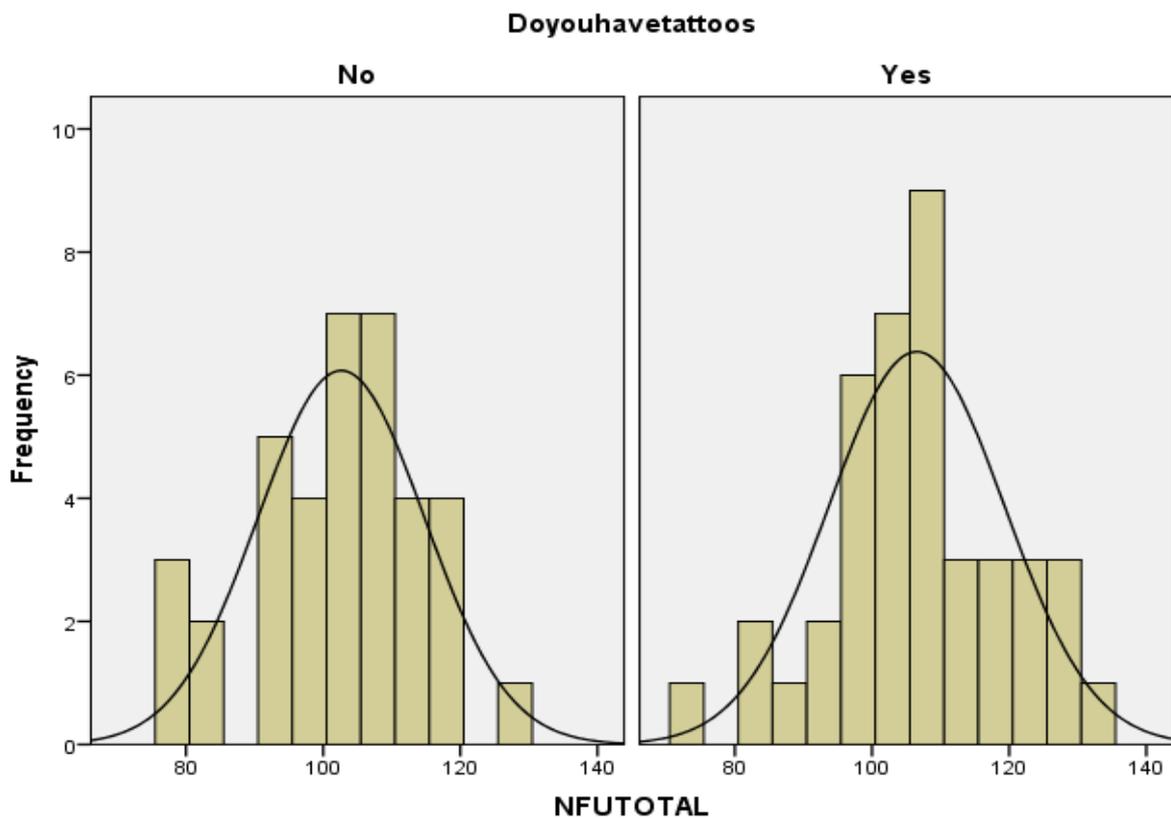


Self-esteem and the presence of tattoos

As we can see in figure 1.0 there was no significant difference in self-esteem between tattooed and non-tattooed individuals. Non tattooed individuals had a slightly higher propensity for extremely high self-esteem scores but it is offset by non-tattooed individuals being more likely to score around the high 23-25 mark. A Mann-Whitney U test also discovered no significant difference between having tattoos (n=41) and not having tattoos (n=37) when related to self-esteem. $U=677.500$, $z=-.813$, $p=.416$

Using Spearman's Rho it was also shown that there was no significant correlation between number of tattoos and Self-esteem scores $r = -.056$, $n = 78$, $p = .627$.

Figure 2.0



Uniqueness and presence of tattoos

Figure 2.0 is a histogram showing scores on the need for uniqueness scale (range: min= 32, max= 160) for tattooed and non-tattooed people. It can be seen that those with tattoos are slightly more likely to score around 110 but the overall difference is not significant. A Mann-Whitney U test confirms this: tattooed individuals ($n=41$) and non-tattooed ($n=37$). $U = 614.000$, $z = -.1177$, $p = .239$

The same result is to be found between tattoo numbers and uniqueness $r = .172$, $n=78$, $p=.133$. Spearman's Rho found no significant correlation.

Table 5: 5 Domain scores of DOPSERT test (risk-taking) run through Mann-Whitney U.

	Ethics	Financial	Health	Recreational	Social
No tat (n)	37	37	37	37	37
Yes tat (n)	41	41	41	41	41
U	668.0	710.5	691.5	573.5	634.5
Z	-.909	-.481	-.672	-1.853	-1.244
P	.363	.630	.502	.064	.214

There were no significant differences between those who have tattoos and those who do not in any of the 5 domains of Risk-taking behaviour. Recreational risk-taking was the closest to a significant difference with a p value of .064, just beyond the .05 or less significance boundary.

Table 6: Domain scores of DOPSERT test (risk-taking) and number of tattoos run through a Spearman's Rho

	Ethics	Financial	Health	Recreational	Social
r	.077	.031	.086	-.264	.169
n	78	78	78	78	78
p	.500	.786	.453	.020	.140

There was no significant correlation found between the risk-taking domains of Ethics, Financial, Health and social and the number of tattoos an individual has obtained. There was a small negative correlation between tattoo numbers and Recreational risk-taking.

Discussion

The main aim of this study was to discern whether tattooing is more socially acceptable in this decade than ever before in western culture. It was furthermore to assess whether stereotypes typically placed upon heavily tattooed people (namely that they are risk-taking, socially different and have poor self-esteem) have any accuracy; or whether this belief is incorrect and outdated. To do this, two sets of hypotheses were considered:

The basic hypotheses were that there will be a positive correlation between tattoo numbers and risky behaviours, a negative correlation between tattoo numbers and self-esteem, a negative correlation between tattoo numbers and social conformity and there will be social acceptance of tattooing when the number of tattoos are 4 or under. Acceptance of tattoos will be higher in tattooed individuals than in non-tattooed individuals.

The null hypotheses for this study are that there will be no difference between tattooed and non-tattooed individuals in terms of self-esteem levels, risk taking likelihood and individualism. There will also be no effect on these variables depending on tattoo numbers. Any level of tattooing will be considered socially acceptable and acceptance of tattooing will be universally high.

The results section from this study has unearthed surprising conclusions. There was no significant difference between those with and those without tattoos in self-esteem levels, uniqueness seeking or any risk-taking likelihood. Number of tattoos possessed also showed no significant relationship with self-esteem levels,

individualism and four out of the five risk-taking domains. Therefore on these counts we must take the null hypotheses to be true. In fact the only difference on this front was that as the number of tattoos increased recreational risk-taking behaviour reported decreased. That is, those with fewer tattoos are more likely to engage in risk-taking behaviour in their recreational activity. According to the DOSPERT scale these behaviours included skydiving, bungee jumping and white water rafting among others.

There was some truth to the idea that tattooing was seen as socially accepted up to a point of 3 tattoos as 24.4% of participants stated that this was the level of tattooing that they considered most socially accepting. However, contrary to what previous studies have said, over 60% of participants stated that they believe that any amount of tattooing is now socially acceptable and only 1 participant in the study believed that tattooing was not socially acceptable at all. Therefore, although there was some truth in the hypothesis on this aspect there is more evidence in this study of a higher level of acceptance and so the null hypothesis must again be taken. In the case of higher levels of acceptance being found amongst tattooed individuals, this hypothesis has proved to be true. Tattooed individuals were, indeed more likely to accept large numbers of tattoos. Amazingly age also proved to be a factor, and not in the way that may be expected. As the age of participants went up so did their acceptance of tattooing in large numbers. The number of tattoos participants possessed also increased as age increased with participants between the ages of 26 and 40 reporting the largest number of tattoos.

Amongst the qualitative answers a number of patterns emerged when participants were asked what they think of heavily tattooed individuals. The majority of people said that they saw heavily tattooed people as no different from anyone else. That

they were people too and would not judge people based upon tattoos. The second pattern to emerge in thinking was that they are creative people and admiration was shown towards them (from tattooed and non-tattooed individuals alike). The only negative statements were aimed towards neck or facial tattoos. Some participants considered this to be poor forward thinking as such visible tattoos could make future employment more difficult.

It can be seen from the results shown that there is much more support for the null hypotheses than the initial main hypotheses. This result was somewhat expected when tattooing was reported as being decidedly socially acceptable in 2014. The Null hypothesis, therefore, will be taken as the true hypothesis of the study.

This study differed greatly from some theories and studies mentioned in the introduction and seemed in congruence with others. Each study will be addressed, it will be stated whether this current study's findings concurred or conflicted with these past studies and finally; potential reasons for this similarity or difference will be assessed.

Because self-esteem seemed to be no different in tattooed and non-tattooed individuals we cannot say that tattooing is a predictor of low-self-esteem. Self-esteem levels were generally quite high across the board. If we look back to the theory presented by James (1890) we may take from it that these individuals are meeting their pretensions or goals in other aspects of their life and self-esteem is not based on what they look like but on pride in what they are good at. We could also question that the procurement of tattoos itself was a sort of goal which plays into an individual's self-concept, therefore increasing that individual's self-esteem. In this measure the current study concurs with the presented theory.

There being similar levels of self-esteem in those with tattoos, and those without does not seem too far-fetched when we take current social levels of acceptance into account. If tattooed individuals are no longer being judged or stereotyped purely by appearance, why then would they be any more or less likely to have feelings of worthiness in themselves, which was described by Morris Rosenberg (1965) as the corner stone of high self-esteem. Of course at this stage these statements are only conjecture but it would appear to be a very interesting avenue for further study and analysis.

Snyder and Fromkin (1980) suggested that people seek to establish and maintain a moderate level of individuality but do not wish to be too similar or dissimilar to others as it arouses negative emotions. This could be one of the keys to understanding the discrepancy between the results of this study and previous studies as regards to self-esteem and individuality. Tattooing is, according to this research is now widely socially acceptable and participants said that tattooed people were no longer seen as very different from non-tattooed people. Being similar to others, but individual to a moderate extent, according to Snyder and Fromkin, will lead to positive emotions towards themselves. Of course, as stated in the introduction section, the need for uniqueness scale does not take into account more private and socially acceptable means of uniqueness seeking.

Results from this study appear to directly contradict Problem Behaviour theory (Jessor, 1968, 1977 and Jessor, Donovan & Costa 1991), particularly the behaviour system which suggests that involvement in one form of risk-taking behaviour (which in this case would be tattooing) increases the likelihood of involvement in further risk-taking activity. This difference may have something to do with tattooing's status as a problem/ risky behaviour today. Would it still be considered as such? If not then

tattooing would, indeed, be unlikely to predict future risk-taking. The second reason we must consider for this difference in outcome is the age of participants. As already stated, Jessor's theory appeared to have used adolescent subjects alone for their study. Erikson's (1950-1989) stages of Psychosocial Development have stated that risk-taking behaviour during the identity vs. role confusion stage is very different than in adult years. The use of a wider age range of participants in this current study may therefore be a key difference in respect of the outcome.

Forbes (2001) demonstrated that, non-tattooed individuals suggested that they thought that tattooed people were "much different" from them. He also found that were more likely to use greater amounts of alcohol and smoke marijuana as well as having lower social conformity. Koch & Roberts (2005) similarly found that tattooed college students were more likely to have pre-marital sex and have sex at a younger age. Every result from these studies was severely contrasted by this current study. Interestingly, similar to Jessor's theory each survey was carried out on adolescent student populations so we must again look to that fact that age plays an extremely important role in results found.

Sperry (1991) indicated that tattooing in western civilisation is judged as completely disagreeable. By 2009 Randle and Aitken found that there was a social acceptance of tattoos and no difference between tattooed people and others in terms of self-esteem as long as the participants had 3 or less tattoos. Already by 2010 Koch, Roberts, Armstrong and Donna had increased this threshold to 7 tattoos and stated that below this threshold there would be no difference in self-esteem or social deviance. In accordance with this trend in 2014 this study has found that this perceived threshold, in Ireland at least, has increased to any amount of tattooing and

there was no difference to be found between tattooed and non-tattooed individuals in regard to self-esteem, social conformity or risk taking behaviour.

As with all pieces of research there are some issues to be found with this study. These limitations and potential for future study will be discussed in this section.

Lynn & Harris (1997) and Tepper & Hoyle (1996) stated that uniqueness may also be established through more private, less risky means. This study did not look at this aspect of individualism with regards to tattooing. For future research this study could be replicated using a uniqueness scale looking at this aspect of individualism, for example the Lynn & Harris (1997) SANU scale also mentioned previously.

Without further research into this area it is impossible to conclusively say that greater social acceptance of tattooing is indeed the reason why there is such a reported difference between the results found here and the previous studies mentioned. This area in particular seems a rich vein to tap in to for further study.

As seen with the problem behaviour theory when related to this study, it is difficult to ascertain whether tattooing would actually be considered to be risk-taking behaviour in current times. This question was not thought of during the questionnaire creation and may have been useful to gain greater understanding in this subject. Some form of qualitative study to discover whether people would consider tattooing to be a type of problem behaviour in this decade may prove very useful when attempting to understand how to accurately measure the effects of tattooing, and indeed risk-taking behaviour in the future.

The age of participants was much more varied than in many previous studies, however there were more participants in their 20's than would have been optimal. Increasing the number of participants over 40 and 50 would be the next logical step in the progression for even further analysis. Age appears to play a large factor in any potential outcome when looking into this area of study

There were participants from many cultural and socio economic backgrounds within this study. However all of these participants were at this moment based in Ireland which may skew the results due to cultural mores. Therefore we cannot state with certainty that this study will have universal applications. Replication of this study with participants from a wider variety of countries involved may produce very different results.

Merits of carrying out this study include:

This study accepted participants from a much broader age range and varieties of background than many of the studies discussed previously. The majority of risk-taking behaviour and tattooing correlational studies were tested on young adolescent college students only. It leaves room for a much broader range of answers to be gathered.

Finding no significant difference between tattooed and non-tattooed individuals in terms of self-esteem, conformity and risk-taking behaviour certainly merits this study taking place. So does the discovery of high levels of social acceptance towards tattooing in Ireland today. Opinions on this subject appear to change very rapidly and therefore a study conducted right now in 2014 is very instructive of modern culture of tattooing. It may also be the beginning of lifting the stereotyping that has surrounded tattooed individuals in western culture for as long as they have been available.

It fills the gap within the literature found during the research for this study. Randal and Aitken (2009) suggested high tattoo numbers are suggestive of low self-esteem. While others, such as Crocker and Major (1989) suggest that tattooing can be a boon to self-esteem. This study empirically tested this and found that neither suggestion is true. That there is no difference between tattooed and non-tattooed individuals in terms of self-esteem in modern times and therefore tattooing cannot be seen to be indicative of high or low self-esteem.

Conclusion

Based upon previous research, this study aimed to test for a relationship between tattooing numbers and low self-esteem, high levels of risk-taking behaviour and poor social conformity. It also looked at social acceptance of tattooing and tattoo culture in 2014. Although conforming to previous research, this study hoped to see change within this field. Discovering a high level of acceptance and banishing the illusion of the maladjusted personality based upon tattooing alone seems to be the main outcome of this journey. This result is different than expected is a pleasant surprise and a very welcome addition to the Psychological research pool.

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Appendices

Appendix 1: Full questionnaire packet used

Dear Participant,

My name is Sandra Johnston; I am a final year Psychology student. I am conducting research on Tattooing, attitudes and self-esteem.

I would be grateful if you could take the time to answer this questionnaire. There is no right or wrong answer and all steps are taken to ensure anonymity. Your questionnaire answers will be merged with others so any answers given cannot be traced back to you. No name or identification details will be asked for and information gathered will be stored in a password protected file.

You have the right to withdraw at any stage during the completion of this survey. However, due to the anonymity of the information, once collected your information cannot be removed from the pool. By completing and submitting this questionnaire you are consenting to this data being used within the study and any potential publication.

Should you require further information about this study, please contact

Sandra Johnston:

Or my supervisor

Margaret Walsh:

Thank you for taking the time to complete the questionnaire

Sandra Johnston

Gender: _____

Age: _____

Do you have tattoos? _____

If so, How many? _____

If not, Why not?

What level of tattooing would you consider being socially acceptable?

0

1-3

4-7

7+

Any amount

Other

What would you consider heavily tattooed? (Size? position? number?)

What are your opinions of heavily tattooed people?

Rosenberg Self-esteem scale

If you *strongly agree* with the statement tick SA.

If you *agree* with the statement tick A.

If you *disagree* with the statement tick D.

If you *strongly disagree* with the statement tick SD.

1.	On the whole, I am satisfied with myself.	SA	A	D	SD
2.	At times, I think I am no good at all.	SA	A	D	SD
3.	I feel that I have a number of good qualities.	SA	A	D	SD
4.	I am able to do things as well as most other people.	SA	A	D	SD
5.	I feel I do not have much to be proud of.	SA	A	D	SD
6.	I certainly feel useless at times.	SA	A	D	SD
7.	I feel that I'm a person of worth, at least on an equal plane with others.	SA	A	D	SD
8.	I wish I could have more respect for myself.	SA	A	D	SD
9.	All in all, I am inclined to feel that I am a failure.	SA	A	D	SD
10.	I take a positive attitude toward myself.	SA	A	D	SD

Need for uniqueness scale

Directions: Your task is to indicate the strength of your agreement with each statement. Beside each statement, tick the number from the following scale that most closely reflects you.

1 = Strong Disagreement, 2 = Moderate Disagreement, 3 = Neutral, 4 = Moderate Agreement

5 = Strong Agreement

1. When I am in a group of strangers, I am not reluctant to express my opinion openly.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

2. I find criticism affects my self-esteem.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

3. I sometimes hesitate to use my own ideas for fear they might be impractical.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

4. I think society should let reason lead it to new customs and throw aside old habits or mere traditions.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

5. People frequently succeed in changing my mind.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

6. I find it sometimes amusing to upset the dignity of teachers, judges, and "cultured" people.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

7. I like wearing a uniform because it makes me proud to be a member of the organization it represents.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

8. People have sometimes called me "stuck-up."

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

1 = Strong Disagreement, 2 = Moderate Disagreement, 3 = Neutral ,4 = Moderate Agreement

5 = Strong Agreement

9. Others' disagreements make me uncomfortable.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

10. I do not always live by the standards and rules of society.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

11. I am unable to express my feelings if they result in undesirable consequences.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

12. Being a success in one's career means making a contribution no one else has made.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

13. It bothers me if people think I'm being too conventional.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

14. I always try to follow rules.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

15. If I disagree with a superior on his or her views, I usually do not keep it to myself.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

16. I speak up in meetings in order to oppose those whom I feel are wrong.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

17. Feeling "different" in a crowd of people makes me feel uncomfortable.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

1 = Strong Disagreement, 2 = Moderate Disagreement, 3 = Neutral, 4 = Moderate Agreement

5 = Strong Agreement

18. If I must die let it be an unusual death rather than an ordinary death in bed.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

19. I would rather be just like everyone else rather than to be called a freak.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

20. I must admit I find it hard to work under strict rules and regulations.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

21. I would rather be known for always trying new ideas rather than employing well-trusted methods.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

22. It is better to always agree with the opinions of others than to be considered a disagreeable person.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

23. I do not like to say unusual things to people.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

24. I tend to express my opinions publicly, regardless of what others say.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

25. As a rule, I strongly defend my own opinions.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

26. I do not like to go my own way.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

1 = Strong Disagreement, 2 = Moderate Disagreement, 3 = Neutral, 4 = Moderate Agreement
5 = Strong Agreement

27. When I am with a group of people, I agree with their ideas so that no arguments arise.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

28. I tend to keep quiet in the presence of persons of higher rank, experience, etc.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

29. I have been quite independent and free from family rule.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

30. Whenever I take part in-group activities, I am somewhat of a nonconformist.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

31. In most things in life, I believe in playing it safe rather than taking a gamble.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

32. It is better to break rules than always conform to an impersonal society.

1		2		3		4		5	
---	--	---	--	---	--	---	--	---	--

For each of the following statements, please indicate the likelihood that you would engage in the described activity or behaviour if you were to find yourself in that situation. Provide a rating from Extremely Unlikely to Extremely Likely, using the following scale. Please place a number in the box beside each question that relates closest to how you feel about the statement.

1	2	3	4	5	6	7
Extremely Unlikely	Moderately Unlikely	Somewhat Unlikely	Not Sure	Somewhat Likely	Moderately Likely	Extremely Likely

1. Admitting that your tastes are different from those of a friend.
2. Going camping in the wilderness.
3. Betting a day's income at the horse races.
4. Investing 10% of your annual income in a moderate growth mutual fund.
5. Drinking heavily at a social function.
6. Taking some questionable deductions on your income tax return.
7. Disagreeing with an authority figure on a major issue.
8. Betting a day's income at a high-stake poker game.

Please place a number in the box beside each question that relates closest to how you feel about the statement.

1	2	3	4	5	6	7
Extremely Unlikely	Moderately Unlikely	Somewhat Unlikely	Not Sure	Somewhat Likely	Moderately Likely	Extremely Likely

9. Having an affair with a married man/woman.

10. Passing off somebody else's work as your own.

11. Going down a ski run that is beyond your ability.

12. Investing 5% of your annual income in a very speculative stock.

13. Going white-water rafting at high water in the spring.

14. Betting a day's income on the outcome of a sporting event

15. Engaging in unprotected sex.

16. Revealing a friend's secret to someone else.

17. Driving a car without wearing a seat belt.

18. Investing 10% of your annual income in a new business venture.

19. Taking a skydiving class.

Please place a number in the box beside each question that relates closest to how you feel about the statement.

1	2	3	4	5	6	7
Extremely Unlikely	Moderately Unlikely	Somewhat Unlikely	Not Sure	Somewhat Likely	Moderately Likely	Extremely Likely

20. Riding a motorcycle without a helmet.

21. Choosing a career that you truly enjoy over a more secure one.

22. Speaking your mind about an unpopular issue in a meeting at work.

23. Sunbathing without sunscreen.

24. Bungee jumping off a tall bridge.

25. Piloting a small plane.

26. Walking home alone at night in an unsafe area of town.

27. Moving to a city far away from your extended family.

28. Starting a new career in your mid-thirties

29. Leaving your young children alone at home while running an errand.

30. Not returning a wallet you found that contains €200

If you have been affected by any of the statements or questions asked in this questionnaire you can find help and support at:

The Samaritans: 1850 60 90 90

: jo@samaritans.org

Aware: 1890 303 302

Should you have any issues or questions regarding the questionnaire or the study you can contact:

Sandra Johnston:

Or my supervisor

Margaret Walsh:

