Getting – and Getting Rid of -- Tattoos

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ABSTRACT

Based on our conceptual model (DARRREM: <u>Decision</u>, <u>Acquisition</u>, <u>Reflection</u>, <u>Resolution</u>, <u>Removal</u>, <u>Energized</u>, and <u>More</u>) we further examine and reflect on the emotional components of contemporary tattoo acquisition and possession. This research presents data from respondents at a tattoo removal clinic, and explores the pace at which removal occurs and the rationale for seeking to reverse the complex physical and social process of tattoo acquisition. Consistent with previous research, respondents report deliberation and analysis in their decision- making. Moreover, the feminization of tattoo stigma re-occurred in this study as women, rather than men were more likely to seek removal, and at an earlier age, than reported in previous research. Results are interpreted in light of implications for a more broadly based research agenda on gender, stigma, and the culture of the body.

1. Introduction

The social meaning of a visible tattoo began to change rather significantly about twenty-five years ago. While Sanders (1985) reported significant levels of stigmatization among tattoo wearers, Armstrong (1991) showed that tattoos had begun to emerge into the mainstream. No longer seemingly confined to military personnel, incarcerated individuals, or societal fringe, tattoos have become common and visible among career women, college students, athletes, actors, and soccer moms as well (Armstrong, 1991; Drews, Allison, & Probst, 2000; Koch, Roberts, Armstrong, & Owen, 2010; Madfis & Arford, 2013). Reports cite 45 million Americans have gone to one of at least 21,000 nation's tattoo studios to obtain \$45-\$150 skin designs, with an annual dollar expenditure of \$1.65 billion for this type of body art (Statistic Brain, 2013; Taylor & Keeters, 2010).

Similarly, the behavioral correlates for those with and without tattoos became less clearly tied to edgy or deviant behavior. While some earlier studies indicate that body art acquisition is linked to risky behavior such as binge drinking, illegal drug use, and hyper-

sexuality (Carroll, Riffenburgh, Roberts, & Myhre, 2002; Roberts, Auinger, & Ryan, 2004; Roberts & Ryan, 2002), others qualify those assertions. Koch, Roberts, Armstrong, and Owen (2010) report little difference among those with one to three tattoos on the types of behavior mentioned above. A single rose on the breast or a dolphin on the ankle doesn't distinguish those individuals from those with no body art when it comes to predicting or observing concomitant edgy social behavior. However, a more prominent lifestyle commitment, nominally quantified as four or more tattoos, seems to be a threshold beyond which some of the old-time stigmatization begins to make some sense again. When survey respondents reported four or more tattoos, they also cited a two to tenfold increase in excessive drinking, drug use, premarital sexual behavior, as well as an arrest history. A published 2013 study replicated these findings (Owen, Armstrong, Koch & Roberts). The current reported research here uses empirical data from tattoo wearers seeking removal to examine and reflect upon the competing motivations to acquire and eliminate a tattoo amid the changing nature of its meaning.

2. Theory

2.1. Emotions and Reasoning

Our conceptual model relies on the emotional antecedents and outcomes that lead to, and result from, considering and acquiring a tattoo. These emotions are similarly evident when considering and undertaking tattoo removal. Foundational to our thinking is Goffman's (1959) classic conceptualization of Impression Management. The permanence and visibility of a tattoo evoke a range of reactions, reflecting the presumed intent of the acquirer.

More pointedly, previous research with similar respondent pools shows individuals often acquire tattoos after a deliberative assessment of social, psychological, and health risks (Koch, Roberts, Cannon, Armstrong, and Owen, 2005.) This is consistent with more general conceptualizations of deliberative decision making such as Ajzen and Fischbein's (1980) Theory of Reasoned Action and Becker's (1974) Health Belief Model..

Moreover, a tattoo is often an outward sign of strongly held ideology, deep emotion, or social psychological attachment to significant people (Koch, Roberts, Armstrong, and Owen, 2015; Maloney and Koch, forthcoming). Thus, we initially situate this project within the logic of and insight from the sociology of emotions.

Thoits (1989) reports that much of the empirical research on the social nature of emotions – desires, attitudes, values, moral beliefs – analyzes these as dependent variables. Emotions are produced by social experience, external stimuli, and personal relationships. However, she also notes that, increasingly, emotions come into play as intervening variables. For example, gender role expectations elicit emotions – resistance, acquiescence, moral outrage – and behavioral changes ensue. Letters to editors, marches for causes, and even social movements come to be as the analysis moves toward the macro-level of social change.

Emotions are situated between an internal analysis of norms and context, balanced against an assessment of opportunities, options, and risks. Hochschild (1983) studied how increased demands on flight attendants produced anxiety and helplessness. This required the management of emotions and the manufacturing of superficial gestures masquerading as emotions.

Applying the logic of that work to this project, we expect emotions result from tattoo acquisition and/or removal – satisfaction, disappointment, anger, or euphoria. Emotions might also be the motivation for tattoo acquisition or removal. The death of a loved one, and the ensuing grief, may lead to acquiring a memorial tattoo (Maloney & Koch, Forthcoming). Emotions may also intervene following a decision to acquire a (or another) tattoo. Cues from colleagues, clients, supervisors, family members, and friends may produce anxiety and fear – as well as confidence and affirmation – leading to tattoo removal or further acquisition.

2.2. Motives for Tattoo Acquisition and Removal: The DARREM Model

Examining the process of tattoo acquisition, possession, and regret/removal provides further clarity and evidence to, first, dispel some of the stereotypically negative assumptions and, second, note the evolution of what tattoos mean to those who acquire and have them (Madfis & Arford, 2013). We introduce a conceptual model entitled DARRREM (Decision, Acquisition, Reflection, Resolution, Removal, Energized, and More). We offer this to illustrate the emotional components of contemporary tattoo acquisition and possession. Our conceptualization relies heavily on the logic of the Health Belief Model (HBM) (Becker, 1974), as well as the current literature and the author's field experience. We advance the principles of the HBM by generating a cyclical, rather than sequential, model of reflection and decision making that motivates both acquisition and removal. As acquisition is pondered, the cycle moves forward, speeds, slows, or stops completely along the way. This occurs similarly when tattoo wearers consider their satisfaction with, or motivation to remove, their tattoo(s).

(Figure 1 about here)

2.2a. Decision

Virtually everything we present to others – affect, hairstyle, manner of speech, clothing – reflect to some degree or another who we want others to see when they see our "selves." Moreover, when cultural or situational norms constrain our behavior, we often detach from the emotional conflict by putting on a front. (Goffman, 1959; Hochschild, 1980). Choosing to acquire, keep, and/or remove a tattoo exemplifies a dynamic component of individuals' presentations of self. Increasingly, so it seems, individuals express their sense of self by acquiring a tattoo. Norms or emotions, however, may lead others to decide to resist temporarily, or staunchly decide they will never do so. Previous research also indicates that decision-making about tattoo acquisition is deliberative, and mirrors the process of the Health Belief Model (Koch, et al, 2005; Becker, 1974).

2.2b. Acquisition

Opportunity, age, finances, courage, or choosing new friends may motivate, or obviate a decision to get a tattoo (Roberts, Koch, Armstrong, & Owen, 2006; Sanders, 1985). Moreover, reasoned action and deliberation inform such decisions as well (Koch, Roberts, Cannon, Armstrong, & Owen, 2005). Tattoo wearers hope it will produce a positive, unique, personal visible, expression for them (Madfis & Arford, 2013; Tiggeman & Hopkins, 2011).

However, the decision to acquire seems to have become more nuanced over time. For example, Armstrong, Stuppy, Gabriel, and Anderson (1996) and Varma and Lanigan (1996; 1999), surveyed samples of primarily younger tattooed men, showing that many obtained them mainly for external reasons (peer pressure/relationships), with some

&Vidourek, 2013; Koch et al., 2010; Lauman & Derick, 2006; Mayers & Chiffriller, 2007), documented an increased amount of women obtaining tattoos, who acquire their first one at a slightly older age, and for somewhat different reasons. These women respondents were seeking a change in identity, a means of expressing uniqueness, and also viewing acquisition as symbolic of their openness to new experiences (Armstrong, 1991; Taylor & Shelton, 2008).

2.2c. Reflection

Tattoos are contextually relative and emotionally dynamic; once tattooed, the wearer is never the same (Madfis & Arford, 2013; Sanders, 1985). Almost a quarter of American adults who obtain a tattoo, despite their best, deliberate decision-making, report they didn't fully anticipate the product outcome prior to the acquisition (Madfis & Arford, 2013; Sanders, 1985). This personal subjective evaluation ("How is this working out, it seemed like such a good idea at the time"), as with other clothing and fashion accessory products, often hinges upon a continual assessment of meaning to them. This also involves a continual assessment of how others socially react to them and their tattoo(s) (Armstrong, 1991; Armstrong, Roberts, Koch, Saunders, Owen, & Anderson, 2008; Sanders, 1985). In many cases having visible tattoos links wearers, in the minds of others, to a specific subculture that the wearers may or may not find continuously edifying to their overall life experiences (Koch et al., 2010; Sanders, 1985).

2.2d. Resolution

Reflection leads to some level of resolution. For many wearers, they become increasingly satisfied with what they have and seek no more. With product ambivalence

they will adjust their definition and perception of the tattoo to passively accept to live with it (King & Vidourek, 2013; Sanders, 1985). Some resolve that they will have the tattoo removed but then never follow through (Prochaska & Velicer, 1997). Others become more enamored with the experience, the reaction of others, and the identity that emerges, and seek more; some even become 'collectors' who need a clean spot to display more of their tattoos (Vail, 1999). Still others seek removal (Armstrong et al., 1996, 2008). As more tattoos are being acquired by broader segments of American society, those seeking removal can be identified as distinct from those who like what they have done and/or seek to acquire more.

2.2e. Removal

When the wearer experiences enough decisional dissonance (Prochaska & Velicer, 1997) their resolve is usually overt action toward removal. Recent research indicates that tattoo removal is on the increase, concomitant with the increases in acquisition (Armstrong et al., 2008). Of significant note, however, is that those seeking tattoo removal are still more likely to be women. This seemingly parallels other standards of, and analogous stigma associated with, overall standards of appearance and femininity. This feminization of tattoo stigma calls to mind other cultural realities for women. Stigma associated with tattoos might be analogous to fat shaming and pressure for surgical enhancement/alteration, again seemingly more prominent among women than men. Self-acceptance is fluid and its meaning seems different for women than men when deliberating changes. (Blaine & McElroy, 2002; Farrell, 2011).

2.2f. Energized and More?

Tattoo removal reflects more than pigment, design, or location elimination (Armstrong et al., 1996, 2008; Owen et al., 2013); it represents change, sometimes providing an energized type of freedom, as individuals move toward a new, or repristinated sense of self and identity (Armstrong et al., 2008; Madfis & Arford, 2013; Sanders, 1985). Similarly, those who choose instead to acquire more, eagerly anticipate an evolving identity more urgently in the other direction (Atkinson, 2003; DeMello, 2000). Others, who are uncertain about more tattoos will not opt out of the tattoo possession cycle but instead continue to frequently re-evaluate themselves against their circumstances, age, finances, and courage (Sanders, 1985).

2.2g. Synthesis

Classic symbolic interaction links the process of acquisition, reflection, resolution, removal, and reacquisition of tattoos. Ajzen and Fishbein's (1980) Theory of Reasoned Action argues social behavior is deliberative, reflective, and also determinative. As noted with the DARREM model, tattoo respondents deliberate both acquisition and removal (Armstrong et al., 2008; Koch et al., 2010). Goffman's Concept of Impression Management (1959) helps us understand the manner and mechanism for changing identity and sense of self by acquiring, keeping, or removing tattoos. The impact of emotions, as antecedents and outcomes for behavior, further amplify the social psychological grounding for acquiring or removing a tattoo (Thoits, 2983). Findings below illustrate both dynamics in this study of respondents who presented at a tattoo removal clinic.

3. Methods and Results

A descriptive exploratory study was used to gather further cross-sectional data about tattoo acquisition and removal motivation. Exempt study status for this research was granted from the local Institutional Review Board. Participants were recruited from a purposive sample of patrons who volunteered to complete the survey while presenting at a physician-supervised tattoo removal clinic located in a major metropolitan area of the East Coast; the opportunity for respondents to participate lasted approximately four months. The office staff assisted with recruitment and data collection; patrons were informed about the study, provided a Research Information Sheet, given an opportunity to review the survey, and then queried as to interest. Participants could then self-select whether to complete the survey and were assured that personnel performing the removal procedure would not know whether they had or had not participated in the study.

Completed surveys contained limited personal identifying information such as gender, present age, age at first tattoo, years before present tattoo removal, and intentionality of further tattoos. Only group data were analyzed to maintain confidentiality. Frequencies, Cronbach alpha scores, cross tabulations, *t*-test scores, and chi-square analysis were obtained. After the overall data sample was examined, potential differences across age and gender were tested.

The short questionnaire was modified from the Armstrong et al., studies (1996; 2008); this self-report survey tool contained 11 questions, at a 10^{th} grade reading level. A five choice Scantron answer sheet was used to collect both single item and Likert type Scale responses. Inquiry about their reasons for tattoo procurement was with 10 forced choice statements, using items from a scale with previously established reliability of a = 0.86 (Armstrong et al., 1996). Their tattoo removal factors were with 8 forced choice

statements, again using items from a previously established reliable scale of a = 0.80 - 0.92 (Armstrong et al., 1996, 2008).

Embedded into the survey was a four item Self-Attributed Need for Uniqueness (SANU) scale (Lynn & Synder 2002) which provided a foundational perspective for the motivational construct of Need for Uniqueness (NU). This scale was incorporated as multiple tattoo study findings have noted that as part of their identity, tattoos help wearers "feel unique" (Armstrong, 1991; Armstrong et al., 1996, 2004, 2008; Koch et al., 2010; Tiggemann & Hopkins, 2011). Previously established reliability of the SANU when used with body art respondents was a = 0.74 - 81 (Hogan, Rinard, Young, Roberts, Armstrong & Nelius, 2010; Tiggeman & Hopkins, 2011; Young, Armstrong, Roberts, Mello & Angel, 2010).

Few changes were made after a pilot study (N = 16) was conducted to pretest the survey for readability, understandability, and the process of distribution for patrons of the tattoo removal clinic participation. From the pilot study, completion time of the survey was estimated at approximately 15 minutes, or less.

Of the total 340 patrons informed of the study 15% declined, primarily due to personal time constraints. Highlights of the results are summarized in Table 1.

(Insert Table 1 about here)

The final sample for analysis was 289 participants, with 98% in the age range of 18-55 years old. An average participant was Caucasian and 23.5 years of age. More women completed the survey (n = 189, 68%) than men (n = 91, 32%), with nine participants not reporting gender. No significant general gender or age differences were noted.

Tattoo Acquisition

Over half (55%) were in high school when they obtained their first tattoo with the average acquisition at 17.5 years of age. Another 24% obtained them between 19-22 years of age. Seeking differentness/uniqueness and being open to experiences were internal motivations for their tattoo acquisition (Table 1). Disagreement/strong disagreement was high with the motivational items of group affiliation, religion, and improving self image. Again, there were no significant gender or age differences.

Need For Uniqueness (NU)

When inquiring about their self-view of Need for Uniqueness (Lynn & Snyder, 2002), the moderately, very, and extremely preference responses were grouped together so positive and negative viewpoints could be examined. Reliability for the SANU scale during this study was a = 0.86 - 0.87 (total sample and gender). When the four questions were reviewed, almost all responses (differentness (69%), distinctive importance (64%), self- report of NU (54%) had over half of the participants reporting positive agreement; intentional differentness was 46%. Other survey findings validated that many of the respondents had this NU motivational concept, as noted by the highest ranked reason for tattoo acquisition. Need for Uniqueness again was a major purpose for tattoo acquisition (Armstrong, 1991; Armstrong et al., 1996, 2004, 2008; Koch et al., 2010; Tiggemann & Hopkins, 2011).

3.1. Tattoo Removal

Purchase and possession risks (Armstrong, 1991; Sanders 1985) were reviewed, gender differences examined, and major tattoo removal factors summarized. Reliability for this Removal scale ranged from a = 0.73 (whole sample), a = 0.79 (men), and a = 0.71 (women). Most all of the participants (90%) at the time of their tattoo removal were

between 18 – 40 years of age and almost 50% waited from 2 to 8 years (av. 5 years) before acting on their tattoo regrets with removal. Outliers sought tattoo removal in one year, or less (14%), and/ or waited for 15 years, or more (16%).

Again, stigmatization seemed to predict seeking tattoo removal (Armstrong et al., 2008). While there were no significant age differences, effects of gender were noted. This dynamic was more strongly felt by women (Armstrong et al., 2008). Within the total sample there was an almost equal agreement (46.5%) and disagreement (46.1%) for the factor "having to hide and/or cover the tattoo all the time," with more women significantly agreeing/strongly agreeing (P = 0.004). Women also significantly agreed/strongly agreed with two other removal factors of "I don't like it anymore" (P = 0.015), and "the tattoo didn't help self-image and/or esteem" (P = 0.004).

3.2. Post Removal

Decisional conflict (Prochaska & Velicer, 1997), possession time, as well as gender and age differences were present when inquiring about further interest in obtaining another tattoo (s); almost half of the respondents (47%) replied "no", 30% said "yes," and 22% were "uncertain." Patrons overall who had answered "it seemed the thing to do" (P = 0.003) and "for the heck of it" (P = 0.005) for procurement were significantly not going to pursue further tattoos; this non-pursuit of further tattoos was also significantly present in women who acknowledged these responses (P = 0.014).

Men were the likely candidates to significantly pursue further tattoos (P = 0.04); this happened more with 18-25 year olds (59%, P = 0.006) who had their tattoo for a year, or less. They had more plans to get another (40%), and/or considering it (28%). In contrast, those men who had their tattoos for 9 or more years, (P = 0.016), or were in the

41-55 year old bracket were significantly not (80%, P = 0.001) likely to pursue more. Here further interest in obtaining a post-removal tattoo seems associated with more reasoned action rather than the more haphazard "seemed the thing to do" motivational impulse.

4. Discussion and Implications

Despite a cross-sectional respondent pool that could produce inaccurate recall or inflation, this is the largest sample of tattoo removal respondents studied to date (Armstrong et al., 1996, 2008). These data mirror the dynamics within the DARREM Model illustrating contemporary tattoo possession experience and the classic logic of the Health Belief Model (Becker, 1974; Koch et al., 2005). Similar to previous research, initial decision making was emotional, deliberative and reflective; respondents weighed a cost-benefit analysis prior to tattoo acquisition, and still incorporated the major purpose of uniqueness (Armstrong, 1991; Armstrong et al., 1996, 2004, 2008; Koch et al., 2005, 2010; Tiggemann & Hopkins, 2011).

In general, those seeking removal reported spending substantive moments of reflective emotion when making the decision to undergo a procedure at least as rigorous, painful, time consuming, and expensive as obtaining the tattoo in the first place (Koch et al., 2010). Yet for women seeking removal, a power-dynamic came into play. Rather than the tattoo being helpful to their identity as originally planned, many of the respondents, through emotional reflection, came to believe they couldn't fully control the tattoo interpretation and representation. Many seemingly felt stigmatized (Armstrong et al., 2008; Madfis & Arford, 2013).

Moreover, and perhaps most noteworthy in this study, are the comparisons here on the age at which removal was sought, and the length of time between acquisition and removal. Compared to the results in the Armstrong et al., study (2008), these participants were 20% younger (30 vs. 23.5) and waited only half as long (10 vs. 5 years) before seeking removal. If stigma is in play here, this mirrors the dynamic noted by Hochschild (1983) study of flight attendants who, when constrained by emotions meeting changing norms, chose to find ways to convey conformity, even if doing so went against their more authentic desires.

Increasingly it seems reasoned action prompts both acquisition and removal. The stereotypical individual who "wakes up with a hangover and a tattoo" is hard to find in empirical research. The replication of the gender differences in this study – women seeking more tattoo removal – and the implication that women more than men seem to experience and respond to stigma and repercussions from having their tattoo(s), provides an entrée for future research of this type in the context of gender identity and the body. We are becoming increasingly convinced that change is in the offing.

Hochschild (1983) noted most research to that point on the sociology of emotions tended to measure them as dependent variables. It was suggested future research may focus on studying emotions ad intervening or independent variables. We believe that time may be now. Popular culture, recent research, and the revival of politics of gender suggest tattoo removal may become less common as women begin more openly emotional ownership of their bodies.

Lena Dunham and Amy Schumer, among others in the entertainment industry, have openly ridiculed fat-shaming with prominent emotional discourse. They are

challenging women to "feel" whole inside their own bodies and change their world-view

– and perhaps shatter norms – with emotional stories.

Koch et al (2015) suggest the emotions leading to tattoo acquisition may become strategic in re-capturing a sense of self and power. Cancer and suicide-attempt survivors are expressing grief, courage, and hope when they take control of their own inner narratives with restorative and imaginative tattoos. Thompson (2015) provides a powerful ethnography illustrating a transition for women who are heavily tattooed. She recounts story after story of women overcoming stigma and raising their sense of self to empowerment by acquiring more and more tattoos. Using also her own experience with multiple tattoo acquisition, she reports, "(W)omen (come to) view their body art as beautiful, as making themselves more beautiful." (Thompson 2015:20).

Finally, there is the body politic. There appears to be a growing rejoinder to decades of quiet acquiescence, by women, to harassing or abusing men. As women's tattoos transition from marks of stigma to images of empowerment, perhaps "#MeToo" will become not only a slogan, but a symbol of power - perhaps written in permanent ink -- and also embodied and legitimated in marches and movements. Full expression of self - and the full range of emotions for self expression, engenders courage and empowers action – moving forward and beyond stigma and acquiescence.

References

Ajzen, I., & Fishbein, M. (1980). *Understanding attitudes and predicting social behavior*. Englewood Cliffs, NJ: Prentice-Hall.

Armstrong, M.L. (1991). Career-oriented women with tattoos. Formerly *Image*, now the *Journal of Nursing Scholarship*. 23(4), 215-220.

Armstrong, M.L., Roberts, A.E., Owen, D.C., & Koch, J.R. (2004). Toward building a composite of college student influences with body art. *Issues of Comprehensive Pediatric Nursing*. 27, 277-295.

Armstrong, M.L., Stuppy, D.J., Gabriel, D.C., & Anderson, R.R. (1996). Motivation for tattoo removal. *Archives of Dermatology*. *132*(4), 412-416.

Armstrong, M.L., Roberts, A.E., Koch, J.R., Saunders, J.C., Owen, D.C., & Anderson. R.R. (2008). Motivation for contemporary tattoo removal: A shift in identity. *Archives of Dermatology*. 144(7), 879-884.

Atkinson, M. (2003). *Tattooed: The Sociogenesis of a Body Art*. Toronto: The University of Toronto Press.

Becker, M. H. (Ed.). (1974). *The Health Belief Model and Personal Health Behavior*. San Francisco: Society for Public Health Education, Inc.

Blaine, B., & McElroy, J. (2002). Selling stereotypes: Weight loss infomercials, sexism, and weightism. *Sex Roles*, 46(9-10), 351-357.

Braveman, S. (2012). The Harris Poll. One in five US adults now has a tattoo. Retrieved 5-15-2016 from www.harris Interactive.com.

Carroll, S. T., Riffenburgh, R. H., Roberts, T. A., & Myhre, E. B. (2002). Tattoos and body piercings as indicators of adolescent risk-taking behaviors. *Pediatrics*, *109*(6), 1021-1027.

Drews, D. R., Allison, C. K., & Probst, J. R. (2000). Behavioral and self-concept differences in tattooed and non-tattooed college students. *Psychological Reports*, 86, 475–481.

DeMello, M. (2000). *Bodies of inscription: A cultural history of the modern tattoo community*. Durham, NC: Duke University Press.

Farrell, A.E. (2011). Fat Shame: Stigma and the fat Body in American Culture. New York University Press.

- Goffman, E. (1959). *The Presentation of Self in Everyday Life*. New York: Random House.
- Hochschild, Arlie. (1983). *The Managed Heart*. Berkeley: University of California Press.
- Hogan, L., Rinard, K., Young, C., Roberts, A.E., Armstrong, M., & Nelius, T. (2010). A cross-sectional study of men with genital piercings. *British Journal of Medical Practitioners*, 3(2), 315-322.
- King, K.A., & Vidourek, R.A. (2013). Getting inked: Tattoo and risky behavioral involvement among university students. *Social Science Journal*, *50*(4), 540-546.
- Koch, J. R., Roberts, A. E., Armstrong, M. L., & Owen, D. C. (2015). Tattoos, gender, and well-being among American College Students. *The Social Science Journal*, *52*(4), 536-541.
- Koch, J. R., Roberts, A. E., Armstrong, M. L., & Owen, D. C. (2010). Body art, deviance, and American college students. *The Social Science Journal*, 47(1), 151-161.
- Koch, J. R., Roberts, A. E., Cannon, J. H., Armstrong, M. L., & Owen, D. C. (2005). College students, tattooing, and the health belief model: Extending social psychological perspectives on youth culture and deviance. *Sociological Spectrum*, *25*(1), 79-102.
- Laumann, A.E., & Derick, A.J. (2006). Tattoos and body piercings in the United States: A national data set. *Journal of the American Academy of Dermatology*, 55, 413.
- Lynn, M., & Snyder, C.R. (2002). Uniqueness seeking. In C.R. Snyder & S. J. Lopez (Eds). *Handbook of Positive Psychology*. New York: Oxford University Press. 395-410.
- Madfis, E., & Arford, T. (2013). The dilemmas of embodied symbolic representation: Regret in contemporary American tattoo narratives. *Social Science Journal*. *50*, 547-556.
- Maloney, P.A., & Koch, J.R. (Forthcoming). The college student's religious tattoo: Respect, reverence, remembrance. *Sociological Focus*.
- Mayers, L., & Chiffriller, S. (2007). Sequential survey of body piercing and tattooing prevalence and medical complication incidence among college students. *Archives of Pediatric Adolescent Medicine*, 161, 1219.
- Owen, D.C., Armstrong, M.L., Koch, J.R., & Roberts, A.E. (2013). College students with body art: Well-being or high-risk behavior? *Journal of Psychosocial Nursing*. *51*(10), 20-28.

Prochaska, J.O., & Velicer, W.F. (1997). The Transtheoretical Model of Health Behavior Change. *American Journal of Health Promotion*, 12(1), 38-48.

Roberts, T.A., Auinger, P., & Ryan, S.A. (2004). Body piercing and high-risk behavior in adolescents. *Journal of Adolescent Health*. *34*, (3), 224-229.

Roberts, A. E., Koch, J. R., Armstrong, M. L., & Owen, D. C. (2006). Correlates of tattoos and reference groups. *Psychological Reports*, *99*(3), 933-934.

Roberts, T. A., & Ryan, S. A. (2002). Tattooing and high-risk behavior in adolescents. *Pediatrics*, 110(6), 1058-1064.

Sanders, C. (1985). Tattoo consumption: Risks and regret in the purchase of a socially marginal service. In E. Hirschman and M. Holbrook (eds). *Advances in Consumer Research*. Provo, UT: Association for Consumer Research, 17-22.

Statistic Brain. (2013). Tattoo statistics. Retrieved 5/15/2016 from http://www.statisticbrain.com/tattoo-statistics.

Tate, J.C., & Shelton, B.L. (2008). Personality correlates of tattooing and body piercing in a college sample: The kids are alright. *Personality and Individual Differences*, 45, 281-285

Taylor, P., & Keeters, S. (2010). Pew Research Social & Demographic Trends. Retrieved 5/15/2016 from http://www.pewsocialatrends.org/2010/02/24/millennials-confident-connected-open

Thompson, Beverly Yuen, (2015). Covered in Ink: Tattoos, Women, and the Politics of the Body. Washington Square, NY: New Yoro University Press.

Thoits, Peggy. (1989). The sociology of emotions. *Annual Review of Sociology, 15*, 317-342. Tiggemann, M., & Hopkins, L.A. (2011). Tattoos and piercings: Bodily expressions of uniqueness. *Body Image. 20*(2), 245-250.

Varma, S., & Lanigan, S.W. (1996). Motivation for tattoo removal. *Archives of Dermatology*. 132(12), 1516.

Varma, S., & Lanigan, S.W. (1999). Reasons for requesting laser removal of unwanted tattoos. *British Journal of Dermatology*, 140, 483-485.

Vail, D. A. (1999). Tattoos are like potato chips ... You can't have just one: The process of becoming and being a collector. *Deviant Behavior*, 20(3), 253-273.

Young, C., Armstrong, M.L., Roberts, A.E., Mello. I., & Angel, E. (2010). A triad of evidence for care of women with genital piercings. *Journal of the American Academy of Nurse Practitioners*. 22(2), 70-80.

Figure 1. Illustrating components of contemporary tattoo possession

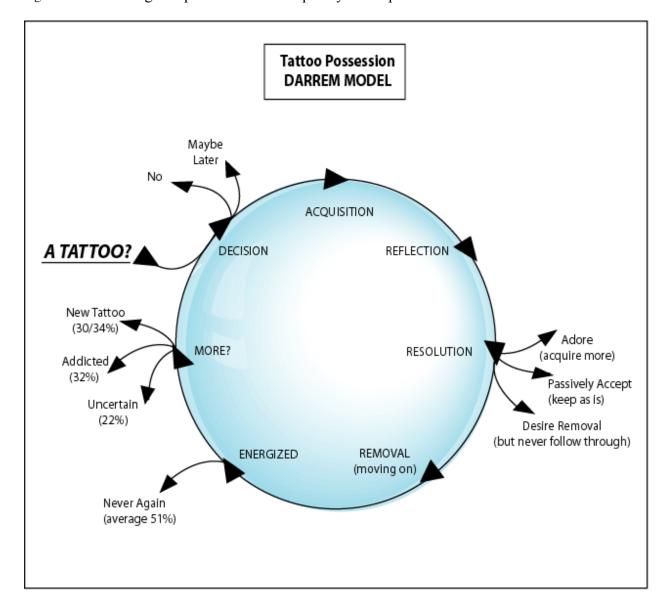


Table 1. Procurement and Motivation For Tattoo Removal

Table 1. Floculement and Worlvation For Tattoo Kemovai		
Variable	Armstrong et al., 2008	Present Study
Location	United States	United States
Study participants	N = 196	N = 289
Gender	Women (69%)	Women (68%)
Age Tattoo	16-23 years	16-22 years
acquisition		
Age tattoo removal	30 years	23.5 years
Time before removal	10 years	5 years
After removal, more	34%	30%
tattoos?		
Tattoo purpose	Helped me feel	Be different/unique
	unique	Seemed thing to do
	Feel independent	For heck of it
	Made life	
	experiences stand	
	out	
Tattoo removal	Got tired of it	Don't like it anymore
factors	Had to hide tattoo	Poor design/location
	Just grew up	Moving on with life