Marked Difference: Tattooing and its Association with Deviance in the United States

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marked difference: tattooing and its association with deviance in the United States

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Despite historical associations with deviance and marginality, tattooing is practiced by a diverse population in the United States today, leading some to argue that it has grown beyond its negative associations. Drawing on a nationally representative data set (n = 500) comprised of both tattooed and non-tattooed respondents, this analysis examines the social characteristics of those who are tattooed and the associations of tattooing with deviant behavior. Findings indicate that while tattooing has developed a broad demographic appeal, there remain some strong associations with deviance, particularly criminality. Specifically, highly visible placement of tattoos appears to be most strongly associated with deviant behaviors.

The subjectivity of deviance, as well as the fluid nature of what is and is not considered deviant at any given time, is a fundamental insight of sociology. A prime example of this is the practice of tattooing. Consistent with Becker (1963), the
history of tattooing in the United States reveals that the labeling of a behavior as deviant is contingent on the assessments and subsequent reactions of others. Cultural evaluations of behavior as deviant shift as the prevailing norms change and evolve. In the United States, tattooing has been both popular and stigmatizing, subject to the whim of fad and fashion (Kosut 2006a). The past two decades have seen tattooing experience a resurgence of popularity and mainstream attention, especially in the United States (DeMello 1995). Indeed, academics also have taken notice of the cultural changes surrounding tattooing, moving away from the traditional characterization of the tattoo as a *de facto* indicator of deviance and instead focusing on the tattoo as an expression of identity (Atkinson 2002; Pitts 1998). Others have even noted the emerging view of tattoo as a serious art form (Vail 1999a,b). This analysis examines tattooing as a practice that, in recent history, has been closely associated with deviant behaviors and subgroups. The changing cultural uses of tattooing, as well as shifting perceptions of tattooed individuals, reinforces our understanding of deviance as temporally and spatially contextual. This analysis empirically considers how those changes have affected our overall understanding of the practice of tattooing in addition to how, and to what degree, the status of certain practices transitions between deviance and normative acceptability.

Since it first achieved a degree of mainstream popularity in the West, particularly Western Europe and the United States, in the late eighteenth century, tattooing has at times been considered fashionable and exotic, particularly among the upper classes (Bradley 2000). More often than not, however, it has been evaluated as overwhelmingly deviant. Associated with sailors (Bradley 2000), criminals (van Dinter 2005; Govenar 2000), “savage” races (Oettermann 2000), and circus entertainers (Mifflin 1997), tattooing was firmly positioned as the domain of those deemed socially undesirable.1

1In his discussion of the culture of deviant groups, Becker (1963) notes that “though their activities are formally within the law, their culture and way of life are sufficiently bizarre and unconventional for them to be labeled as outsiders by more conventional members of the community” (79). That tattooing was popular among and practiced by those “bizarre and unconventional” groups greatly contributed to its continued stigmatization by the larger community.
Those in the medical community have suggested it as an indicator of low self-esteem (Braithwaite et al. 1998), drug and alcohol abuse (Braithwaite et al. 2001), psychopathology and aggressive personality (Manuel and Retzlaff 2002), and impulsiveness, deviant sexualities and sexual orientations, or any variety of “underlying psychiatric conditions” (Raspa and Cusack 1990:1481). Given such negative social connotations, there emerged in the United States a thriving “deviant subculture”—a culture that provides support for those who are tattooed and that attempts to re-define the tattoo as a positive characteristic (Sanders 1990). The mining of these subcultures by popular tastemakers, often marketers searching for the next big trend (see Hebdige 1979; Sanders 1990), is partially responsible for the heightened visibility of tattooing and perhaps has led to a greater acceptance and understanding of body art. The current upsurge in the popularity of body art has led to the increasing commodification of tattooing and situated it as an act of consumption (Kosut 2006b). Indeed, while some artists and aficionados have interpreted this growth in popularity as diminishing the uniqueness of tattooing, reducing it to “an entirely mundane, mainstream practice” (DeMello 2000:191), the recent trend toward commodification presents a useful lens through which the changing status of tattooing might be situated.

In this article, I build on prior sociological research on tattooing, examining the transition from deviant practice to a relatively accepted, or at least a more widely practiced, avenue of self-expression. Specifically, the article examines the degree to which tattooing has been integrated into mainstream society and to test the claim that tattooing is “not just for bikers” (DeMello 1995). As Kosut (2006a) has noted, one of the primary flaws in much of the prior research on tattooing has been the use of psychiatric patients or prison inmates as a research population. Findings are then generalized to all tattooed people drawn from a target population “already diagnosed and labeled as psychopathological, or were convicted of committing a crime” (Kosut 2006a:81). Additionally, some work details the complexity of tattooing cultures (Sanders 1988; Atkinson 2003a), provides ethnographic insight into the tattoo community (DeMello 2000), and frames body modification as cultural resistance and a mode of accomplishing individual identity (Atkinson 2002, 2003b; Pitts 2003).
Much of the prior sociological work on tattooing uses a variety of qualitative methods. This article is designed to complement this body of literature as well as overcome limitations of prior survey work that draws from institutionalized populations. Instead, I draw from a nationally representative dataset pertaining to body modification practices and examine the association of tattooing with both social background status and deviance. This analysis represents a novel approach to the study of tattooing for several reasons. First, the data are drawn from a sample of the general population, a departure from much of the survey research done on tattooing that typically relies on institutionalized populations, or more commonly, college students. Second, this broad survey approach allows for comparison between both tattooed and non-tattooed populations as well as within tattooed populations, a level of analysis that is often lost in purely qualitative work. Finally, this piece adds a quantitative dimension to the expansive body of qualitative work on tattooing. I conclude by discussing the implications relative to the substantive area of body modification in general and to how we define and address deviant practices more broadly.

TATTOOING: DEVIANT PRACTICE OR FASHIONABLE ART?

The practice of permanently marking the body can be found across cultures and historical contexts, often as normatively sanctioned, socially integrating customs (see Rubin 1988a; Caplan 2000a; Gilbert 2000). After the re-introduction of tattooing to Europeans in the eighteenth century, the practice fluctuated between fad and novelty, but was not regarded as an overt sign of deviant or criminal inclinations until the end of the nineteenth century (Bradley 2000). By the beginning of the twentieth century, attitudes toward tattooing were being influenced by the socio-biological perspectives of criminologists such as Lombroso who effectively pathologized tattooing as a primitive and degenerate trait of criminals and the lower classes (Bradley 2000; Favazza 1996).

Lombroso advanced the notion that deviance, criminality in particular, was a hereditary condition and could be discerned through the observation of atavistic physical traits. Specifically, Lombroso argued that the criminal represented
an evolutionarily regressive specimen that could be identified by his "small and deformed skulls, greater height and weight, light beards, crooked noses, sloped foreheads, dark skin, eyes, and hair, large ears, protruding jaws, less muscular strength, and little sensitivity to pain" (Gibson 2002:22). It was this supposed lessened sensitivity to physical pain that explained the propensity of criminals to be tattooed (Caplan 2000b) and also "constituted the exterior sign of inward moral obtuseness" (Gibson 2002:22). Although Lombroso's ideas of hereditary criminality were disproved and fell out of favor, the association of tattooing with criminals and other marginalized groups remained.

Despite the efforts of European criminologists to link tattooing with atavism and degeneracy, as well as a traditional association with criminality in America (Bradley 2000), tattooing quickly became vogue among the American and British upper-classes in the late 1880s (Bradley 2000; Fisher 2002). Oettermann (2000) also notes the popularity of tattoos among soldiers during the Civil War as expression of patriotic sentiment. These seemingly contradictory attitudes toward tattooing exemplify the paradoxical trajectory of tattooing as both fashionable and transgressive. This brings to the forefront the power dynamics involved in the defining of deviant behavior. As Sanders (1990) notes "power insulates one from the reactive consequences of behavior which has the potential of being socially discrediting" (4). So while tattooing was the height of fashion at the close of the nineteenth century, for members of the lower classes, being tattooed remained a stigmatizing sign of deviance (Fisher 2002). With the invention of the electric tattoo machine, tattoos became relatively more accessible and their popularity grew among the lower classes and those already labeled as social deviants, diminishing the interest of the fashionable elite (Fisher 2002). The increasing association of tattoos with marginal social groups cemented its status as an indicator of deviance so that "by the mid-twentieth century tattooing was firmly established as a definedly deviant practice in the public mind" (Sanders 1989:18).

Tattooing as a practice and industry began a dramatic shift in the 1960s with advances in technique and style as well as a renewed public interest. The "tattoo renaissance"
encompasses a diversification and improvement of artistic styles, a new openness to experimenting with design, an increase in the amount of custom work performed, a professionalization of standards and attention to sanitation of equipment (Rubin 1988b). There was also a marked demographic shift that saw an increase in female clients, professionals, and those with more disposable income with greater interest in the compositional aesthetics of the tattoo (Rubin 1988b; Hewitt 1997). This was in sharp contrast to predominantly white, blue-collar working-class clientele of previous decades, along with the requisite military personnel and criminals, who got tattoos of the standardized “flash” designs that lined the walls of tattoo studios (Steward 1990). Additionally, many tattooists have begun defining themselves as artists (Sanders 1989) whose output is often evaluated as unique pieces of custom art created for clients (Vail 1999a, 2000; Irwin 2003). The concurrent transformations of the tattoo industry in conjunction with the larger cultural changes that led to increased interest in tattooing by a wider demographic helped to move body art closer to mainstream acceptance and away from its presumed association with deviance.

As the “tattoo renaissance” progressed into the 1980s and 1990s, marking the body has expanded to a vast array of social groups. No longer the exclusive domain of social outcasts, tattooing is “now a floating signifier of a full panorama of social statuses, roles, and identities” (Atkinson 2004:125). Contemporary frameworks for interpreting the tattoo have enlarged beyond the simple heuristic of deviance. DeMello (2000) suggests that tattooing is often imbued with a range of spiritual meanings and notions of reconnection with the primitive characterized by Atkinson and Young (2001) as “a new era of cultural expression and ideological representation through body manipulation” (118). Body modification is also used as a means of asserting individual identity by transgressing normative expectations; some have noted the use of female body modification to reclaim the body from abuse or illness through the processes of body marking (Pitts 1998, 2003; Mifflin

2For a more detailed perspective on the Modern Primitive movement, see Cummings (2001); Klesse (1999); Pitts (2003); Atkinson and Young (2001); Rosenblatt (1997); Vale and Juno (1989).
1997). These collective reassessments have contributed to the transition of tattooing away from a highly deviant exploit and recontextualized it as a more commonly practiced and potentially acceptable avenue for self-expression.

Gender has played a dominant role in recent scholarship on body modification, in part because tattooing has traditionally been understood as a male pursuit. Tattoos have long been the domain of the working class, the serviceman, and the criminal; an outward sign that, according to Steward (1990) “leaves no doubt as to one’s masculinity” (57). Braunberger (2000) addresses the tension of being tattooed for women who are simultaneously asserting their own autonomy and transgressing gender norms and expectations. According to Pitts (1998), transgressive body modifications can signify a reappropriation of the body and rejection of gendered constraints. Indeed, tattooing often confounds normative euro-centric aesthetics, and for women “tattooing can also be a rather flamboyant way to violate diffuse cultural rules about the gendered body” (Atkinson 2002:228). Whatever the purpose, the growth of tattooing among women has exploded during the past quarter-century, with some research seeing women account for nearly half of tattoo clients (Laumann and Derick 2006).

MEDICAL AND PSYCHOLOGICAL PERSPECTIVES

Although the prevailing attitudes toward tattooing may have shifted and social scientists now note the positive, pro-social, socially integrating function of body modification, others within the medical and psychological fields remain skeptical. Indeed, many remain unconvinced that body modifications are performed in a sanitary environment and that recipients are prepared for the lasting effects. In an article on the prevalence of tattooing among college students, Armstrong et al. (2002) suggest that “education should be aimed at dissuading the prevalence and perceived value of the product in a matter-of-fact manner while incorporating the major barriers (permanent marks, costs, and hepatitis) in a young adult perspective for decision making” (322). Other work has focused on the social risk associated with permanently marking the body, often finding a greater potential for women with tattoos to be stigmatized given the long-standing association of tattooing
as a masculine behavior (Hawkes et al. 2004). Additionally, Stirn et al. (2006) note that both body piercing and tattooing “create a lasting body modification, which counters, generally speaking, the established norms of beauty” (531).

Several studies have been undertaken to discern a “profile” of those who are, or are likely to have, some type of body modification. Often, body piercing is included with tattooing under the rubric of “body modification” or “body art” due to these practices respective popularity and tentative association with other risk-taking behaviors (Carroll et al. 2002; Huxley and Grogan 2005; Millner and Eichold 2001). Risk-taking behaviors that are often associated with body modification include the use of alcohol, cigarettes, and other drugs (Greif et al. 1999), unsafe sex practices (Burger and Finkel 2002), gateway drug use, suicidal tendencies, and a propensity for violence among adolescents with body modifications (Carroll et al. 2002). Other literature has noted that being tattooed or pierced is not necessarily related to negative or high-risk health behaviors but respondents often had a poor judgment of sanitary conditions at body modification studios (Huxley and Grogan 2005). There is also support for the view that social factors, particularly supportive friends and family, contribute to individuals having a greater interest in pursuing body modification (Armstrong et al. 2004; Koch et al. 2005). Overall, there tends to be skepticism within the medical and psychological communities toward the idea that people engage in body modification practices relatively free of some social or psychological maladjustment.

Because of its historical relationship with criminals, and because there exists a separate culture of prison tattooing, the implications of tattooing among prisoners is another common theme in much of the psychological literature. DeMello (1993) notes that prison tattoos are qualitatively different from those done by professionals, owing both to the method of execution and style.³ Tattoos are used within

³Both aspects, however, seem to be technological issues. Because prisoners typically use homemade machines of varying levels of sophistication and only have access to commercial inks (India ink or ink from ball point pens), their output generally has a distinctive look that differentiates it from the work done by professionals on the outside (see DeMello 1993:10–11).
the institutional setting as a means of communicating status, ethnicity, and gang affiliations to create what DeMello (1993) terms the “convict body,” where the tattoos themselves become signifiers of the individual’s identity as a convict. Other analyses of prison tattooing have been less generous in assessing the motives of inmates. Manuel and Retzlaff (2002) argue that “there appear to be quite a number of psychopathologies associated with inmate tattooing” that include “classic criminal personality types as well as more neurotic types” (528). In addition to finding support for the notion that tattoos might indicate some degree of impulsiveness (see also Raspa and Cusack 1990) or negative self-esteem, Manuel and Retzlaff also concede that “tattoos may also simply indicate boredom” (529). Finally, in a study of adolescent detainees, Braithwaite et al. (2001) found a significant relationship between alcohol use, drug use, and gang affiliation and being tattooed.

Despite widespread advances in sterilization practices among commercial tattoo establishments, some medical research has suggested that tattooing operates as a vector for a variety of blood-borne diseases, particularly Hepatitis C. Haley and Fischer (2001) found that having a tattoo “carried a high, independent relative risk” (141) of Hepatitis C transmission and were accountable for twice as many infections as injection-drug use. Indeed, Haley was quoted in Franz (2001) as stating that tattooing “may have been the largest single contributor to the nationwide epidemic of this form of Hepatitis” (307). Furthermore, Braithwaite et al. (1999) note that “tattooing has been recognized as a risk factor for the transmission of Hepatitis B, Hepatitis C, [and] HIV” (461), among other blood-borne diseases, whereas Armstrong et al. (2002) suggests that Hepatitis C transmission be included as a major barrier to tattooing when educating college students about the risks of body art. However, in a study by Greif et al. (1999) only one respondent out of a sample of 561 college students reported contracting hepatitis after being tattooed. The Centers for Disease Control has also stated that “although some studies have found an association between tattooing and HCV infection in very selected populations, it is not know if these results can be generalized to the whole population” and that “no data exist in the United States
indicating that persons with exposures to tattooing alone are at increased risk for HCV infection."

As tattooing becomes more widely practiced among diverse populations, particularly in the United States, researchers have often pointed to the commodification of sub-cultural practices as one of the primary engines driving this surge in popularity. Hebdige (1979) argues that cultural forms are co-opted through what he calls the "commodity form" where there is a "conversion of subcultural signs (dress, music, etc) into mass-produced objects" (94). This co-option indicates the absorption of some transgressive (i.e., either new or innovative, or simply clashing with accepted norms) cultural form into the mainstream. Similarly, Frank (2002) suggests that there is a neutralizing of innovative cultural forms, noting that for the consumer society "its taste for self-fulfillment and its intolerance for the confines of tradition now permitting vast latitude in consuming practices and lifestyle experimentation" so that "consumerism is no longer about 'conformity' but about 'difference'" (319). This same argument has been applied to tattooing, emphasizing the commodification of tattoo as simultaneously fashionable and rebellious. Indeed, Pitts (2003) speaks to this process of commodification, noting that "some of the practices, especially tattoos and body piercings, were appropriated by MTV and the catwalk, and by the late 1990s, these had become wholly acceptable, if alternative and hip, forms of fashion" (12). Kosut (2006b) is more succinct in this analysis, observing that while tattoos "have clearly undergone a process of commodification" as they have been "pulled from their sub-cultural roots (blue-collar, deviant, underground) and replanted in the mainstream" they nevertheless "have a certain aura of cool and rebellion about them" (1043). In light of such observations, it seems reasonable to suggest that the growing popularity of tattooing is due, in part, to this mainstream commodification.

Given the possibility of a "tattoo renaissance" and the widening array of individuals who become tattooed (Rubin 1988b; Hewitt 1997; DeMello 2000), it seems reasonable to

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4From the CDC website on viral Hepatitis, available at (http://www.cdc.gov/ncidod/diseases/hepatitis/c/tattoo.htm).
expect that those who are tattooed will be more educated and have a higher, and therefore disposable, income. However, as tattooing currently enjoys a surge in popularity among college students (Armstrong et al. 2002, 2004; Koch et al. 2005), tattooing is likely to occur with greater frequency among a younger demographic. In light of these findings, it appears that while some characteristics of tattooed populations have retained their salience, others have shifted over time.

H1: *Higher educational attainment will be positively related to having a tattoo in the contemporary era.*

H2: *Higher income levels will be positively related to having a tattoo in the contemporary era.*

H3: *Age will be negatively related to having a tattoo.*

Similarly, although tattooing has traditionally been perceived as a male-dominated pursuit, recently, more women have been modifying their bodies through tattooing and body piercing for a variety for personal, spiritual, and political purposes (Atkinson 2002; Mifflin 1997; Pitts 1998, 2003). Additionally, Laumann and Derick (2006) found that tattooing was equally common among both men and women.

H4: *There should no longer be a significant relationship between gender and whether one has a tattoo.*

Several researchers have also noted the influence of friends and family on whether or not an individual becomes tattooed (Armstrong et al. 2004). Others have found that religious affiliation and employment, as measures of social integration, are negatively associated with being tattooed (Stirm et al. 2006). As such, it appears that social connections play a distinct role in the decision to be tattooed.

H5: *Having friends or family who are tattooed will be positively associated with respondents being tattooed.*

H6: *Likewise, being employed will be negatively associated with being tattooed.*

H7: *Religious affiliation will also be negatively associated with being tattooed.*

Drawing from the previous research on tattooing—research that notes historical and contemporary associations with criminal behavior as well as that denoting tattooing’s
perhaps greater levels of social acceptability over time—I expect that being tattooed is no longer a valid indicator of criminal behavior. Additionally, if tattooing is indeed gaining broader social acceptance, or at least being practiced more widely, then it is expected that tattooing will also have little or no relationship with other traditionally deviant practices.

H8: Having served time in jail will not be a significant predictor of whether an individual is tattooed.
H9: Similarly, recreational drug use will not be a significant predictor of whether an individual is tattooed.
H10: Alcohol use will not be a significant predictor of whether an individual is tattooed.

However, taking into account DeMello’s (1993) arguments that tattoos serve a specific social function within prisons, that prison tattoos are qualitatively different from professional tattoos, and that visible prison tattoos “particularly those on the face, neck, and hands” (10) mark one in an external fashion and because tattoos in those areas are more likely to be socially stigmatizing in general, I expect that:

H11: Having served time in jail will be a significant predictor of whether an individual has a tattoo on their face, neck, or hands.

Finally, while some research has found tattooing a viable means of transmitting Hepatitis C (see Haley and Fischer 2001), the CDC has indicated that there is no reliable evidence that tattooing is a significant risk factor for the general population.

H12: Having a tattoo will not be significantly associated with being infected with Hepatitis C.

DATA AND ANALYSIS

The data for this study were collected via telephone survey administered through the Public Opinion Laboratory at Northern Illinois University, between February and April of 2004. The nationally representative sample is composed of 500 adults between the ages of 18 and 50 years old living
within the contiguous United States. Respondents were
selected and contacted using random digit dialing. This data-
set was originally collected as part of a health-oriented
research project to “provide US tattooing and body piercing
prevalence, societal distribution, and medical and social
consequence data” (Laumann and Derick 2006:413). Addi-
tionally, this sample allows for a reasonable comparison
between tattooed and non-tattooed respondents. The ana-
lyses that follow focus specifically on the sociological impli-
cations of tattooing within the United States, the transition-
ing demographics, and the ostensible shift of tattooing from
an overwhelmingly deviant to a more acceptable, or at least
tolerated, social practice.

Several nominal level variables with multiple categories
were recoded into dichotomous variables. The six categories
for marital status were recoded into “ever married” and
“never married”; race was recoded into “white” and “not
white,” as whites tend to be tattooed at higher rates than
other races (Armstrong et al. 2004; Millner and Eichold
2001); and employment status was recoded into “currently
employed” and “not employed.” To create more accurate
comparison categories, dummy variables were created for
marital status (ever married $= 1$), gender (male $= 1$), race
(white $= 1$), employment status (employed $= 1$), and hepatitis
status (Positive for Hepatitis B or C $= 1$).

In order to compare the tattooed with those not tattooed,
and in physical areas that are highly visible and carry a
greater risk of negative social sanction, I created a stigma
proxy. Drawing on DeMello’s (1993) observation that the
face, neck, and hands are common locations for prison
tattoos, and the characterization of facial tattoos as “ever-
more-subversive” (DeMello 2000:192), the stigma proxy
variable includes all respondents who indicated that they
were tattooed on the face, neck, fingers, and hands. Indeed
this is consistent with the association of tattoos on the hands

5The original categories for marital status included “married,” “living with a partner,“
“divorced/separated,” “widowed,” “never married,” and “something else”; for race
“Black/African American,” “White/Caucasian,” “Asian/Pacific Islander,” “Native
American/Alaskan Native,” and “Some other race”; for employment status “employed
full-time,” “employed part-time,” “not employed,” “student,” “retired,” “keeping
house,” and “something else.”
and face with prisoners or criminals (e.g., Govenar 1988; Steward 1990; Bradley 2000) and thus, likely to carry a greater level of social sigma than an easily concealed or more traditionally placed tattoo. This variable was designed to test whether tattoos in these highly visible areas remain a valid indicator of social deviance while tattooing overall experiences a relative increase in social acceptance.

Similarly, I constructed a variable for all respondents who reported testing positive for either Hepatitis B or Hepatitis C. Because both strains of hepatitis are blood-borne pathogens, and because some of the literature suggests that tattooing might be responsible for the spread of at least Hepatitis C, this variable is used to test whether there is a relationship between being tattooed and testing positive for either Hepatitis B or C.

TATTOOING AND SOCIAL STATUS

Findings counter some of the assumptions about the degree to which tattooing has changed. Table 1 shows the social characteristics of both tattooed and non-tattooed respondents. Within the entire sample (n = 500), 120 respondents report having a minimum of one tattoo with men and women being tattooed at roughly equivalent levels.

Of those who are tattooed, whites account for nearly 72% of the sample, although the percentage of tattooed Black/African–American respondents is slightly higher than non-tattooed respondents, whereas income and education levels are distributed relatively evenly across categories. The majority of tattooed respondents (73.7%) are employed. Interestingly, only 13% of tattooed respondents have been on active military duty,6 a departure from the stereotype of tattooed servicemen (Bradley, 2000; Steward, 1990). Tattooed respondents also overwhelmingly report having close friends or family members who are also tattooed (90%). This observation ties in closely to Sander’s (1988) typology of tattoo client motivations, specifically as

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6A cross tabulation of “respondent is tattooed” by “ever been on active military duty” indicated that 15 of 44 (about 34%) military personnel are tattooed, a value higher than the general population but not significant.
TABLE 1 Social Characteristics of Tattooed and Non-Tattooed Respondents

<table>
<thead>
<tr>
<th></th>
<th>Tattooed respondents</th>
<th>Non-tattooed respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>64 (53.3%)</td>
<td>183 (48.2%)</td>
</tr>
<tr>
<td>Female</td>
<td>56 (46.7%)</td>
<td>197 (51.8%)</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White/Caucasian</td>
<td>86 (71.7%)</td>
<td>306 (80.5%)</td>
</tr>
<tr>
<td>Black/African American</td>
<td>16 (13.3%)</td>
<td>41 (10.8%)</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>0 (0.0%)</td>
<td>6 (2.0%)</td>
</tr>
<tr>
<td>Native American/Alaskan</td>
<td>Native American</td>
<td>2 (1.7%)</td>
</tr>
<tr>
<td>Native American/Alaskan Native</td>
<td>Some Other Race</td>
<td>15 (12.5%)</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20–29</td>
<td>39 (32.5%)</td>
<td>66 (18.0%)</td>
</tr>
<tr>
<td>30–39</td>
<td>42 (34.9%)</td>
<td>104 (28.3%)</td>
</tr>
<tr>
<td>40–49</td>
<td>26 (21.6%)</td>
<td>137 (37.3%)</td>
</tr>
<tr>
<td>Above 50</td>
<td>11 (9.1%)</td>
<td>60 (16.3%)</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ever married</td>
<td>67 (56.8%)</td>
<td>251 (66.1%)</td>
</tr>
<tr>
<td>Never married</td>
<td>51 (43.2%)</td>
<td>126 (33.2%)</td>
</tr>
<tr>
<td>Educational attainment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than high school diploma</td>
<td>11 (9.3%)</td>
<td>15 (4.0%)</td>
</tr>
<tr>
<td>High school diploma</td>
<td>46 (39%)</td>
<td>99 (26.1%)</td>
</tr>
<tr>
<td>Some college</td>
<td>21 (17.8%)</td>
<td>65 (17.1%)</td>
</tr>
<tr>
<td>Associates or Bachelor's degree</td>
<td>32 (27.1%)</td>
<td>142 (37.4%)</td>
</tr>
<tr>
<td>Some graduate study/Graduate degree</td>
<td>8 (6.7%)</td>
<td>57 (15.0%)</td>
</tr>
<tr>
<td>Total household income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than $10,000</td>
<td>9 (8.7%)</td>
<td>19 (6.4%)</td>
</tr>
<tr>
<td>$10,000–$20,000</td>
<td>10 (9.6%)</td>
<td>17 (5.7%)</td>
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<td>$20,000–$30,000</td>
<td>13 (12.5%)</td>
<td>34 (11.4%)</td>
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<td>$30,000–$40,000</td>
<td>20 (19.2%)</td>
<td>39 (13.1%)</td>
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<td>$40,000–$50,000</td>
<td>10 (9.6%)</td>
<td>33 (11.1%)</td>
</tr>
<tr>
<td>$50,000–$75,000</td>
<td>20 (19.2%)</td>
<td>61 (20.5%)</td>
</tr>
<tr>
<td>$75,000–$100,000</td>
<td>9 (8.7%)</td>
<td>46 (15.5%)</td>
</tr>
<tr>
<td>$100,000–$150,000</td>
<td>7 (6.7%)</td>
<td>34 (11.4%)</td>
</tr>
<tr>
<td>$150,000 or more</td>
<td>6 (5.7%)</td>
<td>14 (4.7%)</td>
</tr>
<tr>
<td>Employment status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Currently employed</td>
<td>87 (73.7%)</td>
<td>286 (76.1%)</td>
</tr>
<tr>
<td>Not currently employed</td>
<td>31 (26.3%)</td>
<td>90 (23.9%)</td>
</tr>
<tr>
<td>Ever been on active military duty</td>
<td>Yes</td>
<td>15 (12.6%)</td>
</tr>
<tr>
<td></td>
<td>29 (7.7%)</td>
<td></td>
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</tbody>
</table>

(Continued)
participation in a group or as a symbol of interpersonal relationships (222), as well as Armstrong et al.’s (2004) finding that the support and encouragement of friends was related to whether one would consider being tattooed. Additionally, Table 1 indicates a significant, negative relationship between education and being tattooed, contrary to the expected relationship stated in hypothesis 1. However, the negative association between age and being tattooed lends support to the expected relationship of hypothesis 3. While the “tattoo renaissance” often receives credit for expanding the appeal of tattooing to a more diverse clientele, these findings suggest that there has still been a lag in overall social acceptance of tattooing. Moreover, the current popularity tattooing currently enjoys among younger individuals appears to be an effect of gradual changes in attitudes toward tattooing as well as its contemporary reputation as fashionable and trendy (DeMello 2000).

Having friends and family who are tattooed is positively associated with the respondent being tattooed, confirming hypothesis 5. Correspondingly, reporting having a religious affiliation is negatively associated with being tattooed lending support to hypothesis 7, whereas employment status shows a weak and insignificant relationship. These are also

<table>
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<td>No</td>
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<td>Religious affiliation**</td>
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<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Have friends or family with tattoos***</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Positive for Hepatitis B or C</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

*Not all categories total to 100 percent due to missing values and non-responses.

*p < .05, **p < .01, ***p < .001.
consistent with prior findings that indicate a relationship between the assessment of friends and family and an individual’s decision to become tattooed (Armstrong et al. 2002, 2004). Similarly, Stirn et al. (2006) argued that lack of religious affiliation and unemployment among tattooed individuals indicated poor social integration. Although the findings here do indicate a negative relationship between religious affiliation and being tattooed, employment status is insignificant. Perhaps rather than indicating a lack of social integration among tattooed respondents, the negative religious affiliation instead indicates the presence of religious prohibitions against tattooing among non-tattooed respondents. Gender, coded here as not male, is not significantly associated with being tattooed, consistent with hypothesis 4 and the notion that men and women are getting tattooed with relatively comparable frequency. Finally, there is no statistically significant relationship between having tattoo(s) and testing positive for either Hepatitis B or Hepatitis C in support of hypothesis 12. Furthermore, this finding suggests that tattooing is not a significant vector for the transmission of hepatitis.

TATOOING AND DEVIANCE

Table 2 shows the OLS regressions for two predictive models of respondent being tattooed (Model 1) and respondent having a stigmatizing tattoo on the face, neck, hands, or fingers (Model 2). In Model 1, the strongest predictor of being tattooed is having spent three or more days in jail (.269), while the next strongest predictor is having friends or family with tattoos (.168). Similarly, having body piercings is also a positive predictor (.107) of being tattooed, indicating a degree of crossover with regard to body modification practices. Reporting a religious affiliation (−.099) and educational attainment (−.035) are both negative predictors of being tattooed. Gender is not a significant predictor of being tattooed, again lending support to hypothesis 4 and consistent with previous assertions about the relative consistency in the rates at which men and women are being tattooed (Mifflin 1997). Similarly, the use of recreational drugs and alcohol are also not significant predictors of whether one is tattooed, supporting both hypothesis 9 and hypothesis 10 and suggesting that
those who are getting tattooed are not necessarily engaging in other socially deviant behaviors.

In Model 2, the only significant predictor of having a tattoo on the face, neck, hands, or fingers is having spent three or more days in jail (.295), supporting hypothesis 11. This finding seems to indicate that certain areas of the body remain highly stigmatizing if one has them tattooed and furthermore that there is a clear cultural significance and meaning inherent in the placement of certain tattoos. Additionally, this supports DeMello’s (1993) concept of the “convict body” as one that is marked even after release as a criminal through physical inscription and attendant cultural interpretation.

To test more explicitly the linkages between tattooing and deviance, particularly criminality, Figure 1 shows the percentage distribution of respondents who are non-tattooed,
tattooed, and have tattoos in “extra-stigmatizing” areas, specifically the face, neck, hands, and fingers by time spent in jail, recreational drug use, and alcohol use. The findings indicate that nearly 25% of tattooed respondents have spent three or more days in jail; furthermore, about 72% of respondents with the extra-stigmatizing tattoos report serving time in jail, compared to roughly 6% of the non-tattooed population. These differences are statistically significant \( p < .001 \) and lend strong support for hypothesis 11. Similarly, just under 50\% \( p < .001 \) of tattooed respondents report using recreational drugs, nearly double that of the non-tattooed population, while 83\% \( p < .01 \) of the extra-stigmatized tattooed population reported recreational drug use. Alcohol use is relatively constant across categories and not statistically significant.

CONCLUSION

This analysis was designed to examine prior claims about the transitioning status of tattooing away from its deviant roots
and stereotypical associations with criminality. Despite a growing popularity, wider social acceptance, and diversified clientele (DeMello 1995; Pitts 2003; Rubin 1988b; Sanders 1989), the practice of tattooing still appears to retain some of its marginal characteristics. The persistent association of tattooing with time spent in jail suggests that it maintains its currency among marginal groups even as it experiences a resurgence of interest among young people. Indeed, Atkinson (2003a) notes that despite prior associations with deviance, throughout the 1950s and ’60s tattooing became thoroughly entrenched as a deviant practice, popular among prisoners and motorcycle gangs, and that by the 1970s tattoos were generally regarded as a voluntarily inscribed signifier of deviance. Notwithstanding the changes within the industry, embodied in the notion of the “tattoo renaissance,” it is understandably difficult to shed tattoo’s negative associations after generations of active stigmatization.

Similarly, these findings suggest that the overall scope of the tattoo renaissance is rather limited to a narrow group of serious collectors (Irwin 2003; Vail 2000, 1999a) and that tattooing has not been overwhelmingly embraced by those who are older, with higher levels of education or higher incomes. For older populations, traditional characterizations of tattooing as the domain of the lower class or deviant groups most likely remain salient, regardless of how body art is reframed in the popular media. Likewise, as Kosut (2006b) has observed, much of the commodification of tattooing has been oriented toward youth culture, repositioning the practice as “a sign of rebellion, youth, trendiness, or some amalgam of coolness” (1039) and distancing it from more negative associations. As tattooing is increasingly used as a marketing device and fashionable expression of individuality for younger consumers, one would expect a comparable expansion of the practice among a younger demographic as well as more relaxed attitudes about its level of social acceptability. The negative relationship between education and tattooing is probably more closely related to one’s anticipated career trajectory and normative expectations. Even among tattoo enthusiasts, the potential for occupational constraint often informs both the placement and overall visibility of tattoos as “tattooed bodies are not normative in most work settings” (Atkinson 2003a:124).
Additionally, persistent associations of tattooing with working- or lower-class status may also function as an impediment to getting tattooed by those who perceive of themselves as upwardly mobile.

Many of the qualitative studies on tattooing tend to focus on either the deviant aspects of tattooing or the pro-social, identity-construction uses of tattooing. The findings presented here contribute to the body of literature on tattooing by complementing these studies with a quantitative analysis that speaks to the changing demographics and broadening appeal of tattooing in the contemporary United States. Instead of focusing explicitly on how respondents articulate their personal uses of and motivations for tattooing, this analysis draws on a national data set to broadly examine some of the social characteristics of those individuals who get tattooed in order to test broad claims about the current status tattooing as a practice.

The overall insignificance of gender as a predictor of being tattooed does seem to indicate that tattooing has a broad appeal and is no longer strictly a masculine endeavor (DeMello 2000; Fisher 2002). Indeed, the declining relevance of gender to whether one has a tattoo seems to be indicative of both its growth as a practice and the weakening of normative prohibitions against tattooing. Tattooing has been successfully de-gendered, and subsequently re-gendered, so that there are now normatively gender-appropriate locations for tattoos guided by "the ways it has been fashionably inserted into the mainstream" so that tattoos may now "garner favourable attention from others (e.g., parents, peers, boyfriends, husbands) as they are explicitly assembled as acts of consent to established constructions of femininity" (Atkinson 2002:232). Similarly, the significance of friends and family to the decision-making process is consistent with much of the prior research. Armstrong et al. (2002) found that among non-tattooed college students, one’s parent’s assessment was the second most significant barrier to getting a tattoo. For tattooed respondents, negative comments from significant others was the third most important barrier to obtaining more tattoos. Although individuals may or may not be influenced by the assessments of society-at-large, the risk of social sanction from one’s close peers and family is certainly enough to affect the decision to become tattooed.
Conversely, the finding here suggests that having friends or family who are tattooed will be positively associated with the respondent also being tattooed, indicating that the judgment and behavior of key reference groups often outweighs the general normative constraints and stigma associated with tattooing.

Finally, the absence of any statistically significant association between tattooing and testing positive for either Hepatitis B or C appears to support the CDC’s assertion that tattooing generally does not increase one’s chances of infection with these particular blood-borne diseases. This is important because the risk of hepatitis transmission has become a standard element of the medically oriented discussion of tattooing. Armstrong et al. (2002) report that hepatitis infection is a concern and potential barrier to getting a tattoo among both tattooed and non-tattooed populations. Millner and Eichold (2001) argue that “perhaps the perceived safety risk is greater with tattooed individuals because tattooed persons are subject to being tattooed with unregulated pigments as well as unregulated sterilization methods” (436), echoing the stereotype of tattooing as both unsafe and unhygienic. Furthermore, some have argued that “education should be aimed at dissuading the prevalence and perceived value of the product in a matter-of-fact manner while incorporating the major barriers (permanent marks, costs, and hepatitis) in a young adult perspective for decision making” (Armstrong et al. 2002:322). The constant repetition of this threat, that tattooing is a serious vector in the transmission of hepatitis, despite lacking strong empirical support, can be understood as an outgrowth of the socially constructed understanding of the tattooing process and the tattooed body as unclean.

LIMITATIONS

Although much prior research has been devoted to the changing meanings and uses of tattooing in the United States, this article represents one of the first efforts to quantitatively analyze tattooing as a social practice. The data used here were originally gathered for research with an explicitly medical focus and application. This analysis is therefore restricted by the scope of the data and limited with regard to variables of sociological interest. Because of the cross-sectional nature
of the data set and the inability to make longitudinal claims, this analysis is focused more explicitly in examining the association of tattooing with various demographic and behavioral factors, rather than implying causation.

Additionally, due to the relatively small overall size of the dataset, as well as the comparably limited tattooed population within the dataset, the models presented here often yield weak, although still statistically significant, findings. Yet it is also important to note that many of the findings here are consistent with those of prior research and that this study represents an initial quantitative analysis of a substantive field that has almost exclusively been the domain of qualitative inquiry. Future research would benefit from a large-scale dataset gathering similar data with a specific emphasis on the social characteristics and contexts of individuals who are engaged in body modification practices as well as general attitudes about practices such as tattooing and body piercing.

In this article, I have endeavored to explore the degree to which tattooing has moved away from its traditionally deviant associations. As Kosut (2006a) has noted, “longstanding and commonplace associations between tattoo and criminals or psychopaths still linger, yet they reside alongside new representations and discourses” (91). This observation appears to be true; even when tattooing is being explored as a high-art medium (Vail 1999b) or as a representation of individual identity (Atkinson 2003b; Pitts 2003), it still retains an aura of marginality and, perhaps for society-at-large, deviance.

REFERENCES


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