**UNIQUE ASPECTS OF THE PROFESSIONAL IDENTITY OF TATTOOED PSYCHOLOGISTS:**

**The professional self-esteem, sense of not belonging and intentional behavior modeling of four tattooed professionals from the field of psychology and psychiatry**

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**ABSTRACT**

The growing prevalence of body modifications, such as tattoos and piercings, has recently started to reach all social structures and fields of profession, including psychology students and even professional psychologists. Tattoos are not just for bikers and prisoners anymore – they are for everyone, including many current and future psychologists, whose work demands consideration for one's appearance and relies greatly on the quality of interaction with the client or patient. This qualitative case study of four tattooed Finnish professionals from the field of psychology and psychiatry aims to explore the impact tattoos can have on the professional experience of a psychologist. The subjects were interviewed twice about their experiences with tattoos, work and clients or patients. Qualitative analysis of the interview data revealed three themes revolving around the interviewees' professional identity: a sense of not belonging among their peers; a strong professional self-esteem despite of feeling like an outsider; and a will to model a certain free-spirited and accepting attitude to their clients or patients. This suggests that the professional identity of a tattooed psychologist might be atypical or constructed differently than their professional peers'. The subject hasn't been studied much previously and still requires more research.

# TIIVISTELMÄ

Tatuointien ja lävistysten kasvava suosio on alkanut yleistyä kaikissa sosiaalisissa ja ammatillisissa luokissa, mukaan lukien psykologian opiskelijat ja jopa ammattilaiset psykologit. Tatuoinnit eivät ole enää pelkkä rikollisten ja kapinallisten merkki – niistä on tullut kaikille saatavilla oleva muoti-ilmiö. Ne eivät ole ennenkuulumattomia koristeita monelle nykyiselle ja tulevalle psykologillekaan, joiden työ vaatii oman ulkoasun harkintaa ja nojaa hyvin pitkälti vuorovaikutussuhteen laatuun. Tämä laadullinen tapaustutkimus neljästä tatuoidusta suomalaisesta psykologian ja psykiatrian alan ammattilaisesta pyrkii tutkimaan mitä mahdollisia vaikutuksia tatuoinneilla voi olla psykologin kokemukseen omasta ammatillisuudestaan. Tutkimushenkilöitä haastateltiin kahdesti tutkimusta varten koskien heidän kokemuksiaan tatuointien, työn ja potilaiden tai asiakkaiden parissa. Haastattelujen laadullinen analyysi nosti esille kolme teemaa liittyen haastateltujen ammatilliseen identiteettiin: kuulumattomuuden tunne muuhun ammattikuntaan nähden, vahva ammatillinen itsetunto ulkopuolisuuden kokemuksesta huolimatta, sekä pyrkimys mallintaa vapautunutta ja hyväksyvää elämänasennetta asiakkaille ja potilaille. Tulokset viittaavat siihen että tatuoidun psykologin ammatillinen identiteetti saattaa olla epätyypillinen tai eri tavoin rakentunut kuin vastaavilla tatuoimattomilla kollegoilla. Aihealue on toistaiseksi suhteellisen vähän tutkittu ja vaatii lisätutkimusta.

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# 1. INTRODUCTION

This qualitative interview-based case study of four tattooed Finnish professionals from the field of psychology and psychiatry explores the possible connections between tattoos and certain aspects of professional identity to determine whether tattoos could have some distinctive effects on this particular profession that is so dependable on the successful interaction between a professional and a client or a patient. The recent popularity of tattoos is proving that they in fact can reach and influence this particular profession as well.

Tattoos and piercings – generally also known as body modifications – have clearly been growing in prevalence during the last few decades (Martin & Dula, 2010; Swami & Furnham, 2007; S. Wohlrab, Fink, Kappeler, & Brewer, 2009), especially among young adults (Miller, 2009). Horne, Knox, Zusman & Zusman (2007) point out that it's been estimated that about 20 percent of people aged 18 to 25 have at least one tattoo, and Swami and Furnham (2007) mention that most studies evaluate that in the West alone that percentage is something between 14 and 35. What was once a marginal phenomenon and a subcultural signal is now a part of mainstream fashion (S. Wohlrab, Stahl, Rammsayer, & Kappeler, 2007), and this growing popularity of tattoos has begun to reach all ages and social classes (S. Wohlrab et al., 2007; S. Wohlrab et al., 2009; S. Wohlrab, Fink, Kappeler, & Brewer, 2009).

As the rate of tattooing grows and spreads throughout the Western society, people of different occupations are beginning to possess these ornaments, including therapists (Stein, 2011). Tattoos can hinder an employer's status in the workplace in the eyes of co-workers (Miller, 2009) and, especially for a therapist working with clients within a therapeutic relationship, visible tattoos are feared to be risky or even damage the therapy progress (Stein, 2011). Tattoos on psychologists is still a relatively unstudied subject, but given the assumptions that tattoos provoke prejudice in the workplace and that the looks and attitude of a psychologist can play a part in the development and the nature of the relationship that the treatment or counseling process is based on, it is worth considering if and how tattoos can influence this particular profession.

This chapter will present concepts relevant to understanding the themes and the results of the study, the framework related to the stigmatizing nature of tattoos and their role in the occupational world.

## 1.1. Tattoos as stigma

Even though the roots of tattooing lie deep in ancient cultures and tribal societies and the practice has a long history (S. Wohlrab et al., 2009), tattoos in the western world have generally come to be known as signs and signals of certain subgroups like prisoners, bikers and military, and for this reason they've been strongly associated with masculinity, delinquency, aggression and defiance (Burgess & Clark, 2010; S. Wohlrab et al., 2007). Along the way they've been also connected with psychiatric problems of sexual, traumatic or masochistic nature (Stein, 2011), and Burgess and Clark (2010) point out that earlier studies have even proven this connection to be legitimate. Stein (2011) notes that tattoos have been pathologized for decades as they've been theorized to have unconscious sexual connotations and to be connected for example to regression, masochism and instability.

Nowadays as the prevalence of tattoos has grown so much they've become a fashion item more than a rebellious rarity, the old views about tattooed individuals being criminals or psychologically disturbed are beginning to be outdated (Burgess & Clark, 2010). There is an evident change in the attitudes towards tattoos as clearly more and more people are getting tattoos or at least wanting some, but as studies suggest, there seems to be reason to believe that not all prejudices are so easy to fade out as the negative associations of tattooing still remain along with the stereotypical ideas of the personalities of tattooed individuals (Martin & Dula, 2010). Many negative attitudes, stereotypes and prejudices against tattoos and their bearers still seem to persist according to several studies (Horne et al., 2007; Martin & Dula, 2010; Resenhoeft, 2008; Swami & Furnham, 2007; S. Wohlrab et al., 2009; S. Wohlrab et al., 2009). Studies show that tattooed individuals are perceived for example as thrill seekers, promiscuous and dominant (S. Wohlrab et al., 2009), less healthy (S. Wohlrab et al., 2009), and less attractive and less intelligent (Resenhoeft, 2008) when compared to non-tattooed individuals.

In another study Wohlrab, Stahl, Rammsayer and Kappeler (2007) observed the factual differences between the personality traits of tattooed and pierced and altogether non-modified individuals by conducting self-rating questionnaires and found out that bodymodified participants truly scored higher on the subscales measuring experience seeking and disinhibition. Their sociosexual orientation also proved to be less restricted and they were more willing to take risks and seek new sensations. In addition they scored lower on the agreeableness scale of the Big Five model than the non-modified participants, which might suggest reluctance to conform to typical social norms.

Furthermore, Martin and Dula (2010) believe that there is stigmatization related to the negative stereotypes provoked by tattoos. A stigma is defined as a characteristic that is negatively evaluated and degrades the individual in the eyes of others and can lead to discrimination or rejection (Goffman, 1963). According to the study results presented in this chapter concerning the prejudice and negative associations related to tattooed individuals (Horne et al., 2007; Martin & Dula, 2010; Resenhoeft, 2008; Swami & Furnham, 2007; S. Wohlrab et al., 2009; S. Wohlrab et al., 2009), tattoos do seem to involve a social stigma in the modern society and cause consequential observations and attitudes.

## 1.2. Tattoos in the workplace

In a study of Miller, Nicols and Eure (2009), it is proven that stigmatization towards tattoos is a genuine factor in the workplace. In their sample body art wearers were less accepted and not preferred as co-workers, and they were evaluated more poorly by employers, despite the present popularity and general acceptance of body art. Miller, Nicols and Eure (2009) suggest that people might view tattoos differently on themselves than on other people, so that they are evaluated more negatively on others, especially when it comes to situations where a work partner's appearance can be expected to play a role in the success or reward related to the task at hand.

Slay and Smith (2011) researched the professional identities of culturally stigmatized individuals, theorizing that professional identity construction might be different for professionals who are somehow stigmatized by others. Considering Martin and Dula's (2010) perspective of tattoos meeting the profile of Goffman's (1963) concept of stigma, this theory loosely applies to tattooed individuals as well − especially considering the overall shortage of studies concerning the professional identities of tattooed individuals who are negatively evaluated and less accepted in the workplace, as discovered by Miller, Nicols and Eure (2009).

Professional identity is a self-concept related to one's profession and develops during career within professional settings. Slay and Smith (2011) summarize that professional identity is built upon individual qualities, values, views and experiences used to define one's own identity within an occupational role in specialized professions and is affected by life experiences outside of work as well. Professional identity is therefore not a constant, unchanging part of one's identity, but rather a flexible concept which is susceptible to change and adaptation, especially within transition periods on one's career when one needs to adjust and redefine one's professional role and its

meanings. Furthermore, Mrdjenovich and Moore (2004) also emphasize the role of professional identity as the personally perceived connection to the set of values of the profession one is in.

In their study Slay and Smith (2011) proved that the professional identity construction of stigmatized individuals is characterized by processes of redefinition rather than adapting to their environment, role and expectations. This process involved the professionals redefining the nature of the stigma placed upon them to have positive associations as well, redefining the essence and the meaning of their profession, and redefining their own selves by seeking to form a balance between their professional identity and the cultural identity of the stigmatized group they were a part of. The identity construction process was also influenced by experiences of being the outsider in the workplace and personal empowerment relating to their worth and competence as professionals.

Successful construction of professional identity is often linked to success in career (Slay & Smith, 2011), which, in turn, is connected to good professional self-esteem (Tabassum, F. & Muhammad, A. A., 2012) . Tabassum & Muhammad (2012) define professional self-esteem as an aspect of self-esteem that relates to a person's occupational identity. They summarize that it's an evaluation of one's professional skills and worth within work settings, and is generally based on a profound understanding of the demands and expectations of the occupation and on fulfilling these requirements with adequate competence and abilities. Achievements, perceived importance of the professional role, one's own appraisal and the acceptance of other professionals improve professional self-esteem.

## 1.3. Tattooed psychologists

The subject of tattoos on psychologists has been very sparsely studied to date, and so far the possible effects of psychologist's body modifications in the psychological treatment settings have remained unidentified. Despite some scarce researching around the topic (at least Stein, 2011), the subject still lacks a proper framework. Tattooed psychologists are of certain specific interest among all tattooed professionals in general, since their occupation is essentially based on the interaction they have with their clients or patients and their appearance can be a defining factor in this relationship. The tainted perceptions and the social stigma related to tattoos can hinder the attitudes and feelings that clients and patients have for a tattooed psychologist, and therefore presumably challenge the interaction between the two. This might be crucial to a professional whose work is so dependent on the relationship he or she forms with clients or patients.

In accordance with the studies mentioned earlier suggesting difficulties caused by tattoos for the individuals possessing them, it was examined in this study whether the professional role and interaction with clients and co-workers would be somehow challenged for tattooed psychology professionals. The nature of their professional identity was expected to have been affected by their coexistent identity of a body art wearer and the stigma status of their unconventional appearance, as suggested by Slay and Smith (2011).

The following chapter will present the study and the research process in further detail.

## 2. METHODS

Initially the research focused on the possible effects of a psychologist's tattoos in treatment settings and counseling situations but due to an evident lack of proof that there'd be any notable effects in the relationships with clients and patients, the emphasis of the study shifted to the professional roles of the interviewed subjects. Eventually, the research was conducted as a case study involving four participants, who were all professionals working in the field of psychology or psychiatry in Finland, and they were interviewed twice about their work, tattoos, clients and patients, career and the different aspects of their professional identity.

### 2.1. Participants

Participants in the study were currently employed psychologists and a doctor specialized in psychiatry from Finland. They were contacted through the Finnish Psychological Association, which was contacted in order to gather voluntary interviewees for the research. An invitation letter was sent through this organization to reach all the currently working psychologists in Finland – not including those still studying or already retired. The invitation letter explained the frame and topic of the research and called for interested volunteers to participate via phone or email. The only requirements stated for the participants were that the interviewees were to be qualified psychologists currently employed in Finland and have one or more tattoos, regardless of the amount, size, motif, location or visibility of the tattoo or tattoos.

In total 49 psychologists replied to the invitation letter volunteering as interviewees and also matched all the requirements, and two volunteers who didn't. Six of the voluntary interviewees who met the requirements were chosen to be interviewed based on their email letters. All of them mentioned having considerably large or visible tattoos, or having experienced some kind of reactions in their work environment due to their tattoos. Four of them – two women and two men – agreed to be interviewed and followed through with the process. Three of them worked as psychologists and one as a psychiatrist. They lived in different cities around Finland and were aged 30-53. They all had visible tattoos, though three of them were tattooed considerably more heavily, whereas one of them had only one tattoo. The interviewed subjects will be presented in more detail later.

## 2.2. Interviews

The four participants were interviewed twice via phone. The initial interviews were conducted in the autumn of 2012. They were semi-structured, each lasting for an hour approximately. The interviewees were asked to describe their tattoos and the project of getting tattooed, about their experiences with co-workers and clients reacting to their tattoos, and also their thoughts about their own tattoos and profession and tattooed psychologists in general.

These interviews were transcribed for analysis. Interviewees' speech was transcribed verbatim, with the exception of excluding filler words. Pauses, intonation and emotional expressions were not transcribed, only the words spoken. Those parts in the interviews than weren't targets of interest for the study were summarized. The transcription was created to help with condensing general meanings and categories out of the interviews.

The initial analysis was based on searching for similar themes of discussion occurring in the interviews, and after defining the initial three themes of professional self-esteem, sense of not belonging and intentional modeling – described in more detail later – another interview was conducted based on these themes. This second set of interviews was conducted after the initial analysis and approximately half a year later in the early spring of 2013, and included similarly semi-structured interviews lasting an hour like the first ones, but revolved specifically around the three themes extracted from the first data set. The participants were asked thoughts and opinions about the themes and their relation to their tattoos and work and life history in more detail than in the first interviews.

## 2.3. Analysis

The transcribed interview data was analyzed by the means of meaning categorization, which is a form of qualitative data analysis that is based on sorting statements into briefer categories based on their general meanings (Kvale, 1996). The initial analysis that was done with the first set of interviews aimed to find similar themes of discussion occurring in the interviews as a means to find patterns or parallels in the experiences and views of the participants. This search resulted in three distinct themes that were based on the recurring topics in all or most of the interviews and on the terms used by the interviewees; professional identity, sense of not belonging and intentional behavior modeling. These will be described in more detail in the following chapter.

The subsequent interviews that followed the initial data analysis were transcribed in a similar fashion than the first interviews, only this time the categories existed before the analysis, and the interviews were analyzed based on the themes that had emerged in the first analysis.

## 3. FINDINGS

The three themes that emerged from the data will now be viewed in closer detail. The interviewees' input on the themes is discussed, along with key information concerning the interviewed subjects and their experiences involving their tattoos and work.

## 3.1. The emergent themes

In total three distinct themes were extracted from the interview data gathered from the subjects. These themes were based on recurring topics of discussion that outweighed other topics in relevance, frequency and level of personal significance to the interviewees. These themes have been defined as professional self-esteem, a sense of not belonging and intentional behavior modeling.

3.1.1. *Professional self-esteem* refers to the aspect of self-esteem that is connected to professional identity, which is the phenomenon of identity construction within professional settings, as presented in the introduction. Throughout all the interviews, the subjects brought up a profound trust in their professional skills and competence. Their professional self-esteem was good and completely undisturbed by their unconventional appearance. Some of them had experienced minor incidents involving negative comments concerning their tattoos and the suitability of those in their profession, but these situations had raised no doubts in the interviewees' own minds relating to their professional competence. These instances will be viewed in closer detail in the following chapters. However, none of these comments had been made by a client or a patient.

The interviewees themselves described professional self-esteem as a sense of confidence in their own skills and professionalism, and associated it with experience, self-assurance and feeling of having succeeded in their work. For them it meant sufficient professional knowledge and critical understanding of one's own self, abilities and limits. All of the interviewees evaluated their own professional self-esteem as good.

The interviewees, especially the ones with large, visible tattoos, were aware of their external deviation from the majority of psychologists, but believed that their looks didn't matter in treatment or counseling settings. None of the interviewees had experiences of their tattoos disrupting the communication with a patient or a client or negatively affecting the outcome of sessions, and they had no notable worries of such events ever occurring, even though they rarely made any particular efforts to hide their tattoos from their patients or clients. For two of the subjects, hiding all of their tattoos was virtually impossible, but none of them brought up any fears or regrets related to their tattoos or their professional identities.

However, they all admitted having experienced at least one situation where they had hid their tattoos or toned down their looks, but these were all similar cases: formal situations like meetings or being in the role of a representative for their workplace. For most interviewees this act of attempting to look more discreet in certain settings was mundane and associated with the way anyone would consider their outfit more carefully and attempt to look more businesslike and presentable in such circumstances. This is likely a custom shared by both tattooed and non-tattooed employees in order to adapt to different settings and situational demands concerning dress codes and modes of conduct.

All of the interviewees felt that feedback from clients, patients, colleagues and employers was important to them, and they associated it firmly with professional self-esteem. Sufficient and positive feedback reinforced and validated the faith they had in their own skills and proved that it was well-established.

3.1.2. *A sense of not belonging* was another theme that repeatedly came up in the interviews. This refers to a feeling of not fitting in among other colleagues both in the workplace and in the whole trade of psychologists and doctors altogether, and includes sensations of not being a part of the population of one's line of work, conflicting somehow with the majority of professional peers, and being somehow externally and internally different from them or being an outsider. However, this was an experience only the three most heavily tattooed interviewees shared. The more discreetly tattooed subject had no such experience, except when dealing with smaller groups of colleagues or individuals with differing views or attitudes, which is likely an experience typical to both tattooed and non-tattooed people.

The interviewee who had only one tattoo felt she fitted in well with other psychologists, and the sparse, fleeting feelings of not belonging were always connected to certain smaller and more immediate groups she was communicating with and faded in bigger groups of peers. Even these had been merely isolated cases and involved individuals she did not connect with for reason or another. Mostly she felt like she belonged among her professional peers, and enjoyed the company of other psychologists as friends too. Still, she did not feel stereotypical or ordinary.

The three interviewees that had considerably larger, more numerable and more visible tattoos felt crucially different from the mass of their peers. They were also all somehow discontent with the rest of the people in their line of work, and this disagreement with other professionals of the same trade was due to perceived differences in ideology and views. Two of them also pointed out they had no colleagues as friends and didn't really personally know any of them outside of work.

This sense of not belonging did not interfere with the subjects' professional self-esteem, and they felt that even though they were quite not like the others, they still were good at what they did and enjoyed their work, regardless of how separate they felt in the professional world they were in.

3.1.3 *Modeling* in this case refers to setting an example for patients and clients by offering them a model of a certain free-spirited attitude and modeling this attitude with one's own behavior, style and outlook. This mode of thinking was not actually shared by all the interviewees, but throughout the interviews there were references to using one's own true personality and experiences in one's work and hopes of being able to encourage patients and clients to be themselves as well. Two of the subjects brought up this custom of attitude modeling more and had a very conscious intention of

openly being themselves with clients and patients, and this way setting an example of accepting one's own self and daring to express oneself freely.

This type of modeling was not only connected to the interviewees' tattoos but also to their overall appearance, attitude, mode of communication and choice of professional methods. They felt that if they wanted to support differences, acceptance and expressing oneself, they needed to act in accordance with their own message by openly being themselves as well and being true to their own style, looks and personality. This way of thinking did not motivate them to get tattoos, but it seemed to encourage them not to hide them or restrict themselves when getting them.

Two of the interviewees did not feel they wanted to give out any messages like this with their looks or behavior, at least not intentionally, but they didn't exclude the possibility of that kind of influence having had happened without them meaning to. However, none of the interviewees believed in restricting customs, and they all valued diversity and tolerance. It is also worth noting that modeling might be something non-tattooed psychologists with more conventional looks and styles do just as well as the two tattooed individuals in this study, perhaps by otherwise adjusting their presence and manners or by completely different means altogether.

The following four chapters will introduce the interviewed subjects in more detail and consider their individual take on the three themes. All interviewees have been given false names to protect their privacy.

## 3.2. Interviewee 01 – Rory

Rory (name changed) was a 40-year-old psychologist from Western Finland with a 12-year career in the field of psychiatry. At the moment of the first interview his work was based on testing and evaluating patients and acting as the consulting specialist in an intensified outpatient care unit at a hospital, and by the time of the second interview, he had returned to his earlier job in a mental health center's outpatient ward.

Rory had been drawn to study psychology based on his personal interests concerning the human mind and his own need to challenge himself and his introverted tendencies, but from the beginning of his studies he had felt like an outsider and had been disappointed by the overall normality and lack of deviation of his peers: "I was immensely irritated by that certain attitude; how everyone emphasized so much how we're so balanced and extroverted and we're going to be the archetypes of normality." Next to students like that, he felt "like a freak."

This frustration had followed him through his studies and career, and eventually established the grounds for the permanent feeling of not belonging among his colleagues. He felt psychologists had a purpose he could not fill: "I've always thought that psychologists are seen as kind of administrators of normality. We define what's normal, as if we are the maintainers of the societal status quo." Rory did not want to identify himself as such. He remarked it was a big crisis for him to realize this was the kind of profession he was graduating to and made him question his career choice altogether. It wasn't until he entered the working life and gathered experience that he came to terms with feeling different and began to develop a professional self-esteem. "I've found my own way to be in this profession", he said, referring to his manner of emphasizing enjoying life, the moment here and now and creative self-expression in his work with his patients. He figured his job as a psychologist was not to model normality for his patients, but to model an open, accepting and liberating attitude towards life, self and others. "It's a sort of psychology of liberation", he described. In Rory's case, the three themes of the study came all together and were closely entwined.

Rory's disturbing feelings of being different and not belonging with other psychologists did not originate from his tattoos, which he didn't get until his last few years in University. His tattoos were a part of a certain creative and spiritual process he went through. This intense tattoo project took him three years and resulted in full-sleeve tattoos covering both of his arms and tattooing around his navel and along his upper back. His tattoos included imagery involving for example flora and fauna and symbolism. They were visual representations of his inner world, his mentality and his desires, and held great personal significance and value. "I've grown into them. They are a part of me and I can't imagine not having them. They're such an intimate part of me", he said, describing his relation to his tattoos. He confessed having always had a poor bodily self-esteem and being insecure about his own body since he was a child and always being fascinated with working with his body, for example by dancing and doing theater. Yoga and meditation were also long-time hobbies of his that associated with his spiritual side. He saw a connection between his tattoos and this special relationship between himself and his physique, and felt the tattoo project he went through was a means of not only processing and working with his body, but also taking control of his own body and making amends with his own insecurities.

Especially Rory's arms – tattooed all the way from wrists to shoulders – were sometimes exposed to both his co-workers and patients, and hard to hide altogether since the images reached the back of his hands. In the beginning of his career he had some feelings of insecurity about himself and these encouraged him to hide his tattoos from others at the workplace, but after

growing more confident and comfortable in his work environment he gave up this principle; the development of professional self-esteem ensured his overall confidence.

Despite his tattoos being often visible at work Rory hadn't experienced discrimination or problems with clients at least to the point that he himself would've noticed. The only occasion when he had experienced a negative reaction to his tattoos had happened as he applied for a new job after graduating and was rejected for having tattoos. Although upsetting, this occurrence had been an isolated case and nothing similar had happened since, but Rory did admit occasionally feeling a bit insecure about his tattoos and other people discovering them; he feared receiving negative comments or raising suspicions concerning his competence or state of mind.

When it came to his patients, Rory had no worries about his tattoos affecting his relationships with them, and he figured they're not a thing patients would focus on. "Within psychiatry the people have been through so much they don't really think too much about how you look like", he summed up.

## 3.3. Interviewee 02 - Rose

Rose (name changed) was a 30-year-old psychologist from Southern Finland, working in the field of occupational health and sports psychology. She had been a psychologist for four years, and had previously worked as a forensic psychologist. Between the two interviews conducted in this study her occupational situation changed as she founded an enterprise of her own, and at the time of the second interview she was presently marketing and building her own brand. She was aiming to create a company providing nonstandard, tolerant and diverse expertise in the field of psychology.

Rose had a large tattoo on her upper back, and a smaller one residing behind her left ear. Her whole left arm was covered in a sleeve tattoo. She had got her first tattoo in high school, and she had been getting tattoos ever since. "If you like tattoos at all, you get hooked a little bit", she said as she explained her own tattoo process that started from something very small and later on proceeded to bigger images and more intense projects. Her tattoos involved imagery connected to her personal hobby; music. She had noticed that especially people who themselves were into music too tended to notice and ask about her tattoos. Her role as a musician outside of work wasn't particularly a secret, but it was a significant part of her personal life so she didn't discuss it in much detail with her clients.

Rose started getting tattoos in high school, before her psychology studies. In University she made some unusual study choices, and ended studying abroad a lot and graduating from a non-Finnish language University. She felt she never established a similar position in the Finnish psychologist community than many other students did. She suspected this was the origin of her sense of not belonging that she shared with the other heavily tattooed individuals of the study. Rose recalled always having had felt like she did not quite belong among other psychologists, and admitted this was one of the reasons she left her previous job to form an enterprise of her own. "I felt out of place", she explained.

Rose mentioned this feeling of being different wasn't necessarily a distressing experience for her, and she had positive thoughts about it: "It would be awful if I simply disappeared in the mass." She had only one other psychologist as a friend and didn't particularly enjoy the company of psychologists in general. She was discontent with the bystander status she felt psychologists had; in her opinion the other psychologists around her didn't take any stands or defend their rights and views actively enough, whereas she was very keen to address problematic issues and communicate her own ideas and attitudes. She understood this didn't really fit the ideology of the empathetic and compassionate trade she was a part of. "I guess I'd be accepted [as a part of them], but whether I want to belong with them – that's another story", she figured.

Rose firmly believed it was not her style or her looks that mattered in professional settings; it was her own skill, expertise and message that made the difference. She thought it would be a flaw in her own competence if the presence of her tattoos would interrupt her interaction with clients or influence the quality of her work – and this had never been the case. "I regard myself completely proficient, regardless of my looks", she summed up. Her professional self-esteem was under a lot of pressure at the moment of the second interview as she was building her own enterprise and facing a whole new world of responsibility and risk. "It demands mad trust in yourself", she admitted, but seemed to possess this "mad trust". She relied on her own skills and expertise and didn't question her ability to succeed at her new occupational situation.

Rose had a strong will to model a certain open-minded, tolerant attitude and behavior to her clients by being true to herself and her own style. She wanted to encourage people to be who they want to be, and felt that it was necessary for her to represent the ideas she supported and to be herself as well in her work. This was not her motivation to get tattoos, but it was the reason why she did not hide them or tone down her looks at work. She thought that modifying her own style for her profession would not only be untruthful but also maintain the prejudice that such a thing as tattoos would matter in client settings.

Rose hadn't experienced any discrimination or difficulties with the people she worked with – only mere curiosity – even though she made no effort to hide her tattoos. "I don't think the fact that a person can see that I have a personality, a real human persona, a certain style and a will to live according to that style, impairs the interaction in any way", she thought.

## 3.4. Interviewee 03 - Jack

Jack (name changed) was a 53-year-old doctor specialized in psychiatry from Southern Finland. He had studied medicine and later received training that qualified him to now work using cognitive analytic therapy methods. His initial interest had been ethology, which he had studied for a year in San Francisco, before moving to Finland and switching to cellular biology and then finally to medicine. His interest towards ethology had directed him to specialize in psychiatry which he felt was his vocation.

Even though Jack distinctively felt like he was in the right occupation, he still lacked the sense of belonging among his colleagues, and this had been the case since his studies. As with Rory, who had been disappointed with his fellow students when he had begun his studies, Jack had also been discontent with the attitude of his peers, who in his opinion had been more concerned with materialism and paychecks than people. He had felt he differed from this majority, and had found friends among people who had been into culture and arts like him. He reckoned the sense of being different was also based on his profound interest towards other things than medicine, for example arts and literature. He had written several books and identified himself as a writer as well. He saw psychotherapy as a creative process too.

The sense of not belonging had persisted through Jack's career, and was still present. However, he did have good relations with his colleagues and felt accepted, though still not a part of the general population of his trade. "I don't feel like I'm your usual doctor. I'm sort of an outsider", he pointed out.

Coincidentally, Jack had started getting tattoos in the beginning of 90's, while he had been in the middle of his studies. He now had approximately 15 tattoos around his body, including full-sleeve tattoos covering his both arms. His own personal life had been a major motivator for getting tattoos and choosing their motifs. His tattoos held a lot of symbolism revolving around such personal subjects as love and family, and more abstract topics such as life, death and themes of duality. At the time of the interviews, he was already planning his next tattoos. He compared tattoos

to collecting, and recalled: "Someone has said that when you begin tattooing, your body becomes a canvas. You start painting on it."

Jack's father had been a sailor and Jack had grown up in a home where tattooed men had been regular visitors, and he had always admired their tattoos and had fond memories of these people. He pointed out that back then, in the 60's when he was just a child, tattoos had been more of a taboo than they are now, and they hadn't been as allowed as nowadays when they've become practically a fashion item. The sailors visiting Jack's childhood home had been, in his eyes, adventurers, who had collected their tattoos from all over the world and whose tattoos bore meanings and memories. "I always admired those sailor motifs. And that's another thing; they've always fascinated me. Of course they've been a bit forbidden too", he explained. "It's a body taboo – creating your own skin somehow", he said. However, he didn't deny the mere esthetic value and external quality of tattoos either: "It's a decoration, an accessory".

Jack's tattoos were visible when he was working, since some of them were nearly impossible to hide, for example the tattooed wedding ring on his ring finger. However, he hadn't experienced any difficulties with his patients involving his tattoos. Instead, sometimes they had acted as ice breakers and conversation starters. He suspected patients might see him as their equal because he didn't look so formal. "I'm an old hippie, adventurous, I don't adapt", he said when guessing what his patients might think of him. He suspected that people opened up to him about different things than they did to others, due to his unusual looks that might make him seem street-wise and deviant.

He mentioned that an employer and a co-worker had commented on his tattoos, telling him to hide them around his patients, but he hadn't followed these instructions. He didn't worry about his tattoos and felt they were not a problem. "I've always figured that if someone isn't ok with me, there are other doctors in here, so they can switch if they want. But no one has ever complained to my face or neglected to arrive for my appointment", he said. He didn't doubt his own skills and told that he had a sense of trust in his expertise that was unaffected by his tattoos and feelings of difference. "If you have the right personality and it works as a therapist and as a person, it wouldn't matter if you sat there wearing snake skin. Nobody would notice. The job's what matters, not the accessories", he believed.

Unlike the other heavily tattoo interviewees, Jack didn't have a desire to model any certain behavior for his patients with his style or attitude, but he admits it might have encouraged someone without him meaning to. "A happy side effect", he speculated. He still thought it was important to use his own knowledge, life experience, sorrow and love in his work with his patients.

**3.5. Interviewee 04 – Amy**

Amy (name changed) was a 30-year-old psychologist working in the field of career counseling in Eastern Finland. Besides education and career related problem solving and supportive advising, her job also involved rehabilitation, training, consulting and networking with various co-operative parties. At the time of the second interview she was on the verge of transferring to a more administrative position, with more managing, informing and coordinating, but less client contact. This change was not fully confirmed yet; Amy was in the middle of salary negotiations concerning the matter, and was for the time being working in her usual position.

Amy had one tattoo on her ankle – a location not so often visible to others unless she was wearing shorts or a skirt. Her tattoo was a small Celtic symbol representing the supporting forces of life, and regardless of her interest toward body art, it had remained her only tattoo as the process of getting a new one had always been overrun by other things in life. Her initial motivation for a tattoo had had a lot to do with her family emphasizing femininity and masculinity as strictly separate phenomena with distinct qualities not to be mixed; within her family a simple act of not getting her ears pierced like other women do had been interpreted as a sign of low pain tolerance, and Amy had wanted to prove her family wrong and carry out her own individual esthetic values.

Amy had acquired her tattoo during her time in University when she had been studying psychology. The awareness of her future profession had played a part in choosing the location of the image, and Amy had preferred her ankle because it was so easy to cover if necessary. With the tattoo located on her ankle, she was able to naturally show it and hide it and regulate her tattoo's visibility with ease. She told she didn't pay much attention to her tattoo at this point of her career anymore, but tended to keep it hidden when making acquaintance with co-workers and clients. She explained she was more comfortable letting her tattoo show only once the people she worked with had gotten to know her better.

For Amy, tattoos were external markers of esthetic value, and though she felt that her tattoo was an essential part of her, she didn't think it was anything more special than a mere mole or a scar would've been. During the years it had become something very mundane for her, and she hadn't given it much thought after getting it. "It's a very small part of me, and there's so much more to me. Tattoo is just a fine adjustment in me", she explained. She didn't feel her tattoo represented her identity or her hopes and dreams, but did speculate that it might be a part of her open-minded and accepting attitude towards people and life; she didn't like to categorize what is normal and what is not, and didn't feel people should do certain things only because others do. "I don't believe that

people should live according to certain stereotypes or certain patterns", she said. This approach to people was an essential part of her outlook on life, but although she felt it was possibly indicated by her tattoo, her intention was not to model this attitude and behavior to her clients, and she saw no connection between her lifestyle and her tattoo. "I haven't thought the tattoo would have such a big role. It's just a tattoo", she figured.

Despite the relatively discreet motif and prominence of her tattoo, Amy had encountered prejudice and strong opinions concerning it during her studies and career, mostly coming from superiors, such as employers and a professor. She had had tattoos being judged as an unnatural part of a human body, inappropriate for a psychologist to have and signs of dishonesty and low morals. However, she hadn't believed in these claims at any point and had never questioned her own competence; her professional self-esteem had been unaffected by the commentary she had received.

Amy valued her clients' feedback over her employer's and colleagues' and had never got any negative comments from them. She had no worries about her tattoo affecting client situations or relationships in any way. She believed it had actually benefited some relations by giving her a certain level of street credibility in the eyes of her clients, and she had had clients coming forward to her with feelings like this.

If Amy's professional self-esteem was unhampered, so was her sense of belonging. Unlike the three other interviewees of the study, Amy felt like she belonged among her peers, and experienced feelings of not fitting in only in smaller groups of colleagues with differing attitudes or approaches. She had other psychologists as friends and identified herself as part of the people working in the trade. "I feel I fit in pretty well with psychologists", she concluded.

In spite of their differences and individual experiences revolving around their tattoos and careers, the interviewees had many similar thoughts and views regarding the three themes emerging from the data they had produced. The next chapter focuses on the possible meanings, interpretations and conclusions concerning the findings of the study.

## 4. DISCUSSION

The sense of not belonging, strong professional self-esteem and unprejudiced attitude seemed to be parts of the professional experience of tattooed psychologists and psychiatrists. Originally it was

expected that the professional identities of these tattooed professionals would be somehow challenged due to the undesirable perceptions typically associated with tattooed individuals, and the results partially support this assumption, but not quite as expected, for the professional challenges met by the interviewees had no negative outcomes and did not relate to their clients and patients.

The three heavily tattooed participants of the study, who possessed large, conspicuous and difficult-to-hide tattoos, all had a clear, distinct feeling of being an outsider among the other professionals of their trade. The sense of not belonging was also discovered in the study of Slay and Smith (2011) that was presented in the introduction and examined the professional identities of members of culturally stigmatized groups. They defined this experience as a feeling of being an outsider. When observing tattooed psychologists, the sense of not belonging was shared by the more noticeably tattooed individuals, who – according to the studies mentioned in the introduction – may be targets of several prejudiced views and attitudes and therefore even stigmatization. This might not only suggest that the experience discussed is connected to the nature of professional identity of stigmatized individuals in general, rather than tattooed professionals particularly, but also that tattooed individuals do possess a stigma status in the workplace and tattooed professionals, including psychologists, do construct their professional identity atypically.

These more intense feelings of not belonging that the three heavily tattooed subjects shared, had in one way or another persisted since the beginning of their studies, and seemed to have had their origins roughly around the same time their tattoo projects began. However, this does not imply that tattoos would've caused the sensation of not fitting in among their colleagues. The reasons for these feelings have probably been present much earlier but hadn't had the chance to manifest until studies. The fact that Amy lacked this sense altogether might suggest that feeling like an outsider is not caused by having tattoos per ce, but by some deeper feeling of being different. Tattoos could be an indicator of this perceived difference by serving as a way to express uniqueness, personality, and personal endeavors and advancements.

The three interviewees "not belonging" also shared another feature besides having considerably big tattoos. They all had notable interest in some artistic trade that in some way competed with their primary profession: Rory had done theatre and dance and had even thought about giving up psychology for those; Jack was actually more known as a writer than as a psychiatrist; Rose was a performing musician. Their professional role as a psychologist or a psychiatrist existed alongside with some other kind of creative, artistic role that they identified themselves with. Amy was not void of artistic interests either but for her they seemed to have remained as passions and hobbies.

Another aspect examined in the study was the professional self-esteem of the interviewed individuals. It was originally expected that professional self-esteem could be somehow challenged because of tattoos, according to several studies that implied that tattoos harm perceptions and might therefore hinder an individual's professional role or chances in the workplace. However, despite the initial expectation and the discovered sensations of being an outsider in their own trade, all the interviewees portrayed good professional self-esteem and had no worries about tattoos not fitting their professional role or harming their interaction with their clients or patients. Despite a few negative reactions revolving around their tattoos, they had mostly had only neutral or positive experiences. They trusted their own expertise – all in all, their self-esteem wasn't only strong, it was also well-deserved and justified, and had resulted from years of experience, genuine accomplishments and recognized skills – a set of qualities tattoos had nothing to do with.

Even the sense of not belonging among their colleagues hadn't hindered the interviewees' professional self-esteem – actually it seemed to have had an opposite effect. The sensations of being out of place seemed to reinforce the interviewees' faith in themselves and their skills by highlighting the importance of their competence in contrast with their unconventional appearance. They perceived themselves different from others and felt they deviated from the majority, so they were perhaps compelled to form a strong and steadfast sense of professional self-esteem in order to cope and succeed in an environment where they felt different. This would as well be in accordance with the study of Slay and Smith (2011) that proved that professionals of culturally stigmatized groups redefine their own ideas about their stigma to have positive connotations.

All in all, it seemed that the tattoos and stigma related to them did challenge the professional identities of tattooed psychology professionals, but did not interfere with the quality of their work or their interaction with clients and patients.

Being merely a case study, the results of this research cannot be generalized as such and it should be treated mostly as an indicative study to the subject of tattooed psychologists. Comparisons between tattooed and non-tattooed psychologists and their professional identities should still be explored, along with the effects of tattoos on all aspects of professional identity, not only the ones included in this study. The stigma status of tattoos in the workplace and its effects on the professional identities of different kinds of professionals are still subjects that have been studied relatively little, and further research is still needed.

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