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ASSOCIATION OF TATTOOING WITH PERSONALITY DEVELOPMENT AND ORGANIZATION FROM A PSYCHODYNAMIC PERSPECTIVE

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Association of Tattooing with Personality Development and Organization from a Psychodynamic Perspective

Dövme Yaptırmanın Psikodinamik Perspektiften Kişilik Gelişimi ve Organizasyonuyla İlişkisi

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ABSTRACT

In the psychoanalytic literature, tattoos are theorized to be a way of acting out, a defense mechanism, in order to cope with difficult experiences, emotions, unconscious conflicts, and anxieties that are impossible to contain or express otherwise. It is claimed to be stemming from fears of fusion and helps the person in separating and distancing from the object. It might also stem from fears of abandonment and a desire to merge with an idealized object. In light of the existing literature, aim of this study was to explore the associations of tattooing with level of personality organization and separation-individuation. Inventory of Personality Organization (IPO) and Separation Individuation Inventory (SII) were used to measure the aforementioned constructs. 394 participants took part in the online survey that was conducted to collect the data. Results indicated that higher tattoo coverage was associated with higher identity diffusion, higher impairment in reality testing and lower level of personality organization. Presence of tattoos was associated with higher reliance on primitive defenses, higher identity diffusion and lower level of personality organization. Logistic regression analysis showed that tattoo presence was predicted by use of primitive defenses. Additionally, a data-based model was generated using Structural Equation Modeling (SEM), whose results indicated that tattoo coverage, along with substance and alcohol use, intentional self-harm and accidental self-harm was indicative of a common latent factor, which we conceptualized as *embodied acting-out*, that was found to be associated with impeded development. These findings are discussed in reference to the existing literature on the psychodynamic significance of tattooing. Lastly, clinical implications and limitations of the present study along with recommendations for future research are presented.

Keywords: tattooing, personality development, level of personality organization, separation-individuation, embodied acting-out

ÖZET

Psikanalitik literatürde dövme, zor deneyimlerle, duygularla, bilinçdışı çatışmalarla ve başka türlü ifade edilmesi imkansız olan endişelerle başa çıkmak amacıyla bir eyleme dökme, bir savunma mekanizması olarak kuramlaştırılmıştır. Kaynaşma korkusundan kaynaklandığı ve kişinin nesneden ayrışmasına ve uzaklaşmasına yardımcı olduğu iddia edilmiştir. Terk edilme korkularından ve idealize edilmiş bir nesneyle birleşme arzusundan da kaynaklanabilir. Mevcut literatür ışığında, bu çalışmanın amacı dövme yaptırmanın kişilik organizasyonu düzeyi ve ayrılma-bireyleşme ile olan ilişkilerini araştırmaktır. Yukarıda bahsedilen kavramları ölçmek için Kişilik Organizasyonları Envanteri (IPO) ve Ayrılma Bireyleşme Envanteri (SII) kullanılmıştır. Verileri toplamak için gerçekleştirilen çevrimiçi ankete 394 katılımcı katılmıştır. Sonuçlar, deri yüzeyini dövme ile kaplamanın daha yüksek kimlik dağılımı, gerçeklik testinde daha yüksek bozulma ve daha düşük kişilik organizasyonu düzeyi ile ilişkili olduğunu göstermiştir. Dövme varlığı, ilkel savunmalara daha fazla başvurma, daha yüksek kimlik dağılımı ve daha düşük kişilik organizasyonu düzeyi ile ilişkili bulunmuştur. Lojistik regresyon analizi, dövme varlığının ilkel savunmaların kullanılmasıyla yordandığını göstermiştir. Ek olarak, Yapısal Eşitlik Modellemesi (SEM) kullanılarak veriye dayalı bir model oluşturulmuştur; bu model sonuçları, deri yüzeyini dövmeyle kaplamayla birlikte madde ve alkol kullanımı, kasıtlı kendine zarar verme ve kazara kendine zarar vermenin ortak bir latent faktörün göstergesi olduğunu göstermiştir. Bu latent faktör, engellenmiş gelişimle ilişkilendirilen *bedenleşmiş eyleme dökme* olarak kavramsallaştırılmıştır. Bu bulgular, dövmenin psikodinamik önemine ilişkin mevcut literatüre atıfta bulunarak tartışılmıştır. Son olarak, bu çalışmanın klinik çıkarımları ve sınırlılıkları ile birlikte gelecekteki araştırmalar için öneriler sunulmuştur.

Anahtar Kelimeler: dövme, kişilik gelişimi, kişilik organizasyonu düzeyi, ayrılma-bireyleşme, bedenleşmiş eyleme dökme

INTRODUCTION

Western tattooing has a relatively short history beginning in the 18th century. Tattooing was initially associated with antisociality, criminality (Edgerton & Dingman, 1962), and psychopathology in general (Fried, 1983), since it was associated with marginal identities of the society such as bikers, gang members and prisoners. Following its widespread popularization in the 90's, tattooing and its associations with personality has begun to be researched more thoroughly. Most of the empirical research on tattooing was through either a psychiatric, sociological or anthropological lens, hence, there were very few empirical studies on tattooing that investigated its associations with psychoanalytic concepts and constructs.

Theoretically, a handful of psychoanalytic authors attempted to delineate the unconscious meanings, functions, and the motivations behind the tattooing practice. When trying to understand tattooing, psychoanalytical significance of the skin is the starting point. Bick (1968) and Anzieu (1989) are the main contributors to the psychoanalytical understanding of the skin. Both emphasize the importance of touch in the early development of the infant, stressing that caregiver's holding, caressing, washing, dressing, and overall caretaking are building blocks of the mental structure (Lafrance, 2009). By these experiences, the infant gradually recognizes its physical boundaries and develops a sense of inside and outside. This mental representation of having physical boundaries is the blueprint of the developing skin-ego, a psychic envelope that provides an internal structure for the infant so that feelings, thoughts, and other mental content can be contained (Anzieu-Premmereur, 2015). As the infant initially lack this capacity, it has to be provided by the caregiver so that it can be introjected by the infant later. Skin, as the boundary between the self and the other, is considered to be central in the process of separation and individuation from the mother (Ulnik, 2008).

When the skin-ego development is stunted by traumatic experiences, intrusions, or neglect, lack of containment results in anxieties of disintegration and fragmentation (Anzieu, 1989). Affect regulation, impulse control, and maintaining self-cohesion becomes difficult, which prompts second skin formations such as tattooing to compensate for the early deficiencies in skin-ego development. Therefore, tattooing is argued to be a form of acting out, a defense mechanism that enables the management of unconscious conflicts, anxieties, and affects that are impossible to contain otherwise (Lemma, 2010). Those early impingements might result in "disembodiments" and dissociation of the mind and the body, which hinders the individual's ability to reflect on experiences and express feelings. Tattoos may be a preverbal way of communicating what is otherwise inexpressible (Albin, 2006; Namir, 2006). Tattooing is claimed to be brought about by fears of fusion and helps the individual in separating and distancing from the object, or by fears of abandonment, response to which the individual attempts to form a fusion with the idealized object (Karacaoğlan, 2012). Tattooing is also mentioned in relation to loss and trauma. They may facilitate the process of mourning, meaning making and processing difficult emotions after those adverse experiences (Maxwell, 2017; Samuel, 2010; Wonneberger, 2020). Due to its possible functions in affect regulation, self-integration, and separation, it is posited that tattoos may be acting as transitional objects, in Winnicott's (1953) term (Cimo, 2006; Murphy, 2013).

In light of the psychoanalytic literature on tattooing, it was possible that tattooing may be associated with personality organization and development. So, psychoanalytical concepts such as level of personality organization, set forth by Kernberg (1975, 1976), and separation-individuation, put forward by Mahler and colleagues (1975), was considered as relevant constructs to investigate in relation to tattooing. Hence, the present study aims to investigate the associations of tattooing with level of personality organization and separation-individuation. As there was no other study that investigated tattooing from a psychodynamic perspective using quantitative methods, findings of this study would be preliminary for future studies.

CHAPTER 1
LITERATURE REVIEW

1.1. TATTOO

In this section, literature review on tattoo as the main focus of the study will be presented. Initially, a brief history of tattooing practices throughout the world will be presented. It will be followed by a review of psychoanalytic literature on tattooing. In that section, theories and conceptualizations of psychoanalytic authors regarding tattooing will be presented.

1.1.1. A Brief History of Tattooing

Tattooing is a practice that was prevalent in many different cultures throughout history with various functions and meanings. First physical evidence of tattooing seen in the history of humanity dates back to 3300 BCE, which is observed on Ötzi the Iceman (Kosut, 2015). He bore a total of 61 tattoos spread throughout his body, which are thought to have a medicinal purpose since they coincide with Chinese acupuncture points. After that, earliest example of tattooing dates back to 2000 BCE, which are found on several female bodies in Egypt. Tattoo is derived from the word "tatau" from the Polynesian languages, which means "to strike," which was first brought to the Western world by Captain James Cook in the 18th century (Bernstein, 2015). While returning from his expedition in Southeast Asia, he brought a fully tattooed man named Omai and introduced him to the British public by putting him on exhibition. Also, his mariners had undergone the same process, keeping them as reminders of their journey. By this way, tattooing was introduced to the modern western world. Tattooing has religious, social, and political significance in Polynesian cultures and was embedded in the social structure (Gell, 1993). Tattoos were used as rites of passage into adulthood,

they marked social status and hierarchy, they signified the individual's belonging to and membership of a clan, a tribe or family. Therefore, it was a socially sanctioned practice and was integral to the communal life. In Ancient Greece and Rome, however, tattooing was used to mark slaves and criminals, signifying their lack of freedom and their bodies' possession by others (Caplan, 2000). In Japan too, tattooing was used on prisoners to mark their sentence, which evolved into an underground practice prevalent among outcasts and the marginalized, following its banning in Edo period (Kosut, 2015).

In western cultures, throughout most of 20th century, tattooing was associated with sailors, gang members, bikers, prisoners and the mentally ill, therefore it was viewed as a marginal practice and carried a stigma around it. First inquiries into the nature of tattoos and the tattooing practices, from this point of view, was often conducted on prison inmates or psychiatric hospital patients, and through a psychiatric lens, these studies often associated tattooing with criminality, antisociality (Edgerton & Dingman, 1962), schizophrenia and other psychotic disorders (Ferguson-Rayport, 1955), personality disorders (Grumet, 1983; Post, 1968), deviancy, and psychopathology in general (Fried, 1983). After 1990's, prevalence of tattoos in the western world has increased considerably. As tattooing became more and more popular and mainstream, stigma around tattooing began to decrease.

Parallel to this, research on the prevalence of tattooing and its psychological and behavioural correlates have flourished and led many researchers to investigate these aspects in the general population as well. One study showed that prevalence of tattooing in Australia was 15% for general population and 25-30% for people between ages of 20-39 (Heywood et al., 2012). They found that tattoos were associated with risk-taking behavior, cannabis use for women, and depression for men. Another study showed that prevalence of tattoos was 26% in the UK; with tattooed individuals scoring significantly higher on reactive rebelliousness, anger, and verbal aggression (Swami et al., 2015). In Germany, 9% of the general population and 27% of individuals aged 14

to 24 had tattoos, and being tattooed was associated with unemployment, higher sensation-seeking, and lower mental health (Stirn et al., 2006). In the US, one study found 24% prevalence among individuals who aged between 18 to 50, and found associations with longer jail-time, recreational drug, and alcohol use (Laumann & Derick, 2006). Intriguingly, some studies associated tattooing with higher self-esteem (Koch, et al., 2015) , while others associated it with lower self-esteem (Kertzman et al., 2019). Additionally, results of an experimental study have shown that getting tattooed has led to an increase in self-esteem and body-image satisfaction (Swami, 2011).

On the other hand, another line of research utilizing qualitative methodologies investigating the cultural and social aspects of tattooing focused particularly on the subjective experiences of the tattooed individuals, their motivations for getting tattooed and the various functions of tattooing. One of the most prominent functions of tattooing was related to the individuals' sense of self and identity (Lucas, 2009). Participants suggested that tattoos were a form of self-expression and an act of self-creation, that their tattoos served to create a coherent and consistent narrative regarding their selves and identities through connecting their past and present (Naudé et al., 2017). Tattoos represented their multiple selves and the tension between these selves across time, accomodated the internal dialogue between different parts of the self and acted as *anchors* for the self (Kosut, 2000). Many attributed personal, symbolic or religious significance to their tattoos, viewing them as spiritual expressions, and some viewing their tattoos as extensions of their selves (Mun et al., 2012). Tattoos acted as a way of memorializing a significant other after a loss, thus facilitating the grieving process (Alter-Muri, 2019). In the case of war veterans, tattooing was said to help them process and make sense of the loss and trauma they experienced, and deal with difficult emotions such as anger, guilt and grief (Welland & Dywik, 2018). Another prominent meaning given to the tattooing experience was related to the sense of autonomy, independence and control. Tattooing was also practiced by some sexual abuse and incest survivors, which allowed them to "conquer" their experiences and "reclaim"

their bodies through the act of tattooing (Pitts, 1998). Tattooing gave them a sense of ownership over their bodies and bolstered their sense of agency and empowerment (Strübel & Jones, 2017).

1.1.2. Tattooing in Psychoanalytic Literature

In cultures that practice tattooing traditionally, as in Polynesia, tattooing often acquire a magical and spiritual meaning apart from its social significance. For the Maori of New Zealand, tattoos, which they called "Moko," allowed the individual to connect with their ancestors of divine origin by connecting the body with their spirits (Kosut, 2015). By tattooing, the individual incorporated the spirit, which endowed them with "mana," meaning magical power and divine protection. By this way, tattoos gave them wholeness and completeness. This connection with the ancestor spirits reinforced belonging to the clan or the tribe and differentiated members from the other clans. Indigenous peoples of North America tattooed images of the totem of their tribe, in this case animals, that connected them to those supernatural spirits and distinguished them from other tribes (Karacaoğlan, 2012). In his book *Totem and Taboo*, Freud (1913) discusses the significance of totemic tattoos, which are animal images incised on the body, saying that they represented the totem of a clan, which actually originates from their ancestors and their protective spirits. There is a strict prohibition against killing or consuming the totem animal, and this taboo is central to totemism. This prohibition of touch underlies the taboo of incest and is closely linked to exogamy, so touching or killing a clanmate is also a taboo and is thought to bring evil spirits and disaster. This way, totem is transformed into tattoo and marks the taboo. Therefore, magical thinking and omnipotence of thoughts make up the underlying mode of thinking in totemic cultures and their tattooing practices (Karacaoğlan, 2012). In the western world, however, tattooing acquired new meanings and significance. This led some authors to try to unearth these meanings and understand the functions of tattooing, which are

presented in this section. Different authors pointed out multiple functions and meanings regarding tattooing, therefore they are subsumed under three main categories: tattoo as a second skin, tattoo as a transitional object, and reclaiming the body through tattooing.

1.1.2.1. Tattoo as a Second Skin

Importance of the body in the psychic life and development is first mentioned by Freud in *The Ego and the Id*, where he states "The ego is first and foremost a bodily ego; it is not merely a surface entity, but is itself the projection of a surface" (1923, p. 20). Then he goes on to say that "the ego is ultimately derived from bodily sensations, chiefly from those springing from the surface of the body. It may thus be regarded as a mental projection of the surface of the body", marking the centrality of body and body surface in the development of mental apparatus. Furthermore, in *Three Essays on the Theory of Sexuality*, he coins the skin as the "*erotogenic zone par excellence*", as a register for both pleasure and pain (Freud, 1905, p. 169).

Anzieu (1989) builds on Freud's prospects by saying that the skin is the first sensory organ to develop in the embryo and it develops from the same ectoderm with the central nervous system. In his theory of skin-ego, he argues that the infant is initially in an unintegrated state, and through the physical contact and holding of the mother they gradually begins to develop a sense of common skin with the mother that provides continuity and unity to their experience by serving as an auxiliary ego. Anzieu argues that acquisition of the feeling of an inside and an outside is provided primarily through touch sensations and coenesthetic experiences in the early development provided by maternal holding and caretaking (Anzieu-Premmereur, 2015). Therefore, skin-ego is the primary "psychic envelope" that enables the very possibility of thought and fantasy by providing an internal structure.

Boundaries of the self and the ego, as well as their coherence and continuity are initially absent, and this function of containment must be provided externally (Bick,

1968). For them to feel contained by his own body and skin, the infant first needs to experience being contained by a caregiver, specifically by the caregiver's body and skin. Then, this function of the body and skin as a container can be introjected to form an internal space capable of holding things together, parts of the self and sensations in this instance (Bick, 1986). This experience of being contained physically is acquired through the experiences of being fed, touched, washed, dressed, and caressed by the mother, namely through touch sensations that maintain the body of the infant (Lafrance, 2009). Ulnik posits that “When I touch that something objective which is 'outside,' beyond the boundaries of my body, I experience at the same time the presence of my own self" (Ulnik, 2008, p. 221). By this way, the infant first feels contained by the body and the mind of the caregiver, which will then, through introjection, gradually evolve into the ability to be contained by their own body and mind. At this point, Anzieu (1989) stresses the skin-ego's role in the process of individuation, self-other differentiation and the development of physical as well as psychic boundaries. Therefore, skin and the skin-ego simultaneously act as a container, a boundary, and a mediator (Perlman, 2019).

If this introjection of the caregiver's function as a psychic container fails in some way, either due to intrusive over-stimulation or its complete lack, Bick (1968) argues, the infant is unable to develop a sense of mental skin capable of containing and keeping together the self and its parts. Due to the lack of integrity and continuity in its sensory experience, the individual may experience their skin as like a "sieve," full of holes through which the self leaks out and eventually dissolves into boundless space, similar to the Bion's (1967) definition of the lack of containment as shapeless, "nameless dread". This results in extreme anxiety of disintegration and fragmentation, against which the person is impelled to react by substituting the lacking containing function of the skin through a primitive defensive mechanism, namely by developing a "second skin" (Bick, 1986). These second skin formations provide containment functions that the child previously failed to introject from the caregiver, and act as a way of denying the dependence on the object by developing a sense of pseudo-

independence (Bick, 1968). Anzieu (1989) terms this as a "secondary muscular skin, " which is a substitute for the primary skin-ego, seeking to protect the psychic apparatus from disorganizing stimuli. Ogden, writing about second skin formations, gives the example of wrapping the hospitalized schizophrenics in wet sheets, accompanied by the empathic presence of the medical staff, which "represents an attempt to almost literally supply the patient with a second skin by means of the provision of a firm, palpable, containing sensory and interpersonal surface" (1989, p. 41).

Inadequate emotional and physical caregiving may lead one to lack an adequately containing and coherent psychic skin. When someone experiences this lack of containment, and the resulting diffuse anxiety, they may defensively attempt to compensate for this lack by wrapping themselves in an "envelope of suffering" (Anzieu, 1986). Pain, as seen in the act of tattooing, helps one to come back to the body and to feel cohesive and alive by repositioning the self in the body through physical sensations (Karacaoğlan, 2012). Painful sensory stimulation protects the physical as well as psychic integrity (McDougall, 1989). This protects one from the prior emptiness of experience and the inability to express these experiences. Therefore, difficulties in regulating emotions, as well as representing and reflecting on experiences internally might be compensated through the act of tattooing (Miller, 2020). From this perspective, tattoos might be viewed as secondary skin formations, in Bick's (1968) term, which are attempts to make up for the early deficiencies in skin-ego development.

In a similar vein, Lemma (2010) posits that tattooing, like other body modifications, "serves the primary function of managing unconscious anxieties and conflicts that may not be reflected upon" otherwise (p. 21). Namir (2006) argues that early traumas, intrusions and impingements are registered in the body, resulting in "disembodiments" -splits between the mind and the body- as in the form of dissociation, depersonalization, and derealization. These states of disembodiment preclude the possibility of expression and communication. Thus, feelings and experiences that are otherwise inexpressible and incommunicable are provided with an area of expression

and symbolisation through the inscription on the surface of the body (Albin, 2006). What cannot be expressed in words seeks expression through action, what cannot be contained in the psyche seeks to be contained on the body, what cannot be verbally symbolized finds symbolization in a concrete manner, as in the act of tattooing. Cimo (2001) suggests that tattooing may also help individuals in restoring an embodied sense of self and identity and facilitate the integration of the body and mind which were split previously due to early deficiencies and difficulties.

1.1.2.2. Tattoo as a Transitional Object

For Winnicott (1953), an infant is initially in a symbiotic unity with the mother, in a state of symbiosis, with no internality or externality, nor self or other is delineated. The developmental task of the infant is to gradually acknowledge that mother is "not-me", that their being is limited to their physical body, and that there is an inside to them with the rest of the external world outside of them and out of their control. Therefore, the child has to give up of the illusion of their omnipotent control of their mother, eventually accept this loss and develop the capacity to tolerate her absence. At this point, Winnicott defines transitional object as the first "not-me" possession of a child, which functions as a substitute for the mother, the real object, in the process of separation from her. Transitional object represents an intermediate area of experience, that is neither fully "me" or "not-me", that is not fully internal nor completely external but in between, that is not omnipotently controlled but physically possessed by the child (Winnicott, 1953). It functions as to provide the child with the maternal holding environment's functions of soothing and comforting the child. Through the use of the transitional object, the child gradually introjects the qualities of the object and moves from oral erotism to true object-relating.

Tattoos, as Cimo (2001) argues, can function as a transitional object for the individual. They are placed on the surface of the skin, on the border between external

and the internal. Tattoo provides the functions of maternal holding environment, comforting and soothing the tattoo owner (Wonneberger, 2020). By this, tattoo protects the individual against the object's absence by attaching the (m)other on the surface of the body and acts as a substitute for the (m)other. In tattooing, similar to other body modifications, the body becomes a transitional object, a not-me possession, that can be used, changed, and controlled (Kafka, 1969). Karacaoğlan (2012) also points to the transitional phenomena when discussing the functions of tattoos, claiming that tattoos can provide a potential space for internal conflicts regarding separation to be projected and played out.

For others, tattoos function as a memorial for a lost one, as a way of mourning and remembering a loss, again through incorporating the other on the body and the skin (Murphy, 2013). Samuel (2010) also points to the multiple functions tattooing can have for people going through mourning as a result of a loss depending on the various needs of the individual. It can be an externalization of an internal object relationship or it can be an introjection and incorporation of an external object or one part of it. It can be an external representation of an internal loss or it can be a reminder of a loss, which shows that the other-ness of the object is acknowledged. Here, tattooing may be functioning as a way of working through difficult experiences and affects that one cannot psychically and internally work through, a way of concretizing the experience in a corporeal sense (Du Plessis, 2013). In other words, the relationship with the object is difficult to represent internally, connection with it is similarly difficult to maintain psychically, and the absence of the object is experienced as intolerable, thus the intermediate interface of the skin is used to contain all these as some kind of a transitional object in Winnicottian sense (Winnicott, 1953). However, constant remembrance through embodiment might be creating the illusion that the object is omnipotently controlled, while limiting the possibility of repression, displacement, and sublimation. It may be creating the fantasy that the loss has never taken place and the

connection with the object has never been severed, enabling the denial of the object's absence, rather than accepting it (Albin, 2006).

Incorporating the other on the body surface can also be a way of enacting a fantasy of merging with an idealized object or at least forming and preserving an idealized bond with the object (Albin, 2006). There are many examples of people getting "I love Mom," "Dear Mom," or their equivalents tattooed on their bodies, as a means of retaining a fantasy of an idealized object relationship, as some kind of a longing for the lost symbiotic unity with the mother, other caregivers or significant others (Kıvanç Altunay et al., 2021; Ulnik, 1988, as cited in Ulnik, 2008). A similar instance can be observed in prisoners or sailors, among whom tattooing is highly prevalent and is a common practice, by which they seek to maintain a sense of identity and unity through permanently marking their connection with a loved one, their belonging to a group or their relationship with another symbol on the skin (Ulnik, 2008). In here too, a specific object relational configuration that cannot be internally represented, articulated or maintained is defensively projected on the skin surface, therefore concretizing it by acting it out (Karacaoğlan, 2012).

1.1.2.3. Reclaiming the Body Through Tattooing

Lemma (2010), in her detailed examination of body modifications, builds on the theory that the body is formed and developed within the very early relationships in childhood, so our relationship with the body and the act of modifying it reveals unconscious conflicts regarding internal object relationships, and also highlights that body modification primarily functions to negotiate the ownership of the body. She argues that, especially for those who feel compelled to modify their bodies, these acts serve a life-sustaining role necessary in keeping the psychic equilibrium against the threats of self-fragmentation and psychotic decompensation. She proposes that body modifications are produced by three main unconscious fantasies regarding the body

and object relations. First, in *reclaiming fantasy*, the body is perceived to be occupied by an alien presence, against which body modification is utilized to reappropriate the body from this intruding object. Second, in *perfect match fantasy*, body is modified to attain a perfect body that will incorporate the object and its love, creating the sought-after fusion comprised of the ideal self and the ideal object. Third, in *self-made fantasy*, by re-creating the body and the self anew, the individual attempts to eradicate the object's presence and influence completely. This coincides with Bick's (1968) description of second skin formations as attempts to deny dependence on the object and to create a sense of pseudo-independence.

Tattoos are also mentioned as carrying the possibility of being therapeutic following traumatic experiences, which are experienced as disruptive intrusions into the physical and psychic integrity and continuity, by allowing the reclamation and restoration of the body from this disruptive blow (Crompton et al., 2021; Wonneberger, 2020). It can help to patch the holes opened on the potential space by traumatic experiences and facilitate the healing process following various traumatic events by allowing the person to make meaning of their experiences (Karacaoğlan, 2012). It also opens the possibility of self-expression and communication with others. It helps restore the individual's sense of agency and control over their life. In sexual trauma survivors, tattooing allows the individual to transform the pain and trauma into a meaningful symbol, which facilitates the processing and meaning-making of their experiences (Maxwell, 2017). Reclamation of the body through tattooing empowers the individuals and facilitates change by helping them leave the trauma behind and begin a new phase in their life and grow. Trust in the tattoo artist and being cared for by him/her is also mentioned to play a positive role in the healing process (Namir, 2006).

1.1.3. Tattooing and Personality Development

As discussed in the sections above, tattooing seems to have various functions and meanings. In light of the literature reviewed above, tattoos can be argued to have a considerable psychological significance in terms of personality organization and development of the tattooed individual. Tattooing practice was often associated with ego functions such as affect regulation, impulse control, reality testing, and identity formation. Therefore, Kernberg's (1975, 1976) concept of level of personality organization might be a relevant construct to investigate with regards to its relationship with tattooing. Also, tattooing was often attributed an object-relational significance with its conceptualization as a transitional object and as a way of reclaiming the body. As it is located on the boundary between the self and the external world, its role in object-relational conflicts, such as separation and individuation, is emphasized. Thus, the concept of separation-individuation as outlined by Mahler and colleagues (1975) was considered to be a relevant construct to investigate. In the next two sections, Kernberg's theory of personality development and Mahler's theory of separation-individuation will be described and their associations with tattooing will be outlined.

1.2. LEVEL OF PERSONALITY ORGANIZATION

In this section, the concept of level of personality organization as outlined in Kernberg's (1975, 1976) theory of personality development will be described. Next, the association between level of personality of organization and tattooing will be discussed.

1.2.1. Kernberg's Theory of Personality Development

Level of personality organization is a way of determining an individual's personality structure with regards to the overall functioning, central conflicts in their lives, the way they deal with their affects and the defenses they usually use, their sense of self and identity and their touch with external reality in general (McWilliams, 2011). Depending on the use of primitive defenses, the degree of identity integration and the capacity for reality testing, a person is said to have either a psychotic, borderline or neurotic level of personality organization. Every level of organization corresponds to a stage of development and reflects the developmental issues and core conflicts of each stage. Kernberg's (1987) theory was aimed at integrating ego psychology and object relations theory while staying loyal to Freud's drive theory. He saw the personality as developing through stages, each marked by the type of object relationships, drive and affects manifested within these relations, conflicts and defenses against them and developmental tasks a child has to achieve in each stage (Kernberg, 1975, 1976).

In the first stage, symbiosis, the baby experiences itself as in complete fusion with the mother and lacks the differentiation between self and other. The developmental task in this stage is to be able to differentiate between the self and the other, hence acknowledging the boundaries of the self, where failures result in the development of psychotic personality organization and structure, psychosis and schizophrenia (Kernberg, 1976). Therefore, a person with a psychotic personality structure is said to be in an undifferentiated state in which the external and the internal is not clearly delineated (McWilliams, 2011). Fixated in the symbiotic phase, the individual can never really make up what constitutes the self and lacks any sense of coherence, continuity and integrity in their identity, which may lead to confusion in basic concepts regarding the self, such as body image, age, gender or sexual orientation. They experience a profound sense of "ontological insecurity," as Laing (1965) puts it. Their sense of self is discontinuous and disorganized to a point where they are unsure

even if they exist at all, harboring existential terror and fear of annihilation. In order to defend against this "nameless dread," as Bion (1967) has depicted it, they utilize primitive defenses such as withdrawal, primitive projection and introjection, omnipotent control, idealization and devaluation in their primitive forms, acting out, somatization, extreme dissociation and splitting. Most of these defenses operate on a preverbal and presymbolic level, mostly in a primary process fashion (Kernberg, 1975), which as a result immensely distort the perception of reality and the ability to observe the self and others. Hence, a person with psychotic level of personality organization lacks any kind of self and identity integration, relies heavily on primitive defenses and has an impaired reality testing capacity, with issues and conflicts revolving around life and death, existence and annihilation, security and terror.

After differentiating self-object representations into self and object representations, in the second stage, the child uses splitting to keep apart good object relationship experiences with the mother, encoded with the representations of good self and good object, from bad object relationship experiences encoded with bad self and bad object representations (Kernberg, 1975, 1976). This defensive operation ensures, for the infant, the survival of an ideal and good object relationship from being contaminated by bad object relationship representations. Developmental task of this stage is to integrate these bad object representations with good ones, while also integrating bad self representations with the good ones, which results in overcoming the splitting, the attainment of whole object relationships and a capacity to tolerate ambivalence. When negative experiences and interactions overwhelm the infant, he/she fails to accomplish this developmental task, he/she sticks to the use of primitive defenses of splitting, projective identification, idealization, devaluation and acting out and functions on the borderline level of personality organization (McWilliams, 2011). When they reach adulthood, they remain unable to experience the self and others in a coherent, complex and integrated manner, thus experiences the self and others as alternating between all-good and all-bad aspects.

According to Masterson (1976), this stage corresponds with the rapprochement phase of the separation-individuation process, thus, a person with borderline personality organization struggles with the same conflicts, such as fear of abandonment and loss of love object on one hand and fear of enmeshment and loss of self on the other, therefore constantly going back and forth in the relationship with the object. As a result, object relations remain split, which is maintained through the use of primitive defenses, the individual experiences self and others in extremes without a three-dimensional quality; devoid of complexity and lacking in ambiguity (McWilliams, 2011). Distinguishing characteristic of borderline level of personality organization from psychotic level is the largely intact reality testing ability, apart from the occasional distortions caused by emotional turbulences that necessitate intensive use of primitive defenses (Kernberg, 1975).

After achieving object constancy by integrating the good and the bad parts of the object and also the self, which also corresponds with the healthy resolution of separation-individuation issues, the child is able to tolerate painful experiences and regulate distressing affects, attains adequate impulse control and can maintain an overall integrated, coherent, and continuous sense of self (Kernberg, 1975, 1976). Since affect regulation is adequate, complexity of social interactions and the ambivalence in the characteristics of others and the self are more easily tolerated, the individual does not feel the necessity to resort to primitive defenses and can maintain its emotional integrity and good object relationships with the help of more mature defenses. As a result, a person functioning on a neurotic level of personality organization maintains an overall integrated sense of identity and intact reality testing capacity. Main issues in the neurotic level revolve around oedipal issues, in which the person tackles with internal conflict between wishes, desires, their much-feared fulfilment and resulting guilt. Therefore, the person cultivates a complex internal world with conflicting feelings and desires that can be contained, symbolized, sometimes compromised through symptom formations that are ego-alien, without the pressing

need to act out and enact intolerable experiences as the borderline does (McWilliams, 2011).

1.2.2. Level of Personality Organization and Tattooing

When discussing about the deficiencies in ego functions and boundaries in borderline phenomena, Hull and Lane (1988) outlines the importance of body image and its intactness in relation to core conflicts and difficulties experienced by an individual functioning on the borderline level of personality organization in the following paragraph:

> Implicit in this idea of a breakdown in ego boundaries and a dedifferentiation between self and object representations is the notion of instability in body image and increased concern about body intactness. Thus, to restate Kernberg's thesis in terms of the patient's experience of his or her body in relation to the object: there is a need to control and protect oneself and one's body from the dangerous object, a wish to merge with the good object, and a breakdown in ego boundaries, including a blurring of self-other differences and a decreased sense of body intactness, at moments when primitive aggressive or fusional wishes are activated (Hull & Lane, 1988, p. 206).

Therefore, as in Bick's (1968) depiction of secondary skin formations, tattooing may provide a solution in preserving one's physical and psychic boundaries and object relations intact, when skin-ego development is deficient and is unable to contain aggressive and libidinal impulses. Body and skin remain as an arena for internal conflicts to be played out, as McDougall (1989) terms it in the evocative title of her book, *Theaters of the Body*. This active engagement with the body through self-injury, as Karacaoğlan (2012) argues, protects against "borderline psychotic tensions and emptiness triggered by both separation and symbiosis anxieties" (p. 19). Tattooing, in

this sense, can be seen as a way of handling object-relational conflicts in a corporeal and concrete sense. Hereby, lack of integration in self and object representations as well as in identity that is seen in psychotic and borderline level of organization might be associated with tattooing practices. Grumet (1983) also viewed tattoos as attempts to compensate for impairments in the ego functions and deficiencies in identity.

As discussed in the previous sections, tattooing seems to provide containment when psychic content is difficult to contain otherwise. As also seen in loss and mourning processes as well as in trauma, difficult experiences and affects that are otherwise seem uncontainable are defensively handled with tattooing practices (Murphy, 2013; Samuel, 2010). Tattoos may function as an object of idealization whose absence is somewhat denied (Albin, 2006) or that is omnipotently controlled (Lemma, 2010). Tattooing, as discussed in the previous sections, can be viewed as an acting out, as a coping mechanism that is an act of symbolization through concretization, that sometimes precludes further reflection (Karacaoğlan, 2012). Tattoos can both help in body and mind integration that is seemed to be split, but it can also deepen the split (Namir, 2006). Taken all these together, major difficulties in affect regulation, impulse control and anxiety toleration, which necessitate the use of primitive defenses, might also contribute to the tendency to get tattooed. Therefore, tattooing may be associated with the use of other primitive defenses, that are observed in psychotic and borderline level of personality organization.

Lemma (2010) emphasizes the anti-psychotic properties of tattooing, saying that tattooing defends against disintegration and fragmentation. Covering the body through compulsive tattooing might be an attempt to prevent the self from leaking out into the boundless space. Bick (1968) suggests that formation of a "second skin" is a primitive defensive maneuver to protect against psychotic dedifferentiation and disintegration. Moreover, tattoos are often attributed magical and spiritual meanings (Kosut, 2015). Karacaoğlan (2012) similarly argues that magical thinking and omnipotence of thoughts underlies the tattooing practices. Therefore, tattooing might

also be associated with impairments in reality testing capacity that is seen in psychotic level of organization.

1.3. SEPARATION-INDIVIDUATION

In this section, first, separation-individuation theory as outlined by Mahler and colleagues (1975) will be described. Then, the associations between separation-individuation and tattooing will be discussed.

1.3.1. Separation-Individuation Theory

Separation-individuation theory is a theory of personality development laid out by Margaret S. Mahler and colleagues (1975), which depicts the "psychological birth" of a human infant in the earliest days of its life following physiological birth. According to the theory, the infant goes through a process of increased differentiation, starting from an undifferentiated autistic state and gradually developing a separate and individual identity. To elucidate, Mahler suggests that this process of development takes place in three phases, which are normal autism, normal symbiosis, and separation-individuation.

In the phase of normal autism, which takes place in the first two months of life, the infant is mostly unresponsive to external stimuli and unaware of its environment (Mahler et al., 1975). Living in an autistic shell, it is in a state of "primitive hallucinatory disorientation," self-sufficient and unconditionally omnipotent (Ferenczi, 1913). Its experience is governed by physiological processes rather than psychological ones, going in and out of a sleep state only for need satisfaction. Therefore, primary function of this phase is acquiring physiological homeostasis and protection from over-stimulation through somatopsychic mechanisms (Spitz, 1965). This corresponds to Freud's (1914) "primary narcissism," an objectless state of omnipotent wish fulfillment

lacking any cathexis of the external. Here, the infant has no awareness of what is internal and what is external.

By the second month, its sensory awareness and libidinal cathexis moves from the interior organs to the periphery of the body, simultaneously, it develops a gradual awareness of a gratifying object, causing the autistic shell to crack eventually. With this newly-emerging awareness of a gratifying object, "the infant behaves and functions as though he and his mother were an omnipotent system—a dual unity with one common boundary" (Mahler et al., 1975, p. 44). Therefore, the infant experiences the mother-infant pair as an omnipotent dual unit in complete fusion, in which the "I" and the "not-I" is not quite differentiated. In this sense, normal symbiosis is a hallucinatory and delusional state, to which ego is thought to regress in psychotic disorders and processes (Mahler, 1952). In this phase, physical contact with the holding object and perceptual experiences on the surface of the body contributes to the development of a body-ego and the emergence of body image. Sense of selfhood emerges primarily as a bodily self, which late becomes the core of a sense of identity. Initially unable to differentiate between the self and the other, internal and external, infant gradually comes to grasp its physical separateness from its symbiotic partner and also develops a sense of interiority and exteriority. For symbiosis to be experienced healthily, holding of the caregiver and warmth is crucial to allow the infant to mold into the caregiver bodily. Eye contact and smiling is another crucial aspect that will facilitate the infant's comprehension if the caregiver as a "special" other. In the absence of warmth and nurturing, either in the form of touch or eye contact, the infant would have problems with both entering symbiosis and later letting it go.

From the sixth month onwards, the infant enters the separation-individuation phase. In Mahler's theory, individuation and separation is conceptualized as two intertwined but separable developmental lines (Mahler et al., 1975). Individuation is coined as the development of intrapsychic autonomy and the ego functions of cognition, memory and reality testing. Separation, on the other hand, addresses the differentiation,

boundary formation and distancing from the mother. Mahler divides separation-individuation phase into four sub-phases, namely *differentiation/hatching*, *practicing*, *rapprochement*, and *consolidation of individuality and emotional object constancy*.

In the first sub-phase of separation-individuation, *hatching*, infant's visual attention starts to drift away from the symbiotic orbit, it starts to distance itself from the mother's body and reaches out for objects in the environment (Mahler et al., 1975). As Greenacre (1971) states, "touching and taking in of the various body parts with the eyes (vision) helps in drawing the body together, into a central image beyond the level of mere immediate sensory awareness" (p. 208). By touching mother's and its own body parts (nose, ears etc.), by putting various objects or food into its mouth and into mother's mouth, infant develops a body-self and body image by the gradual acknowledgement of the separateness of their bodies, which helps the differentiation and integration of body image. Playing peekaboo has a significant meaning in this period, by which the child finds the mother by losing her first, but also is found by the mother and seen by her. Therefore, through her act of looking and seeing the child, the mother helps the child develop body-self awareness and body image. Unsatisfactory symbiosis experiences due to maternal indifference, depression or unpredictability might delay the hatching process. If the mother becomes clinging, intrusive and overwhelming out of her own symbiotic needs, the infant might differentiate prematurely and fervidly as a reaction.

Around one year of age, *practicing* sub-phase takes place, which is characterized by the infant's exploration of the environment enabled by its increasing motility, initially crawling on all fours and gradually moving on to walking. While *practicing*, the infant's interest in the environment and the objects grow rapidly, its ability to stand up and to walk enables the narcissistic investment of the environment, his/her own body and its newly attained competencies. Mesmerized by the interactions with the environment and its growing faculties and autonomy, the infant is in a "*love affair with the world*" (Mahler et al, 1975, p. 70). Libidinal cathexis is turned outwards

into the environment and onto the growing abilities, deriving narcissistic gratification from both. Cathexis of the mother seems to fade into background, though occasional checking of the mother is needed for emotional "re-fueling". One possibility is that inanimate objects can act as a "transitional object", in Winnicott's (1953) term, functioning as a substitute for the mother's soothing and calming qualities.

Next step in the process of separation-individuation is *rapprochment*, which starts at around sixteen months of age. This phase is characterized by the degression of the child's feelings of grandiosity, omnipotence, and obliviousness (Mahler et al., 1975). More aware of both its separateness from and dependence on the mother, the child's relationship with mother becomes more ambivalent. The child simultaneously needs more proximity with the mother and feels the need to push away from her, going back and forth. This ambivalence of conflicting needs is best exemplified by the child's alternating behaviours of shadowing the mother and darting away from her. When mother becomes overly present, fear of re-engulfment emerges; when the child is distant from the mother for too long, fear of isolation, object loss and abandonment surface, leaving the child with two anxieties to bounce between.

Splitting mechanism is prevalent in this period, alternation of intense reactions towards the mother are caused by the child's perception of mother as "good" or "bad," according to the situation and depending on the child's internal state (Mahler et al., 1975). The child has a tendency to use the mother as an extension of himself, expect his wished to be catered for instantaneously and the feelings of his/her and the mother's omnipotence to prevail. Thus, mother's shortcoming and failures are received with disappointment and anger, resulting in temper tantrums, acting out and coercive behaviours. The child is still unable to differentiate between his/her own feeling and wishes and those of the mother, which corresponds with Ferenczi's (1913) introjective-projective period. As a result, his/her own wish for autonomy can at times be perceived as mother's desire to leave him, further complicating the resolution of the conflict inherent in this stage. Mother's presence, availability and tolerance of the child's

ambivalence are essential for the child's development of confidence and self-esteem. Hence, mother's optimal distance and presence are vital for the child to be able to tolerate and eventually resolve the conflict in this phase, which is regarded as a crossroads for personality development. Splitting, lack of differentiation between self and other, coercion and acting out are all characteristics of borderline conditions (Mahler, 1975). Separation anxiety and intense fear of losing object love are also associated both with this phase of development and borderline phenomena, which is therefore thought to be a fixation in the rapprochement phase (Mahler, 1971).

In the next sub-phase *consolidation of individuality and emotional object constancy*, beginning in the third year, the child begins to achieve object constancy through the cathexis and internalization of a positive image of the mother, which enables the child to blend and fuse the "good" and "bad" aspects of the mother into one whole representation and also enables the fusion of aggressive and libidinal drives (Mahler, 1975). This internally cathected positive object representation enables the child to function autonomously in the absence of the mother and to tolerate discomfort and various tensions in the meantime. Here, ego development is rapidly taking place by the acquisition of verbal communication, which enables more effective affect regulation, as well as other cognitive functions of fantasy, role playing and reality testing. Parallel to the internalization of the good object and fusion of the object's good and bad parts, the child is able to differentiate the internal representations of the self from the object representations, paving the way to a more demarcated and integrated self-identity, to the emergence of self boundaries as well as the beginnings of gender identity. Besides this ego structuralization, internalization of parental demands marks the development of superego precursors.

1.3.2. Separation-Individuation and Tattooing

Anzieu (1989) conceptualizes skin-ego as a mental representation and also a substitute of maternal holding, "a chronologically intermediate structure between fusion with the mother and differentiation" (p. 4), related conceptually to the transitional object of Winnicott (1953). If differentiation of self and other is complicated during separation-individuation process by either merger or premature separation, the body remains available as an object for affect regulation and relational issues (Murphy, 2013). When abandonment, fusion, and annihilation anxieties build up, impulse to get tattooed might surface (Namir, 2006). Here, tattoo can be viewed as an attempt to anchor a certain distance and position in object relations by establishing a boundary (Cimo, 2001). Just as transitional object is an intermediary in the process of separation and individuation from the symbiotic mother and is crucial in the development of an individuated self and identity, tattooing might fulfill this function when "desires for intimacy and distance, commonality and difference, identification and individuation" arise (Karacaoğlan, 2012, p. 25).

One example of this enactment of symbiotic anxieties and internal conflicts on the body through tattooing may be the *reclaiming fantasy* (Lemma, 2010). Mahler outlines the importance of body and its ownership in the process of separation-individuation in the following paragraph:

> If there was a major failure of integration during the first three subphases of separation-individuation, particularly on the level of gender identity, the child might not have taken autonomous, representationally clearly separated possession of his or her own bodily self, this partly because he or she did not experience the mother's gradual relinquishment of her possession of the toddler's body (Mahler, 1971, p. 416).

Therefore, body can act as an object in the service of differentiation from the mother and integration of the self and identity, if an individual had less than optimal experiences in the separation-individuation process during childhood (Cimo, 2001; Karacaoğlan, 2012). Even though one has had a fairly successful resolution in separation-individuation process, various traumatic experiences can abruptly disrupt the physical and psychic integrity and continuity of the individual, as a response to which tattooing may facilitate the healing process by helping the person reclaim his/her body and re-establish control and agency in their lives (Maxwell, 2017; Samuel, 2010; Wonneberger, 2020).

In addition to these, incorporation of the other through tattooing, whether due to loss or due to needs for identification with and introjection of the object or some parts of it, can also be conceptualized as related to separation-individuation issues and difficulties. Lemma's (2010) *perfect match fantasy,* which aims at establishing a fusion between an idealized self and an idealized other through incorporating the object onto the skin through tattoos seems relevant here. In the instance of a loss, tattooing may be viewed as either a healthy contributor to mourning process by facilitating the internalization of the other and acknowledgement of its loss by being a "reminder" or a substitute (Samuel, 2010), or it can be viewed as a defensive move to deny the absence and loss of the object by implanting the object on the body surface, therefore magically establishing an illusion of unity and fusion (Albin, 2006).

1.4. THE CURRENT STUDY

In light of the literature review presented above, current study aims to explore the various psychodynamic implications that tattooing may have. In order to do this, separation-individuation and level of personality organization were seen as relevant constructs to investigate, given the motivations for getting tattooed and meanings attributed to it in the psychoanalytic literature revolve around desire for fusion,

annihilation anxiety, autonomy, individuality and reclamation of the body on one side; and affect regulation, impulse control, conflict resolution, self-integration and identity consolidation on the other side. Therefore, these two constructs are chosen to understand if tattooing has an object relational significance and if tattooing has a compensatory function in intrapsychic economy and in maintaining psychic equilibrium. As the current study is exploratory and descriptive in nature, no hypotheses are specified. Relationship of tattooing with demographic, background and personality characteristics will be investigated. The associations of tattoo presence, total number of tattoos and percentage of the body surface covered with tattoos with the aforementioned constructs of separation-individuation and personality organization will be explored.

CHAPTER 2
METHOD

2.1. PARTICIPANTS

A total number of 421 participants completed the online survey. Due to missing data or being outliers in one of the study variables, 27 participants were removed from the data. The remaining 394 participants constituted the sample of the current study.

Demographic characteristics of the participants are presented in Table 2.1. Participants' age ranged between 18 and 45, with a mean of 28.08 (*SD* = 5.164). In terms of gender, 78 of the participants identified themselves as male (20%) and 309 as female (80%). In terms of relationship status, 154 participants identified themselves as "not married/not in a relationship" (42%), 158 identified as "not married/in a relationship" (42%), and 61 identified as married (16%).

In terms of level of education, 45 participants graduated from high-school (11%), 223 had an undergraduate (bachelor's or associate) degree (57%) and 126 had a graduate (master's or doctoral) degree (32%). 204 of the participants were not students (52%). Of those who were currently studying, 80 were undergraduate students (20%) and 108 were students at graduate (master's or doctoral) level (28%).

In terms of employment, 127 of the participants currently did not work (33%) while 262 were employed (67%). Of those who were employed, 23 identified their line of profession as "academic" (9%), 24 as "education" (10%), 64 as "mental health/healthcare" (26%) and 126 as "private sector" (55%). Regarding the level of income, 103 of the participants defined themselves as having low level of income (26%), 169 as having middle level of income (43%) and 112 as having high level of income (28%).

Table 2.1.

Demographic Characteristics of Participants (N = 394)

		N	%
Gender	Male	78	20
	Female	309	80
Education Level	High School	45	11
	Undergraduate Degree	223	57
	Graduate Degree	126	32
Student Status	Undergraduate Student	80	20
	Graduate Student	108	28
	Not student	204	52
Employment Status	Employed	127	33
	Not employed	262	67
Profession	Academic	23	9
	Education	24	10
	Mental health/Healthcare	64	26
	Private sector	138	55
Income Level	Low	101	27
	Middle	169	44
	High	112	29
Relationship Status	Not married - Not in a relationship	154	42
	Not married - In a relationship	158	42
	Married	61	16

Overall, the sample mostly constituted of not married (84%), highly educated (89%) women (80%) who were more or less evenly dispersed in terms of age, employment status and student status. Also, participants were quite diverse in terms of level of income.

Apart from tattoo variables and demographic information, participants were asked about psychiatric/psychological help history, their reason to get psychological/psychiatric help, whether they have benefited from the process or not, psychiatric drug use, frequency of alcohol and substance use, self-harm and accidental harm. For psychiatric/psychological help history, 139 reported that they were currently getting help, 139 reported that they had help in the past, while 109 reported no history. For their reasons, 52 answered as *anxiety*, 36 as *depression*, 19 as *anxiety and depression*, 4 as *obsessive-compulsive disorder*, 23 as *emotional difficulties*, 22 as *relational problems*, 9 as *trauma/loss*, 30 as *for insight* and 21 as *other*. For psychiatric drug use, 67 reported that they were currently using psychiatric drugs, 116 reported that they have used psychiatric drugs in the past, while 209 participants said they never used. When they were asked if they think they benefited from their psychiatric/psychological help process, 204 participants reported that they have benefited, 48 reported that they did not benefit, and 51 reported that they were uncertain about its benefit. For alcohol use frequency, 38 responded as *never*, 76 as *less than once a month*, 134 as *a few times in a month*, 99 as *1-2 days a week* and 45 as *more than 3 times a week*. Alcohol use frequency was reduced to 3 categories when using for analyses for the distribution to be more evenly and sample sizes for each category to be adequate. Therefore, alcohol use for 114 participants that responded *never* or *less than once a month* were categorized as *never/very rarely*, 134 participants who responded *a few times in a month* were categorized as *occasionally*, 144 participants that responded *1-2 days a week* and *more than 3 times a week* were categorized as *regularly*. For substance use frequency, 272 answered as *never*, 78 as *rarely* and 33 as *regularly*. For self-harm, 93 reported that they have intentionally harmed themselves in the past and 285 reported that they have not harmed themselves. For accidental harm, 150 reported harming themselves accidentally while 239 reported that they do not harm themselves accidentally.

2.2. INSTRUMENTS

The instruments used in the study were Demographic and Tattoo-Related Information Form, Separation Individuation Inventory (SII) and Inventory of Personality Organization (IPO), respectively.

2.2.1. Demographic and Tattoo-Related Information Form

Demographic and Tattoo-Related Information Form (see Appendix B) was developed by the researchers which included questions regarding participants' age, gender, level of education, working status, line of profession, student status, student level, level of income, relationship and marital status, psychiatric/psychological help history, their reason to get psychological/psychiatric help, whether they have benefited from the process or not, psychiatric drug use, frequency of alcohol and substance use, self-harm and accidental harm.

Regarding the tattoos, presence or absence of tattoos were initially asked. For those who did not have a tattoo, additional questions regarding whether they would like to get tattooed in the future was asked; for those who had a tattoo, their willingness to get tattooed again was asked. For those who had tattoos, additional questions were asked regarding the location of tattoos, total number of tattoos, total percentage of the body surface covered with tattoos, age of the participant when they got tattooed for the first time, motivations for getting tattooed, description of their most meaningful tattoo, regret over a tattoo, reason for regret, tattoo removal and reason for tattoo removal.

2.2.2. Separation Individuation Inventory (SII)

Separation Individuation Inventory was originally developed by Christenson and Wilson (1985) to measure issues regarding separation-individuation based on Mahler's (1975) psychoanalytical developmental theory. It consists of 39 items of 10-

point Likert scale (1 = totally disagree, 10 = totally agree) questions and has an internal consistency of .92. Inventory has three subscales that measure differentiation difficulties, splitting and separation-individuation related relationship problems, respectively. Items 7, 15, and 18 are reverse scored. Scores for the scale are calculated by summation, which results in a possible range of scores between 39 and 390.

Turkish adaptation of the scale was done by Göral Alkan (2010) which had internal consistency of .90 for the total scale, .80 for Differentiation Difficulties, .78 for Splitting and .65 for Relationship Problems. However, it is argued by the authors that the scale has a unitary factor that explains 49% of the variance (see Appendix C).

2.2.3. Inventory of Personality Organization (IPO)

Inventory of Personality Organization was developed by Lenzenweger et al. (2001) in order to measure the level of personality organization based on Kernberg's theory to differentiate between psychotic, borderline and neurotic levels of personality organization. It has three sub-scales that measure primitive defenses, identity diffusion and reality testing. Original study consists of 57 items using 5-point Likert scale (1 = never true, 5 = always true) with internal consistencies of .91 for the total scale, .81 for Primitive defenses, .88 for Identity Diffusion and .88 for Reality Testing subscales. There are no reverse items in the scale.

Turkish adaptation was done by Ceran Yıldırım and Yüksel (2021), in which they shortened the scale to 31 items with internal consistencies of .90 for the total scale, .94 for Primitive Defenses, .85 for Identity Diffusion and .84 for Reality Testing (see Appendix D). Scores for the scale are calculated by summation, which results in a possible range of scores between 31 and 155.

2.3. PROCEDURE

After obtaining ethics approval from the Ethics Board, study materials were delivered via an online survey platform. Upon the approval of the Informed Consent Form (see Appendix A), study instruments (Separation Individuation Inventory, Inventory of Personality Organization, and Demographic and Tattoo-Related Information Form) were presented in the above order. It took approximately 20 minutes to complete all scales. In the Informed Consent Form, participants were informed about the purpose of the study, their right to withdraw from the study anytime, and confidentiality. Participants were encouraged to contact the researcher in case of questions or concerns. Invitations to participate in the online survey was shared through various e-mail groups and social media platforms.

2.4. DATA ANALYSIS

In this study, dependent variables are categorical and continuous tattoo variables, while the independent variables are demographic and background characteristics as well as the subscale scores of Separation Individuation Inventory (SII) and Inventory of Personality Organization (IPO). First, descriptive statistics for continuous tattoo variables such as first tattoo age, total tattoo number and tattoo percentage, and categorical tattoo variables such as tattoo presence, tattoo location, tattoo plan, tattoo regret and tattoo removal were calculated and reported. Open-ended answers to first tattoo motivation, description of the most meaningful tattoo, reason for tattoo regret and reason for tattoo removal were categorized into common categories by the authors and their frequencies are reported.

As preliminary analyses, chi-square tests were conducted in order to explore the relationships between categorical tattoo variables and demographic as well as background characteristics. T-tests and analysis of variances (ANOVAs) were conducted to investigate the relationships between continuous tattoo variables and

demographic as well as background characteristics. Then, Pearson correlation analyses were conducted to explore the associations among personality scales as well as the correlations between continuous tattoo variables and personality scales. As planned, binary logistic regression analysis is conducted to determine the predictors of tattoo presence. To analyze the predictors of number of tattoos and tattoo coverage, stepwise multiple regression analyses were planned and conducted. However, linear predictive models failed to account for the variance in tattoo coverage due to multicollinearity issues. Additionally, the preliminary inspection of data revealed strong associations among several background characteristics (e.g., alcohol use, substance use, and self-harm) and tattooing behaviors. Thus, a data-based model was formulated to explore the relationships between personality scales, tattoo percentage and the background characteristics that are found to be associated with tattooing in the preliminary analyses. Two exploratory aims were specified: (1) to examine the role of tattoo percentage as an indicator of a latent factor alongside the background characteristics and (2) to examine the association of personality characteristics with the latent factor. Structural equation modeling (SEM) was conducted to test this data-based model.

CHAPTER 3
RESULTS

Findings of the present study will be presented in six main sections. Firstly, descriptive statistics for tattoo variables will be presented. In the second section, preliminary analyses aiming to investigate the relationships between demographic and background characteristics with the tattoo variables will be presented. This section will include chi-square tests for categorical tattoo variables such as tattoo presence, plan to get tattooed, tattoo visibility, and first tattoo motivation, and independent samples t-tests and one-way analysis of variances (ANOVAs) conducted for continuous tattoo variables such as age of the first tattoo, total number of tattoos and percentage of tattoo coverage. Following that, Pearson correlation analyses will be reported to show the relationship between continuous tattoo variables and the scale scores of Separation Individuation Inventory and Inventory of Personality Organization. In the third section, logistic regression analysis that was conducted to explore which personality dimensions predict tattoo presence will be presented. Additionally, linear regression analyses that were conducted to examine which personality dimensions predict total number of tattoos and percentage of tattoo coverage will be mentioned. Lastly, Structural Equation Modeling (SEM) that was conducted to explore the relationship between personality variables, tattoo percentage and the background characteristics that were found to be associated with tattooing in the preliminary analyses will be reported.

3.1. DESCRIPTIVE STATISTICS FOR TATTOO VARIABLES

Regarding the tattoos, presence of tattoos was asked first, answers showed that 236 participants had a tattoo (60%) and 158 did not have a tattoo (40%). For non-tattooed participants, their willingness to get tattooed in the future was asked, to which 64 participants said that they were willing to get tattooed (40%), 33 said that they were

not willing to get tattooed (21%), and 61 said that they were indecisive (39%). For the participants who already had tattoos, three further questions regarding the total number of tattoos, total percentage of the body surface covered with tattoos, and the age at which they got their first tattoo were asked (See Table 3.1 for descriptive statistics). For those 233 participants who responded, mean for the total number of tattoos was 3.31 (*SD* = 2.66), with a range of 1 to 12. Mean for the percentage of tattoo coverage was 6.97 (*SD* = 6.04), and the range was between 1 and 32. Mean for the age of the first tattoo was 22.23 (*SD* = 5.22), and it ranged between 13 and 40.

Table 3.1.

Descriptive Statistics for Tattoo Variables

	Min	Max	*M*	*SD*
Number of Tattoos	1	12	3.31	2.66
Tattoo Coverage (%)	1	32	6.97	6.04
Age of the First Tattoo	13	40	22.23	5.22

Tattooed participants were asked about the parts of their body they had a tattoo on, the options were *hand/wrist*, *arm/shoulder*, *foot/ankle*, *leg*, *genital area*, *lower torso* (waist, hips, belly etc.), *upper torso* (chest, back etc.), *neck/head* and *face*, frequencies of which are shown in Table 3.2. Most common locations were *arm/shoulder* (39%) and *hand/wrist* (25%), while the least common was *genital area* (0.3%). There was no participant who had a tattoo on their face.

Table 3.2.

Frequencies for Categorical Tattoo Variables

		N	%
Tattoo Locations	Arm/Shoulder	155	39
	Hand/Wrist	97	25
	Upper torso (chest, back etc.)	88	22
	Foot/Ankle	57	14
	Lower torso (waist, hips, belly etc.)	39	10
	Leg	37	9
	Neck/head	28	7
	Genital area	1	0.3
Tattoo Visibility	High visibility	112	47
	Medium-low visibility	124	53
Motivation for Tattooing	Cosmetic/Aesthetic	63	31
	Identity Consolidation	42	20
	Relatedness	36	17
	Autonomy/Individuality	34	17
	Impulsivity/Novelty-seeking	31	15
Tattoo Descriptions	Symbol	45	21
	Nature-related	33	15
	Drawing/Design	30	14
	Writing	25	12
	Name/birth date/picture	25	12
	Animal	25	12
	Space-related	11	5
	Fictional/mythological animal	10	5
	Fictional/mythological human	9	4

The tattoo locations were categorized with regards to their visibility status, and every participant was categorized into either "medium-low visibility" or "high visibility" status. If the participant had tattoos in multiple areas indicating different visibility levels, highest level was applied. *Hand/wrist*, *neck/head* and *face* locations were categorized as indicating high visibility. Locations *Arm/shoulder*, *foot/ankle*, *leg*, *upper torso*, *lower torso* and *genital area* were categorized as indicating medium-low visibility, since they are areas that are often covered or can be covered with clothing. Frequencies of visibility are also shown in Table 3.2. Approximately half of the participants had highly visible tattoos (47%) and half of the participants had tattoos with low visibility (53%).

The participants were asked to state their motivation to get a tattoo and the responses converged into five main categories: Cosmetic/Aesthetic (e.g. because it looked good, to be more attractive, as an ornament) Impulsivity/Novelty-seeking (e.g. I was drunk, out of curiosity, to try something new, because I was bored), Relatedness (e.g. as a memorial for a loss, to remember a significant one or a pet, for commonality with a partner/friend/family member, to carry something reminiscent of someone I admire), Autonomy-Individuality (e.g. to rebel against my family, to prove oneself, to feel independent, to feel unique), and Identity Consolidation (e.g. as a political statement, because it represents my worldview, because it represents me, to carry something that defines me permanently) which are shown in Table 3.2. It was observed that for the tattooed participants, the most common motivation was Cosmetic/Aesthetic (31%), which was followed by Identity Consolidation (20%), Relatedness (17%), Autonomy/Individuality (17%) and Impulsivity/Novelty-seeking (15%).

In terms of tattoo descriptions of their most meaningful tattoo, the most common type of tattoo was a symbol (21%), followed by writing (12%), nature-related (leaves, trees, fruits, landscape etc.) tattoos (15%), specific drawings or designs individually made for them (14%), a name, birth date or a picture of a significant person or a pet (%12), and an animal (12%), which are all shown in Table 3.2.

For those who had regrets over a tattoo (n = 48), reasons were as following: 5 participants said it was because their tattoo was worn out, 10 because they were not satisfied with it anymore, 11 because it did not look good, 11 because it did not represent them anymore, 4 because they had a break-up, and 7 because it was poorly executed by the tattoo artist. For those few participants who already got a tattoo removed (n = 6), 1 was due to a break-up, 1 because it did not represent the person anymore, 1 because it was worn out, and 3 because they were not satisfied with it anymore. Reasons for regret and tattoo removal are presented in Table 3.3.

Table 3.3.

Reasons for Tattoo Regret and Tattoo Removal

		N	%
Reason for Regret	Not looking good	11	23
	Does not represent anymore	11	23
	Not satisfied	10	21
	Poor execution by tattoo artist	7	16
	Worn out	5	10
	After a break-up	4	8
Reason for Removal	Not satisfied	3	1
	Worn out	1	0.3
	Does not represent anymore	1	0.3
	After a break-up	1	0.3

Additionally, Pearson correlation analysis was conducted between tattoo variables to explore the associations among different variables. As expected, total number of tattoos and the percentage indicating how much of the body was covered with tattoos were found to be positively correlated, $r(228) = .440$, $p < .001$; yet, 19% common variance indicate that these two measures indicate different aspects of tattooing. Age of the first tattoo was found to be negatively correlated with total number

of tattoos, $r(228) = -.335$, $p < .001$. Age of the first tattoo was also found to be negatively correlated, although to a weaker degree, with percentage of tattoo coverage, $r(230) = -.182$, $p = .006$.

3.2. PRELIMINARY ANALYSES

As part of preliminary analyses, first, associations of tattooing with demographic and background characteristics are investigated and reported. Then, descriptive statistics and inter-correlations of personality scales are presented. Finally, correlations between tattoo variables and personality scales are examined and presented.

3.2.1. Demographics, Background Characteristics, and Tattoo Variables

In the first step of preliminary analyses, separate Chi-square Tests of Independence were performed to examine the relationship between categorical tattoo variables such as tattoo presence, plan to get tattooed, tattoo visibility, and motivation for getting tattooed with the categorical demographic variables such as gender, level of education, student status, employment status, level of income, relationship status, psychological/psychiatric help history, psychiatric drug use, perceived benefit from psychological/psychiatric help, alcohol use frequency, substance use frequency, intentional self-harm and accidental self-harm. In order to explore the relationship between tattoo presence and age, independent samples t-test was conducted. For continuous tattoo variables such as total number of tattoos, percentage of tattoo coverage and age of the first tattoo, Pearson correlation analysis was conducted to explore their relationship with age. One-way analysis of variances (ANOVAs) were conducted to explore the relationship between continuous tattoo variables and the categorical demographics and background characteristics. For the sake of convenience, demographics and background variables that are significantly associated with at least

one of the tattoo variables will be included. So, demographics and background characteristics that were not significantly associated with any of the tattoo variables will not be presented.

Firstly, gender was found to have no significant association with any of the tattoo variables. In terms of age, no significant associations were found for tattoo presence, total number of tattoos and percentage of tattoo coverage. The age of the first tattoo was the only tattoo-related variable significantly associated with age. Age was positively correlated with age of the first tattoo, $r(233) = .606$, $p < .001$. Level of education, student status and employment status was also found to have no significant association with any of the tattoo variables.

In terms of relationship status, no significant associations were observed for tattoo presence, the total number of tattoos, percentage of tattoo coverage, and the age of the first tattoo. However, the Chi-square test showed that there was a significant relationship between relationship status and planning to get tattooed in the future, $\chi^2 (4, N = 151) = 12.916$, $p = .012$. Of the married participants, 30% reported that they had a plan to get tattooed, whereas more than 40% of the non-married participants, both the ones who are currently involved in a relationship and the ones who are not, had a plan to get tattooed, indicating that married individuals were less likely to have a plan to get tattooed. Additionally, 50% of the participants who are not married and in a relationship were indecisive about getting tattooed, while 37% of the ones who are married and 30% of the ones who are single reported that they were indecisive, indicating that both married and single participants were more resolved in their plan to get tattooed.

In terms of psychological/psychiatric help history, a significant relationship was found between psychological/psychiatric help history and tattoo presence, $\chi^2 (2, N = 387) = 7.228$, $p = .027$. Participants who did not have any psychological/psychiatric help history (49%) are less likely to be tattooed than participants who did get help in the past (66%) and who are currently getting help (61%). However, analysis of

variances (ANOVAs) conducted for total number of tattoos, percentage of tattoo coverage, and age of the first tattoo showed that there was no significant difference in terms of psychological/psychiatric help history.

In terms of perceived benefit from psychological/psychiatric help, no significant association was observed for tattoo presence. One-way ANOVA showed that those who were uncertain about if they benefited from psychological/psychiatric help or not (M = 2.8, SD = 3.099) had significantly higher total number of tattoos, when compared both to those who did not benefit (M = 1.63, SD = 2.614) and those who benefited (M = 1.90, SD = 2.485), $F(2, 300) = 3.039$, $p = .049$. Similarly, one-way ANOVA conducted for tattoo coverage demonstrated that those who were uncertain about its benefit (M = 6.78, SD = 7.058) had significantly higher percentage of their body surface covered with tattoos, compared to those who did not benefit (M = 3.96, SD = 6.206) and those who benefited (M = 3.93, SD = 5.538), $F(2, 300) = 4.903$, $p = .008$. Lastly, one-way ANOVA showed that there was no difference between groups in terms of age of the first tattoo.

In terms of psychiatric drug use, significant relationship was found with tattoo presence, χ^2 (2, N = 392) = 17.829, $p < .001$. While 50% of the participants who have never used psychiatric drugs had tattoos, 72% of the participants who had used psychiatric drugs in the past and 69% of the participants who are currently using psychiatric drugs was tattooed. Additionally, another chi-square test showed that there was a significant relationship between psychiatric drug use and tattoo visibility, χ^2 (2, N = 235) = 8.405, $p = .015$. While 63% of the participants who are currently using psychiatric drugs had tattoos that were highly visible, 49% of the participants who have never used psychiatric drugs and 37% of those who used psychiatric drugs in the past had highly visible tattoos. One-way ANOVA conducted for total number of tattoos revealed that participants who were currently using psychiatric drugs had significantly higher number of tattoos (M = 2.69, SD = 3.322) compared to participants who have never used psychiatric drugs (M = 1.56, SD = 2.282), $F(2, 389) = 5.583$, $p = .004$. One-

way ANOVA conducted for tattoo coverage showed that those who have never used psychiatric drugs had significantly lower percent of their body covered with tattoos (M = 3.24, SD = 5.008) compared to those who are currently using psychiatric drugs (M = 4.89, SD = 6.123) and those who have used psychiatric drugs in the past (M = 5.53, SD = 6.929), $F(2, 389) = 5.523$, $p = .004$. There was no significant difference between past users and current users. One-way ANOVA conducted for age of the first tattoo showed that there was no significant difference between conditions.

In terms of alcohol use, chi-square test showed a significant relationship between alcohol use frequency and tattoo presence, χ^2 (2, N = 392) = 21.128, $p < .001$. While 45% of the participants who never or very rarely used alcohol was tattooed, 59% of the participants who used alcohol occasionally and 73% of those who used alcohol regularly were tattooed. Similarly, another chi-square test showed that there was a significant relationship between alcohol use frequency and plan to get tattooed, χ^2 (4, N = 157) = 19.308, $p < .001$. While only 29% of the participants who never or very rarely used alcohol had a plan to get tattooed, 49% of those who used alcohol occasionally and 46% of those who used alcohol regularly had a plan to get tattooed. One-way ANOVA showed that those who regularly used alcohol had significantly higher total number of tattoos (M = 2.64, SD = 2.852), compared to those who occasionally used alcohol (M = 1.69, SD = 2.401) and those who never or very rarely used alcohol (M = 1.30, SD = 2.238), $F(2, 389) = 9.767$, $p < .001$. One-way ANOVA conducted for tattoo coverage also revealed that those who regularly used alcohol had significantly higher percentage of their body surface covered with tattoos (M = 5.63, SD = 6.619), compared to those who occasionally used alcohol (M = 3.49, SD = 4.423) and those who never or very rarely used alcohol (M = 2.94, SD = 5.670), $F(2, 389)$ = 8.372, $p < .001$. One-way ANOVA conducted for age of the first tattoo showed that there was no significant difference between different levels of alcohol use frequency.

For substance use, One-way ANOVA showed that those who occasionally used drugs had a higher number of total tattoos (M = 2.51, SD = 2.935) compared to those

who never used drugs (M = 1.67, SD = 2.396), $F(2, 379) = 4.645$, p = .017. One-way ANOVA conducted for percentage of tattoo coverage and age of the first tattoo showed that there was no significant difference between different levels of substance use. Lastly, it was found that there was no significant relationship between tattoo presence and substance use frequency.

For self-harm, chi-square test showed that there was a significant relationship between self-harm and tattoo presence, χ^2 (1, N = 378) = 5.504, p = .019. While 70% of the participants who had a history of self-harm were tattooed, 56% of those who had no history of self harm were tattooed. One-way ANOVA conducted for total number of tattoos showed that those who self-harmed had significantly higher number of total tattoos (M = 2.42, SD = 2.795) compared to those who did not self-harm (M = 1.73, SD = 2.512), $F(2, 376) = 4.943$, p = .027. One-way ANOVA demonstrated that participants who had a self-harm history had significantly higher percent of their body surface tattooed (M = 5.98, SD = 6.857) compared to those who had no history of self-harm (M = 3.47, SD = 5.283), $F(1, 376) = 13.500$, $p < .001$. Lastly, one-way ANOVA conducted for age of the first tattoo showed that those who self-harmed got their first tattoo at a significantly earlier age (M = 21.08, SD = 4.466) compared to those who did not self-harm (M = 22.83, SD = 5.447), $F(1, 219) = 5.290$, p = .022.

In the end, results of the preliminary analyses showed that background characteristics that were highly associated with tattooing were alcohol use and psychiatric drug use, followed by self-harm.

3.2.2. Personality Scales and Tattoo Variables

3.2.2.1. Descriptive Statistics and Inter-correlations of Personality Scales

Prior to the inspection of the associations of personality variables with tattoo-related variables, the descriptive statistics for Separation Individuation Inventory (SII) and Inventory of Personality Organization (IPO) and their subscales were calculated

(See Table 3.4). Regarding SII, means of the Splitting subscale (*M* = 48.44, *SD* = 16.868), Differentiation Difficulties subscale (*M* = 48.84, *SD* = 17.738) and Relationship Problems subscale (*M* = 50.73, *SD* = 15.374) were all close to the middle point of the possible score range, indicating that in overall, the sample of this study experienced a moderate level of SII difficulties. Therefore, the distributions of SII subscale scores were approximately normal. On the other hand, regarding IPO, although the total score (*M* = 62.38, *SD* = 16.196) and the scores of Identity Diffusion subscale (*M* = 25.82, *SD* = 6.887), demonstrated a similar pattern, indicating that they were approximately normally distributed, distributions of Primitive Defenses subscale scores (*M* = 18.04, *SD* = 6.081) and Reality Testing subscale scores (*M* = 18.52, *SD* = 5.896) were positively skewed. This means that majority of the participants experienced less difficulties in terms of impairments in reality testing and primitive defense reliance, with fewer participants experiencing higher amount of difficulty.

Table 3.4.
Descriptive Statistics for Personality Scales

	Min	Max	*M*	*SD*
SII - Splitting	12	95	48.44	16.86
SII - Differentiation Difficulties	14	100	48.84	17.73
SII - Relationship Problems	16	103	50.73	15.37
SII - Total Score	43	286	148.01	45.14
IPO - Primitive Defenses	9	44	18.04	6.08
IPO - Identity Diffusion	10	47	25.82	6.88
IPO - Reality Testing	12	41	18.52	5.89
IPO - Total Score	34	127	62.38	16.19

As a second step, correlations among all the subscales and the total scores of the personality scales were calculated. Pearson correlation coefficients are presented in Table 3.5. It was observed that inter-correlations among Separation Individuation

Inventory (SII) subscales of Splitting, Differentiation Difficulties, and Relationship Problems were very high, ranging between .69 and .75, and their correlations with the total score were even higher, ranging between .88 and .91. This indicated that subscales of SII accounted for pretty much the same variance and failed to differentiate between different dimensions, which is in line with the claim of the authors of the adaptation article that the inventory has a unitary factor.

Table 3.5.

Inter-correlations Among Subscale Scores and Total Scores of Separation Individuation Inventory (SII) and Inventory of Personality Organization (IPO)

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
(1) SII - SPL	1							
(2) SII - DIFF	.751***	1						
(3) SII - RELP	.721***	.695***	1					
(4) SII - Total	.914***	.910***	.883***	1				
(5) IPO - PD	.689***	.635***	.656***	.730***	1			
(6) IPO - ID	.666***	.606***	.630***	.701***	.731***	1		
(7) IPO - RT	.508***	.390***	.451***	.497***	.526***	.544***	1	
(8) IPO - Total	.727***	.638***	.678***	.753***	.878***	.898***	.793***	1

Notes. SPL = Splitting; DIFF = Differentiation Difficulties; RELP = Relationship Problems; PD = Primitive Defenses; ID = Identity Diffusion; RT = Reality Testing

*** $p < .001$.

Inter-correlations among Inventory of Personality Organization (IPO) subscales revealed that Primitive Defenses and Identity Diffusion subscales were highly correlated both with each other ($r = .73$) and with the total scale score of IPO ($r = .88$ for Primitive Defenses and $r = .90$ for Identity Diffusion), hence they accounted for roughly the same variance. Correlation coefficients regarding Reality Testing with

Primitive Defenses and Identity diffusion, which are .53 and .54, and the total score, which is .79, showed that Reality Testing subscale accounts for a unique variance.

3.2.2.2. Associations of Personality Scales with Tattoo Variables

Before moving on to regression analyses, associations between tattoo variables and personality scales were investigated. First, the relationship between tattoo presence and personality scales were investigated with analysis of variances (ANOVAs). Separation Individuation Inventory (SII) subscale scores or the total score were not significantly different for the tattooed and the non-tattooed participants. For Inventory of Personality Organization (IPO), tattooed group was found to have significantly higher scores on primitive defenses (M = 18.67, SD = 6.334) compared to the non-tattooed group (M = 17.09, SD = 5.568), $F(1, 392) = 6.434$, $p = .012$. Secondly, tattooed group was found to have significantly higher scores in terms of identity diffusion (M = 26.43, SD = 6.838) compared to the non-tattooed group (M = 24.91, SD = 6.881), $F(1, 392) = 4.697$, $p = .031$. Thirdly, tattooed group was found to have significantly higher scores on the total scale (M = 63.82, SD = 16.404) compared to the non-tattooed group (M = 60.22, SD = 15.685), $F(1, 392) = 4.710$, $p = .031$. There was no significant difference between tattooed and non-tattooed groups in terms of reality testing.

To examine to associations between personality scales and continuous tattoo variables such as total number of tattoos, tattoo percent, and age of the first tattoo, Pearson correlation analyses were conducted and the correlation coefficients are presented in Table 3.6. The total number of tattoos was not found to be correlated with any of the personality scales.

Table 3.6.

Correlations of Tattoo Variables with Separation Individuation Inventory (SII) and Inventory of Personality Organization (IPO) Subscales and Total Scores

	Tattoo Total	Tattoo Coverage (%)	Age of the First Tattoo
SII - Splitting	-.086	.133*	-.117
SII - Differentiation Difficulties	-.110	.071	-.059
SII - Relationship Problems	-.050	.077	-.111
SII - Total	-.093	.105	-.105
IPO - Primitive Defenses	.002	.109	-.107
IPO - Identity Diffusion	.021	.145*	-.205**
IPO - Reality Testing	.050	.180**	-.146*
IPO - Total	.028	.168*	-.179**

* < .05, ** < .01.

Regarding separation-individuation difficulties, the only association was a weak positive correlation between Splitting and tattoo coverage, $r(233) = .133$, $p = .042$. On the other hand, total score as well as two subscales of personality organization had weak positive correlations with tattoo coverage and weak negative correlations with the age of first tattoo. Specifically, as the level of Identity Diffusion and Reality Testing distortions increased, the percentage of the body covered by tattoos increased, $r(233) = .145$, $p = .027$ and $r(233) = .180$, $p = .006$, respectively. Also, as the level of Identity Diffusion and Reality Testing distortions increased, the age of the first tattoo decreased, $r(233) = -.205$, $p = .002$ and $r(233) = -.146$, $p = .026$, Primitive Defenses were not correlated with coverage or age of first tattoo.

3.3. PREDICTING TATTOOING

In the preliminary analyses, it was found that there were certain associations between tattooing and personality scales. Therefore, in order to investigate which personality dimensions could predict the likelihood of getting a tattoo, the number of tattoos and the percentage of tattoo coverage, and to examine their predictive powers, regression analyses are conducted. For tattoo presence, binary logistic regression analysis is conducted and presented. For total number of tattoos and percentage of tattoo coverage, linear regression analyses are conducted.

3.3.1. Predictors of Tattoo Presence

Dependent variable tattoo presence was coded as a binary variable (0 = not tattooed, 1 = tattooed). Since the dependent variable is binary in nature, binary logistic regression was used to examine whether Separation-Individuation Inventory (SII) and Inventory of Personality Organization (IPO) scale scores are associated with the likelihood of having a tattoo. For SII, since the scale was considered to have a unitary factor by the authors of its Turkish adaptation and the subscales have high inter-correlations, only the total score was used. For IPO, primitive defenses, identity diffusion and reality testing subscales were used. Our model was carried out by using Forward Stepwise (Wald) method in which every independent variable was entered into the analysis one by one.

A preliminary analysis suggested that the assumption of multicollinearity was met. An inspection of standardized residual values revealed that there were no outliers in the data. Hoshmer-Lemeshow goodness-of-fit test indicated that type 1 error probability was under 5%.

Logistic regression model was found to be statistically significant, χ^2 (1, N = 394) = 6.518, p = .012. The model explained 2.2% (Nagelkerke R^2) of the variance in tattoo presence and correctly classified 59.9% of the cases. Separation-individuation,

identity diffusion and reality testing were found not to be associated with tattoo presence. Level of primitive defenses was found to contribute significantly to the model as shown in Table 3.5. Odds ratio for primitive defenses indicates that for every 1 unit increase in primitive defense score, there is a 4.5% increase in the likelihood of being tattooed [Exp (B) = 1.045, 95% CI (1.010, 1.083)].

Table 3.7.

Summary of the Logistic Regression Analysis for Variables Predicting Tattoo Presence

							95% C.I. for EXP(B)	
	B	S.E.	Wald	df	Sig.	Exp(B)	Lower	Upper
Step 1[a] Primitive Defenses	.044	.018	6.248	1	.012	1.045	1.010	1.083

[a] Variables entered on step 1: Primitive Defenses

3.3.2. Predictors of Number and Coverage Percentage of Tattoos

Stepwise regression analysis was conducted with total number of tattoos as the dependent variable and primitive defenses, identity diffusion and reality testing subscale scores of Inventory of Personality Organization (IPO) and the total score of Separation Individuation Inventory (SII) as predictors. As a result, none of the predictors entered the model, meaning that none of the independent variables significantly predicted the number of tattoos.

Another stepwise regression analysis was conducted with percentage of tattoo coverage as the dependent variable and primitive defenses, identity diffusion and reality testing subscale scores of IPO and the total score of SII as predictors. Due to high multicollinearity between subscales, none of the predictors could emerge as stable predictors. Since the analysis could not produce a valid model, they will not be reported.

3.4. THE DATA-BASED MODEL

By examining the results of preliminary analyses and through testing multiple regression analyses using total number of tattoos and percentage of tattoo coverage, it was seen that variance in the data could not be accounted for with linear predictive models. This was in part due to high multicollinearity among personality subscales, which means that these subscales overlapped to such a high degree that they failed to account for different dimensions of the variance. When conducting linear regression analyses, this resulted in one variable which had the highest correlation with the dependent variable entering the model and throwing other variables out of the model, since they did not account for a distinct variance in the data. Therefore, we have decided to generate a model, which is not theory-based but data-driven and theory-compatible, using Structural Equation Modeling (SEM). By this way, we aimed at fitting the data into a model that explained the associations between personality scales, other background characteristics and our dependent variables.

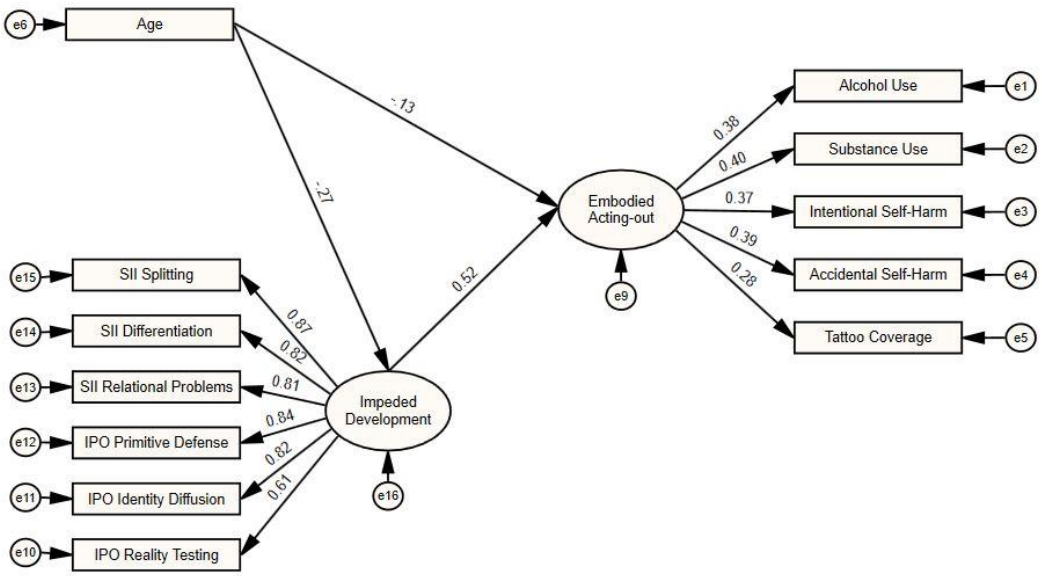
In the first step, we have positioned all personality subscales as psychodynamic indicators of a common factor that we named "Impeded Development," in order to alleviate the issue of multicollinearity. Then, we conducted the analysis by using tattoo percent as the dependent variable to see the predictive power of impeded development on tattoo coverage of the body surface. This model did not provide a good fit, indicating that a model with tattoo coverage on its own could not account for the variance in the data well.

Therefore, as a second step, we positioned tattoo coverage as an indicator of a latent factor which we named "Embodied Acting-out" along with other possible indicators that was found to be associated with tattooing in the preliminary analyses. Thus, alcohol use, substance use, intentional self-harm, accidental self-harm, and tattoo coverage were identified as possible indicators of embodied acting-out. Alcohol use and substance use were transformed into binary variables to be able to be used in the model. Any cases with missing data on the background variables were excluded from

analysis, so the model was tested with 360 participants' data. Since age was found to be significantly associated both with our embodied acting-out indicators (e.g. self-harm, substance use) and with all impeded development indicators, age was also included in the model. In addition to its direct associations with Embodied Acting-out and Impeded Development, age was also anticipated to have an effect on embodied acting-out indirectly through impeded development, due to its negative correlations with all personality subscales. Therefore, both its direct effect on embodied acting-out and its indirect effect through impeded development were included in the model. The resulting model is presented in Figure 1.

Figure 1.

Path Coefficients of the Data-Based Model



Results of the SEM analysis are as following; $\chi^2 = 155.399$, df = 52, $p = .000$. Fit indices for the model are found to be as following; $\chi^2/df = 2.99$, GFI = .93, AGFI = .90, CFI = .93, RMSEA = .07, PCLOSE = .002, SRMR = .05. All of the indices imply either an adequate or a good-fitting model. Shermelleh-Engel et al. (2003) suggests that

χ^2/df value between 2 and 3 suggests a good fit, while CFI and GFI between .90 and .95 suggests an acceptable fit. AGFI value of .90 is considered to be indicative of good fit (Jöreskog & Sörbom, 1989). RMSEA value between .05 and .08 is considered to suggest an acceptable fit (Browne & Cudeck, 1993), while SRMR value of .05 is indicative of a good fit (Hu & Bentler, 1995).

Data-based model demonstrated that tattoo coverage appeared as a significant indicator of embodied acting-out (β = .28, t = 3.20, p = .001) alongside other indicators such as alcohol use, substance use, self-harm and accidental harm, all of which are also found to have significant loading on the emergent latent factor, embodied acting-out. Also, model shows that impeded development has a path coefficient of .52 for embodied acting-out (t = 4.27, p < .001), indicating a moderate loading in the aforementioned direction. Effect of age is mediated by impeded development as anticipated (β = -.27, t = -4.76, p < 001), since its effect on embodied acting-out became insignificant in the final model (β = -.13, t = -1.65, p = .098).

CHAPTER 4
DISCUSSION

The aim of this study was to explore tattooing practices, motivations for getting tattooed and various meaning it can have, as well as the associations of tattooing with personality organization and personality development within the framework of Kernberg's theory of personality organization and Mahler's theory of separation-individuation. Findings will be discussed in five main sections. Exploratory findings regarding the prevalence, location, motivation, and description of tattoos as well as the associations between tattooing and demographic characteristics will be discussed in the first section. Associations between tattooing and personality organization will be discussed in the second section. In the third section, implications of the data-based model generated with Structural Equation Modeling (SEM) will be discussed. In that section, behaviors that have clustered together with tattoo coverage under the concept of *embodied acting-out* and their relationship with personality development will be examined. These will be followed by a discussion of the clinical implications of these findings, limitations of the present study and recommendations for future research.

Before moving on to the discussion of the findings, it is important to note that up to the date of the current study, there was no other quantitative research on tattooing using psychoanalytic constructs and concepts. Therefore, when discussing the findings with the existing literature, theories of psychoanalytic authors, their clinical observations, and a handful of qualitative studies that investigated tattooing from a psychoanalytical framework will be implicated. In addition to these, empirical researches on tattooing from non-psychoanalytical literature will be drawn upon when needed, since empirical research that are conducted within a psychoanalytical framework is very limited.

4.1. EXPLORATORY FINDINGS REGARDING TATTOOING

In this section, first, findings regarding the prevalence of tattooing in our sample and the associations between tattooing and various demographic and background characteristics will be discussed in relation to the existing literature on these subjects. Secondly, findings regarding the motivations for getting tattooed and the meaning attributed to tattoos will be discussed.

4.1.1. Tattoo Prevalence and Associations of Tattooing with Demographics

In our study, 60% of the participants had at least one tattoo, which is a very high prevalence compared to other studies that investigated the prevalence of tattooing in various countries. Prevalence of tattooing for young adults were usually found to be between 25-30% in western countries such as Australia (Heywood et al., 2012), the UK (Swami et al., 2015), Germany (Stirn et al., 2006), and the US (Laumann & Derrick, 2006). When the most prevalent motivations for tattooing that was found in our sample are also considered, which are identity consolidation, relatedness, and autonomy/individuality, this difference might be due to more collectivistic culture and enmeshed interpersonal relationships in Turkey, compared to other Western cultures. In a more enmeshed relational matrix, tattooing the body may be a way of negotiating difference and commonality, a way of differentiating from others, or a way of marking the connectedness with the other. In this way, the function of tattoos as a second skin and a transitional object might be more appealing for those living in a more collectivistic society whose majority is Muslim and Turkish. Although we did not inquire about religiosity, tattooing practices might also have religious connotations and prevalence of tattooing may vary depending on differences in religious belief.

In terms of relationship status, our study found that being not being married was associated with having a plan to get tattooed. So, married individuals might be

feeling less pressure in their relationships that would impel them to get tattooed. Marriage might be a factor that decreases an individual's inclination to modify the body, which might be a way to negotiate distance and closeness in a relationship (Karacaoğlan, 2012; Lemma, 2010), since marriage might have a stabilizing effect on these aspects. Moreover, both married and single participants were more resolved in terms of their plan to get tattooed, while participants who were in a relationship but are not married were more indecisive about getting tattooed. Here too, tattooing may be a way of negotiating relationality, which may be more uncertain for those who are in a relationship but are not married. Both single and married individuals might be feeling less uncertainty in their relational status and their position in relation to the other, making them less indecisive about getting tattooed.

Also, in the present study, psychological/psychiatric help history and psychiatric drug use was found to be associated with tattooing practices. Although we cannot infer from this association that tattooing is associated with psychopathology since we do not know if the participants who have no psychological/psychiatric help history actually need help or not. Still, we can argue that tattooing might be functioning as an alternative way of coping with relational difficulties, emotional disturbances, and issues with the self and identity (Lemma, 2010; Miller, 2020). These same difficulties may also prompt someone to seek psychological help. Therefore, tattooing seems to function as an attempt at meaning making, self-understanding, coping with difficult experiences and regulating emotions (Maxwell, 2017; Samuel, 2010; Wonneberger, 2020). The finding that extensive tattooing was associated with being indecisive about the benefit of psychological/psychiatric help might indicate either ambivalence towards the process or it might be indicating a lack of reflective capacity regarding the experience. This lack of reflective capacity and/or inability to tolerate ambivalence might be linked to the difficulties in affect regulation, impulse control, and the disturbances in self-identity that is associated with tattooing (Karacaoğlan, 2012; Namir, 2006).

4.1.2. Tattooing Motivations and Meanings

One of the most prominent motivations for getting tattooed was found to be associated with self and identity. Many participants stressed that having an image, a symbol or a design that expresses and represents their self tattooed on their body permanently was the most important motivator. Permanence is an inherent quality of tattooing that makes it appealing to many. Here, permanence of the tattoo seems to reinforce the continuity in the self experience and identity of the individual (Karacaoğlan, 2012; Murphy, 2013). Big majority of tattooed participants stated that they were willing to get tattooed again in the future, with regret over a tattoo and tattoo removal was relatively low in the sample. Those who regretted a tattoo or who have undergone tattoo removal were mostly due to dissatisfaction with the work, due to the tattoo not representing them anymore or due to a break up. These also show that permanence of the tattoo is only unfavorable when that image was no longer a part of the individual's sense of self and identity.

Another main motivation for getting tattooed was to feel more autonomous, to be more unique, different or "cool", to "prove oneself" and to show that they have grown up. Almost half of the participants had highly visible tattoos on their hands, wrists, necks or heads. Tattoo visibility and the communicative value attributed to them were found to be highly correlated in a previous study (Doss & Hubbard, 2009). Therefore, tattoos in our sample too seem to have a highly communicative value for the tattooed individuals. Here, tattoos functioned to express the individual's differentiation from the rest of the society, while associating them with another group identity that they sought after (Cimo, 2001). "Being tattooed" itself was an important motivator for many, as if it was in itself a highly desired identity that person wanted to identify with and also communicate to others.

Third main motivation for tattooing was relationality, which included remembrance of a place or a significant person in someone's life, commemoration of a

lost one, a pet or a place, and as a mark of commonality in the case of matching tattoos. These tattoos seem to represent the desire to maintain a bond with the object, to carry the object on the body and to inscribe the other on the skin permanently, which are often mentioned in the literature as well (Albin, 2006; Samuel, 2010; Murphy, 2013). In the descriptions of the participants' most meaningful tattoos, there was a considerable number of tattoos that consisted of names, birth dates or images of a significant other (a parent, a lover, a pet, a child etc.), which represent the same desire. In this aspect, for some people, modern tattooing practices seem to carry a similar significance with the traditional tattooing practices of indigenous peoples of Polynesia and North America, in that they represent the bond with the ancestors, their spirits, and the totemic animals which also represent those idealized objects (Freud, 1913; Karacaoğlan, 2012; Kosut, 2015).

4.2. TATTOOING AND PERSONALITY ORGANIZATION

In the logistic regression analysis, tattoo presence was found to be predicted by the use of primitive defenses. Primitive defenses such as splitting, idealization, devaluation, projective identification, dissociation, somatization, acting out, and denial are relied upon when affect and impulse regulation is too difficult and repressive mechanisms are inadequate, so that more extreme measures have to be taken to maintain psychic equilibrium (McWillams, 2013). Tattoos in this sense, may be another way of coping with difficult experiences and internal conflicts that resemble the primitive defensive mechanisms in that it is a form of acting out that often precedes reflection, verbal expression or conscious awareness. When answering the motivation question, many participants expressed their motivation as solely aesthetic (e.g. because it looked good, to be more attractive) or depicted their tattooing experience as spontaneous and impulsive decisions that did not have any particular meaning or motivation (e.g. because I was drunk, to try something new, because I was bored). These also support the idea that individuals may often have no real insight and

reflection on the possible conscious and unconscious meanings regarding their tattooing decisions and tattooing practices may often have an impulsive aspect and that precludes further reflection on the experience (Karacaoğlan, 2012). Concreteness and corporeality of the act itself may be a factor that hinders the capacity of the individual to reflect and think on the symbolic meanings of this act (Namir, 2006).

Bernstein (2015) argues that tattoos resemble the symptom formation in hysteria in that it is a compromise formation regarding an internal conflict that is no longer possible to hold down by repressive mechanisms so it is conversed into another form and expressed through the symptom, thus it is a form of communication when there is no other medium available. As if the impulse to tattoo emerges internally, caused by conflicts, affects and aggressive or libidinal impulses that are no longer possible to keep and process internally, so that they emerge on the surface of the skin and are inscribed there externally through the act of tattooing (Miller, 2020). They are fixed on the skin permanently, like a historical record of the individual's internal world. It is as if psychic content that cannot be contained in the mind leak out through the pores of the skin and take shape at the moment they touch the ink. Hence, they form symbols that contain unconscious material and prevents them from pouring into boundless space (Bion, 1959; Lemma, 2010). By this way, tattoos hold together parts of the self that are too difficult to keep inside by the psyche.

Having a tattoo, as mentioned in the literature review, has become quite popular and mainstream in the last couple of decades and has become highly prevalent among young adults, as also seen in our sample. Impairment in reality testing was found to be positively correlated with tattoo coverage but having a tattoo and the total number of tattoos was not associated with more impairment in reality testing. So, it can be argued that having a tattoo or having tattoos that are relatively small in size hence do not cover the surface of the skin immensely have different unconscious motivations and meanings than covering the body surface thoroughly with tattoos. For some individuals, extensive tattooing might acquire a more substantial meaning and a life-sustaining

function in the psychic economy (Lemma, 2010). In this sense, correlations between the percentage of tattoo coverage and the two constructs of level of personality organization, identity diffusion and reality testing namely, also become meaningful. When skin-ego fails in its function of containment, the individual might become more likely to resort to covering his/her skin with tattoos in order to make up for this lack by forming a second skin through tattooing (Bick, 1968; Lemma, 2010). As these psychotic and borderline tensions intensify, tattooing may acquire a more compelling quality and covering the body with tattoos may function to protect the individual against disintegration and fragmentation (Karacaoğlan, 2012). Maybe, tattoos can be seen as psychic content that leaks out from the pores of the skin that dries out on the surface of the skin and acts like patches that prevent the rest of the psyche from further leaking out. This may be in line with Wonneberger's (2020) argument that tattoos may act as patches for the holes that are blown in the potential space by trauma, hence may be therapeutic following a traumatic experience and facilitate the healing process. As Namir (2006) suggests, tattoos may enable someone to hold together and reintegrate the previously dissociated or disembodied parts of the self that are caused by early impingements, adverse experiences, and traumas.

Findings regarding the association between tattooing and separation-individuation, on the other hand, are quite interesting. Although separation-individuation issues such as desire to form a merger with the idealized object due to fear of abandonment or desire to separate and distance from the object due to fears of fusion are often associated with tattooing (Albin, 2006; Cimo, 2001; Karacaoğlan, 2012; Lemma, 2010), and categories of motivations for tattooing such as autonomy-individuality and relatedness-related motivations were considerably prevalent in our study, we could not find any correlation between tattooing and separation-individuation issues. We could interpret these findings to say that although tattooing often has an object-relational quality to it, it may not be primarily motivated by separation-individuation related pathology and difficulties. Tattooing may be a way of

symbolizing and negotiating an individual's object relations, regardless of them having separation-individuation related issues or not. So, it seems that tattooing is practiced by individuals from all across the spectrum of separation-individuation levels and it may or may not have an object-relational significance, depending on the individual's subjective motivations and the meanings he or she attributes to tattooing. But, depending on our findings, we can argue that tattooing has more of an intrapsychic function and significance that is related to ego functions of affect regulation, impulse control, identity formation and integration, self-esteem and reality testing. Therefore tattoos seem to help in maintaining intrapsychic equilibrium in the service of ego rather than facilitating the process of separation-individuation.

4.3. IMPEDED DEVELOPMENT AND EMBODIED ACTING-OUT

In the preliminary analyses, tattooing was found to be associated with alcohol use, substance use and self-harm, which is congruous with the existing empirical research on tattooing (Birmingham et al., 1999; Heywood et al., 2012; Laumann & Derick, 2006). In the data-based model generated with Structural Equation Modeling (SEM) too, percentage of body surface covered with tattoos was found to be associated with alcohol use, substance use, self-harm and accidental self-harm. Alcohol is often used to cope with negative emotions, anxiety and negative experiences that are too difficult to contain otherwise, it often is an attempt at self-soothing and affect regulation, and is found to be associated with difficulties in affect regulation and impulse control (Jakubczyk et al. 2018). In a meta-analysis based on 36 different studies, substance use, affect regulation difficulties and self-harm was found to be associated (Moller et al., 2013). Farber (2004) also argues that alcohol and substance abuse, intentional self-harm, body piercing, and compulsive tattooing has a self-regulatory function in that they help the individual to navigate between hyperarousal and dissociation. Kernberg (1975) posits that alcohol and drug use are examples of

"impulse-ridden" acting out that are highly prevalent in borderline personality organization.

Self-harm is often conceptualized as a way of coping and affect regulation (Laye-Gindhu & Schonert-Reichl, 2005). McDougall (1989) argues that, in the case of self-harm, physical pain helps to maintain psychic integrity and helps to protect against dissociation and fragmentation by relocating the person in the body and in the present. In a way, physical pain, as seen in self-mutilation as well as in tattooing, helps the individual in maintaining spatial and temporal continuity and integrity (Karacaoğlan, 2012). The association between tattooing and self-harm seems to support the idea that pain is an integral part of tattooing practices. In traditional Maori tattooing too, pain is seen as a central aspect of the tattooing practice, and the amount of pain being endured in the process is indicative of the ritual significance of the tattoo (Kosut, 2015). For Kernberg (1975), self-harm is a way of discharging aggression by directing it on the self that provides emotional relief, which is symptomatic of borderline personality organization. Tattooing may be another way of discharging aggressive impulses through intentionally inflicting pain on the skin, which alleviates the anxiety caused by those aggressive impulses.

Viewed from this point, tattooing may be conceptualized as another coping mechanism, along with alcohol use, substance use and self-harm, that is less risky and less destructive than all the other mentioned behaviors. These behaviors may be seen as forms of acting out that is self-directed on the body itself, triggered by anxieties, affects and impulses that one is unable to defend against otherwise. They all have a self-destructive characteristic with both libidinal and aggressive properties. They are directed on the body, giving temporary relief and pleasure while inflicting pain and harm as well. Therefore, we conceptualized them as examples of "embodied acting-out". In these embodied acting-outs, body becomes a transitional object, a not-me possession that can be modified, manipulated, controlled, loved, and mutilated (Chelton & Bonney, 1987; Kafka, 1969). In addictions of this kind, transitional object

(the body in our case) is used in the service of soothing and calming the self, inducing certain feelings to maintain psychic equilibrium and a sense of continuity, when the psyche is threatened by disruptive affects and experiences (Winnicott, 1953). When traumatic experiences in the childhood hinders the internalization of self-soothing and self-regulating capacities and the gradual relinquishment of transitional object, the individual continues to rely on compulsive use of transitional objects for affect regulation and to maintain a cohesive sense of self (Pauley, 2018). Compulsively acting out on the body through self-harm, tattooing, alcohol use, and substance use may be similar attempts at compensating for what is internally lacking due to impeded development.

Karacaoğlan's (2012) depiction of tattooing as a form of perversion might also be relevant here. She argues that tattooing has a sado-masochistic aspect in that tattooing is triggered by fears of annihilation and abandonment, and also a desire for unity. In perversions, aggression is transformed into a desire for control as in the case of sadism or it is directed towards the self as in masochism. She posits that, as in masochism, tattooing serves as a drive satisfaction mechanism, in which gratification is derived from pain and suffering. In *Three Essays on the Theory of Sexuality*, Freud (1905) conceptualizes perversion as an expression of unsatisfied and strong drive components that are displaced onto a different erotogenic zone substituting for genital primacy. Through these acts, drives are displaced onto the body; the skin in self-harm and tattooing, and the mouth in alcohol and substance use (Farber, 2004). When these behaviors fulfill the function of displacing libidinal and aggressive impulses, they are all prone to take on an addictive and compulsive quality as well, since they do not provide a solution but only a temporary discharge (Sachs, 1986).

Stirn and Hinz (2008) has found that for those who have a history of self-harm, tattooing also has an autoaggressive significance, which the individual uses to cope with difficult experiences and dissociative disturbances in body perception, which often acquires a therapeutic as well as addictive properties. Therefore, they resorted to

compulsively tattooing and covering the body surface, which is argued to be a symptom of their psychological disturbances. This differed from the rest of the sample, who had no history of self-harm but had tattoos, demonstrating that significance of tattooing may range from a relatively normative act that is not related to any kind of psychopathology to a compulsive act that has a symptomatic significance with regards to the individual's disturbances. Similarly, Perlotta (2021) has found that percentage of body surface covered with tattoos is associated with higher dysfunctional traits and disturbances. In the study, having 25% or more of the body surface covered with tattoos was associated with borderline, somatic, sadistic, and masochistic traits.

In this way, tattooing might be a more adaptive way of coping compared to its counterparts, given that it has fewer known risks and long-term potential harm for the individual (Armstrong & Murphy, 1997). As it sits between straightforward acting out and proper symbolization, it may function beyond only providing temporary catharsis and eventually lead to meaning-making and understanding (Maxwell, 2017; Wonneberger, 2020). Or, it can preclude thinking about the experience by concretizing it through embodied acting-out, therefore soothing the person only temporarily that hinders the capacity to regulate emotions and blunts the reflective capacity, as in alcohol use, substance use and self-harm (Lemma, 2010; Namir, 2006). As a transitional object, it is a step in the progress from purely concrete to symbolism (Winnicott, 1953). Its adaptive quality and its positive or negative effects on the individual's psychic economy seems to depend on the person's ability to reflect on the experience, the degree to which the person feels compelled to act, and the degree to which the act is compulsively relied upon.

4.4. CLINICAL IMPLICATIONS

In the preliminary analyses, tattooing was found to be associated with history of psychological/psychiatric help and psychiatric drug use. However, we did not ask the participants if they thought they needed or wanted to get help, so we do not know

if the participants who did not get help or used psychiatric drugs are actually not in need. With the findings, we can argue tattoos might be representing the individual's attempts at meaning making, processing, and understanding their experiences and feelings. They maybe represent the person's desire and need for change, for communication and for being understood (Miller, 2020). Therefore, the motivations that prompt someone to get tattooed might have some common ground with the factors that prompt someone to seek help. Issues with self and identity, affect regulational difficulties, difficulties in impulse control, and anxiety caused by internal conflicts might compel the individual to resort to maladaptive coping mechanisms such as self-harm, alcohol and drug abuse (Moller et al., 2013). These same issues and difficulties may also lead someone to get tattooed or to seek help (Lemma, 2010). In light of these, understanding tattooing as a way of communicating and expressing feelings and experiences that one cannot express otherwise might inform clinicians in better understanding the needs of the individual and offering treatments that fit to those needs. Willingness to explore and talk about tattoos without prejudice and stigma may enable the clinician to better understand the internal world of the person by providing a window to their psyche (Roggenkamp et al., 2017).

When the findings that delineate tattooing as a form of acting out are taken into account, tattooing that occurs during a psychotherapeutic process may be conceptualized as an enactment (Lemma, 2010). It might be triggered by anxieties regarding fusion or abandonment, when either intimacy or distance is too much to handle and contain in the psychotherapeutic relationship (Karacaoğlan, 2012). Tattooing may occur in the breaks and discontinuities in the psychotherapy process, when separation is too difficult to bear, or when therapeutic relationship becomes too intimate and close, thus becomes too threatening for the person. Therefore, tattoos that were acquired during a psychotherapy process can be a container for the issues regarding transference and may provide a rich point of exploration and interpretation (Namir, 2006). Motivations for tattooing, its timing in the process, feelings before and

after tattooing, and the meanings that are attributed to the tattooing experience may shed light on the aspects of the therapeutic relationship that are not yet available for expression and discussion. Also, the relationship between tattooing and the perceived benefit from previous psychiatric/psychological help may be relevant in here. Conflictual feelings and ambivalence regarding the process may be associated with the tendency to get tattooed.

4.5. LIMITATIONS OF THE PRESENT STUDY AND RECOMMENDATIONS FOR FUTURE RESEARCH

First limitation of the present study is that the data were obtained with self-report measures, which might hinder the capacity to investigate psychoanalytical concepts and constructs. As the constructs under investigation are related to aspects of personality that are often unconscious, hence they are often out of the individual's conscious awareness. Therefore, measuring constructs such as level of personality organization and separation-individuation with self-report measures may hinder the ability to unravel those unconscious material. In the present study, separation-individuation issues were found not to be associated with tattooing although they were often theorized and observed to be associated in the literature, which may be due to the inability of measuring what was intended to be measured. In future studies, the association between separation-individuation and tattooing may be examined using different measurement techniques that are better able to shed light on the aforementioned constructs.

Second limitation of the present study was that convenience sampling was used and the sample consisted mostly of highly-educated young adult women, which limits the generalizability of the results. Prevalence of tattooing was very high, higher than most of the previous research that investigated the prevalence of tattooing in Europe and the USA. The present study found that there were no gender differences in terms

of tattooing, but the low number of male participants make the comparison difficult. As convenience sampling was used, the invitation for the study mentioned that the aim of the study was to examine the association between tattooing and personality. Therefore, both tattooed and non-tattooed participants who wanted to participate in this kind of study might have an interest in and a general acquaintance with psychological research, and they might have a curiosity regarding tattooing and its significance. So, our sample might not be representative of the general population in terms of their capacity to reflect on and express their experience. Also, it might be relevant to note that non-completion was quite high in the present study, with half of the participants that attempted to participate not completing the survey. Those who did not complete the survey might have felt discomfort that prompted them to leave the study, since the content related to borderline and psychotic features might be triggering for those who have issues and difficulties in those areas. Therefore, those with borderline and psychotic characteristics might be under-represented in the present study. Future studies may try to include those groups that are more difficult to reach.

Third limitation of the present study is that due to the lack of empirical research on tattooing with a psychoanalytic lens, more general concepts like level of personality organization and separation-individuation was investigated. More specific aspects of personality functioning such as affect regulation, mentalization and reflective functioning, impulse control, self-esteem, body image and identity with their relation to tattooing may be investigated in more detail. Likewise, associations between tattooing and defense mechanisms such as idealization, omnipotent control, splitting, projection, and projective identification may be examined more thoroughly. Similarly, acting out tendencies and their relationship with alcohol use, substance use, self-harm, and tattooing is a promising area of investigation. Understanding the common underlying factors that lead to embodied acting-out may contribute profoundly to harm reduction, prevention and intervention regarding these issues. Association between help-seeking attitudes and embodied acting-out tendencies is a subject that could make

substantial contributions to both theory and the practice in this area. Finally, dissociation and somatization are concepts that seem to be highly relevant to tattooing. Significance of the body and the skin in the context of tattooing remains to be researched in more detail. Association of tattooing with somatic skin reactions and other types of somatization may be investigated more comprehensively, which would shed more light on the relationship between the body and the mind.

Lastly, another limitation of the present study is that when inquiring tattooing motivations, participants' motivation to get their first tattoo was asked only. So, one person expressed only one motivation. In reality, a person may have various motivations when getting tattooed which may also change over time. Their motivation for their first tattoos and for following tattoos may differ. Also, participants were asked to describe their most meaningful tattoo, resulting in one description per participant. This also neglects the possibility of multiple tattoos that differ greatly in terms of meaning, content, structure or significance. Therefore, a considerable amount of information had to be omitted, resulting in a reduction in the comprehensiveness of the data. Future studies may try to collect the data regarding participants' tattoos more comprehensively.

CONCLUSION

Aim of the present study was to explore and investigate the associations of tattooing with personality organization and development from a psychodynamic perspective. For this purpose, psychoanalytic concepts such as level of personality organization and separation-individuation was used. Motivations and meanings attributed to tattooing was in line with the existing psychoanalytic literature on tattooing. The findings showed that presence of tattoos was associated with higher reliance on primitive defenses, higher levels of identity diffusion and lower levels of personality organization. Moreover, use of primitive defenses was found to predict the presence of tattoos. Covering the body extensively with tattoos, on the other hand, was associated with higher levels of identity diffusion, higher levels of impairment in reality-testing and lower levels of personality organization. Findings seem to support the theory that tattooing might be an attempt to compensate for deficiencies in skin-ego functions such as containment and self-integration, through developing a second skin. Covering the body extensively with tattoos, along with alcohol use, substance use, intentional self-harm, and accidental self-harm was found to be indicative of a common latent factor, which we conceptualized as *embodied acting-out*, that was associated with impeded development. Thus, tattooing seems to function as a transitional object in that it provides affect regulation and impulse discharge when impeded development thwarts the ability to self-regulate.

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APPENDICES

Appendix A: Informed Consent Form

Sayın katılımcı,

Bu araştırma İstanbul Bilgi Üniversitesi Klinik Psikoloji Yüksek Lisans Programı öğrencisi Yasir Nazlı tarafından, Dr. Öğr. Üyesi Alev Çavdar Sideris danışmanlığında, yüksek lisans tez çalışması kapsamında yürütülmektedir. Bu çalışmanın amacı, dövme yaptırmanın kişilik yapılanmasıyla ilişkisini psikodinamik olarak incelemektir.

Bu araştırmaya katılım tamamen gönüllülük esasına dayanmaktadır, araştırmanın herhangi bir aşamasında bir gerekçe belirtmeden çalışmayı bırakabilirsiniz. Çalışmanın amacına ulaşması için sizden beklenen tüm soruları eksiksiz ve içtenlikle cevaplamanızdır. Tüm soruların cevaplanması yaklaşık 20-25 dakika sürmektedir. Çalışmaya katılımın üzerinizde herhangi bir olumsuz etki yaratması beklenmemektedir. Yine de herhangi bir olumsuz etki hissetmeniz halinde araştırmacı ile iletişime geçebilirsiniz.

Çalışma esnasında sizden birtakım demografik bilgiler alınacak ancak kimliğinizi belirleyebilecek herhangi bir bilgi istenmeyecektir. Verdiğiniz cevaplar araştırmacılar dışında kimseyle paylaşılmayacak, tüm veriler toplu olarak değerlendirilecek ve sadece bilimsel yayın amacıyla kullanılacaktır.

Araştırmaya dair herhangi bir sorunuz olması halinde Yasir Nazlı (yasir.nazli@bilgi.edu.tr) ile iletişime geçebilirsiniz.

 Yukarıda verilen bilgiler doğrultusunda araştırmaya katılmayı kabul ediyorum.

Appendix B: Demographic and Tattoo-Related Information Form

1. Yaşınız: _____

2. Cinsiyetiniz:

Kadın

Erkek

Diğer _____

Belirtmek istemiyorum

3. Eğitim düzeyiniz (lütfen en son bitirdiğiniz eğitim kurumunu işaretleyiniz):

İlkokul

Lise

Lisans

Lisansüstü

Doktora

Diğer _____

Belirtmek istemiyorum

4. Öğrenci misiniz?

Evet

Hayır

Diğer _____

Belirtmek istemiyorum

4.1. Evet ise, şu anda eğitim gördüğünüz okul:

Lise

Lisans

Lisansüstü

Doktora

Diğer _____

Belirtmek istemiyorum

5. Şu anda çalışıyor musunuz?

Evet

Hayır

Diğer _____

Belirtmek istemiyorum

Evet ise, mesleğiniz: _____

6. Gelir seviyenizi aşağıdaki seçeneklerden hangisi en iyi tanımlıyor?

Alt

Alt-orta

Orta

Orta-üst

Üst

Belirtmek istemiyorum

7. İlişki durumunuz:

İlişkim yok

İlişkim var

Diğer: _____

Belirtmek istemiyorum

8. Medeni durumunuz:

Bekar

Evli

Boşanmış

Eşimi kaybettim

Belirtmek istemiyorum

9. Daha önce hiç psikiyatrik/psikolojik yardım aldınız mı ya da almaya devam ediyor musunuz?

Evet, yardım almaya devam ediyorum

Aldım ama devam etmiyorum

Hayır

Belirtmek istemiyorum

Evet ise, lütfen kısaca sebebini belirtiniz: _____

10. Daha önce herhangi bir psikiyatrik ilaç kullandınız mı ya da şu anda kullanmaya devam ediyor musunuz?

Evet, kullanmaya devam ediyorum

Evet, kullanmaya devam etmiyorum

Hayır

Belirtmek istemiyorum

11. Devam eden veya sonlanmış psikoterapi sürecinizden fayda gördüğünüzü düşünüyor musunuz?

Evet

Hayır

Kararsızım

Belirtmek istemiyorum

12. Ne sıklıkta alkol kullanıyorsunuz?

Kullanmıyorum

Her gün

Haftada 3-5 gün

Haftada 1-2 gün

Ayda birkaç kez

Ayda bir kereden daha az

Belirtmek istemiyorum

13. Herhangi bir madde (esrar, hap vb.) kullanıyorsanız ne sıklıkta kullanıyorsunuz?

Kullanmıyorum

Her gün

Haftada 3-5 gün

Haftada 1-2 gün

Ayda birkaç kez

Ayda bir kereden daha az

Belirtmek istemiyorum

14. Bilerek kendinize fiziksel zarar verdiğiniz oldu mu?

Evet

Hayır

Belirtmek istemiyorum

15. Farkında olmadan kazalar yaşadığınız ve fiziksel olarak zarar gördüğünüz oluyor mu?

Evet

Hayır

Belirtmek istemiyorum

Araştırmanın bu bölümünde vücudunuzda dövme olup olmadığı, varsa detayları ile ilgili bazı sorular yer almaktadır. Yanıtlamak konusunda rahat hissetmediğiniz bir soru ya da paylaşmak istemediğiniz bir detay olursa soruyu boş bırakabilirsiniz.

16. Vücudunuzda dövme var mı?

Var

Yok

16.1. Yok ise, gelecekte dövme yaptırmayı düşünür müsünüz?

Evet

Hayır

Kararsızım/Bilmiyorum

16.1.a. Evet ise, vücudunuzun hangi bölgesine dövme yaptırmayı düşünürsünüz? (Birden fazla seçenek işaretleyebilirsiniz)

El/El bileği

Kol/Omuz

Ayak/Ayak bileği

Bacak

Genital bölge

Üst Gövde (ör. göğüs, sırt)

Alt Gövde (ör. göbek, bel, kalça)

Boyun/Kafa

Yüz

16.1.b.Yaptırmak istediğiniz dövmeyi kısaca tanımlayabilir misiniz? (Şekil, renk, yazı vb.)_____

16.2. Var ise, gelecekte tekrar dövme yaptırmayı düşünür müsünüz?

Evet

Hayır

Kararsızım/Bilmiyorum

17. Vücudunuzdaki toplam dövme sayısı: _____

18. Vücudunuzun hangi bölgelerinde dövme var? (Birden fazla seçenek işaretleyebilirsiniz)

El/El bileği

Kol/Omuz

Ayak/Ayak bileği

Bacak

Genital bölge

Üst Gövde (ör. göğüs, sırt)

Alt Gövde (ör. göbek, bel, kalça)

Boyun/Kafa

Yüz

19. Vücudunuzun yüzde olarak yaklaşık ne kadarı dövmeyle kaplıdır? (0 ile 100 arasında bir rakam yazınız): _____

20. İlk dövmenizi kaç yaşında yaptırdınız? _____

21. İlk dövmenizi yaptırırken motivasyonunuz neydi? _____

22. Sizin için en anlamlı olan dövmenizi düşünün, dövmenizi kısaca tanımayabilir misiniz? (Şekil, renk, yazı vb.) _____

23. Yaptırdıktan sonra pişman olduğunuz bir dövmeniz oldu mu?

Evet

Hayır

Evet ise, kısaca pişman olma nedeninizi belirtebilir misiniz? _____

24. Herhangi bir dövmenizi sildirdiniz mi?

Evet

Hayır

Evet ise, kısaca sildirme nedeninizi belirtebilir misiniz? _____

Appendix C: Separation Individuation Inventory (SII)

Aşağıdaki cümleler genel olarak insanlarla ve kendimizle ilgili düşüncelerimizi yansıtmaktadır. Her ifadeyi aşağıda verilen 10 dereceli ölçeği kullanarak değerlendiriniz. Yaptığınız derecelendirmeyi cümlenin yanındaki boş kutuya yazınız. Lütfen hiçbir soruyu boş bırakmayınız.

Hiç Katılmıyorum 1 2 3 4 5 6 7 8 9 10 Tamamen Katılıyorum

1. İnsanlar birine gerçekten çok değer verip bağlandığında, sıklıkla kendileri hakkında daha kötü hissederler.
2. Bir kişi, başka birine duygusal olarak aşırı yakınlaştığında, çoğu zaman kendini kaybolmuş hisseder.
3. İnsanlar birine gerçekten öfkelendiğinde genelde kendilerini değersiz hisseder.
4. İnsanların birine karşı duygusal olarak çok fazla yakınlaşmaya başladıkları zaman, büyük bir olasılıkla incinmeye en açık oldukları zamandır.
5. İnsanlar zarar görmemek için başkaları üzerindeki kontrolü elinde tutmaya ihtiyaç duyar.
6. İnsanları tanıdıkça değişmeye başladıklarını hissederim.
7. Hem iyi hem kötü yanlarımı aynı anda görebilmek benim için kolaydır.
8. Bana öyle geliyor ki insanlar benden ya gerçekten hoşlanıyor ya da nefret ediyorlar.
9. İnsanlar bana karşı çoğu zaman sanki ben yalnızca onların her isteğini yerine getirmek için oradaymışım gibi davranıyor.

10. Kendimden gerçekten hoşlanmak ile kendimi hiç beğenmemek arasında ciddi anlamda gidip geliyorum.
11. Kendi başıma olduğumda bir şeylerin eksik olduğunu hissederim.
12. İçimde bir boşluk hissetmemek için etrafımda başka insanların olmasına ihtiyaç duyarım.
13. Başka biriyle aynı fikirde olduğumda bazen kendime ait bir parçamı kaybetmiş gibi hissederim.
14. Herkes gibi ben de, ne zaman gerçekten saygı duyduğum ve hürmet ettiğim biriyle karşılaşsam kendimi daha kötü görürüm, kendimle ilgili daha kötü hissederim.
15. Kendimi ayrı bir birey olarak görmek benim için kolaydır.
16. Anne babamdan ne kadar farklı olduğumu fark ettiğim zamanlarda çok rahatsızlık duyarım.
17. Önemli bir karar almadan önce neredeyse her zaman anneme danışırım.
18. Diğer insanlarla bağlılık kurup bunun gereklerini yerine getirmek benim için oldukça kolaydır.
19. Duygusal yönden biriyle yakınlaştığımda ara sıra kendime zarar veriyormuşum gibi hissediyorum.
20. Ya birini çok sevdiğimi ya da kimseye katlanamadığımı hissediyorum.
21. Sıklıkla, düşmekle ilgili beni korkutup tedirgin eden rüyalar görürüm.
22. Gözlerimi kapatıp, benim için anlamı olan kişileri zihnimde canlandırmak bana zor geliyor.
23. Birden fazla kere nasıl ya da neden olduğunu anlayamadığım şekilde, uykudan uyanır gibi kendimi biriyle bir ilişkide buldum.

24. Kabul etmeliyim ki kendimi yalnız hissettiğimde çoğunlukla sarhoş olmak isterim.
25. Ne zaman biriyle kavgalı ya da birine çok kızgın olsam kendimi değersiz hissederim.
26. En derin düşüncelerimi söyleyip paylaşacak olsaydım içimde bir boşluk hissederdim.
27. İnsanların benden hep nefret edermiş gibi olduklarını hissederim.
28. Anne-babama ne kadar çok benzediğimi fark ettiğim zamanlarda kendimi çok rahatsız hissediyorum.
29. Biriyle yakın bir ilişki içinde olduğumda sıklıkla kim olduğum duygusunun kaybolduğunu hissederim.
30. Başkalarını aynı anda hem iyi hem kötü özelliklere sahip insanlar olarak görmek benim için zordur.
31. Bana öyle geliyor ki kendim olabilmenin tek yolu diğerlerinden farklı olmaktır.
32. Duygusal açıdan birine aşırı yakınlaştığımda, benliğimin bir parçasını kaybettiğimi hissediyorum.
33. Ne zaman ailemden uzakta olsam kendimi çok rahatsız hissediyorum.
34. Fiziksel yakınlığı ve şefkati almak, kendi başına, onu bana kimin verdiğinden daha önemliymiş gibi olabiliyor.
35. Bir başka insanı gerçekten iyi tanımak bana zor geliyor.
36. Bir karar vermeden önce annemin onayını almak benim için önemlidir.
37. İtiraf etmeliyim ki, başka birinin kusurlarını gördüğümde kendimi daha iyi hissediyorum.

38. Diğer insanları yakınımda tutabilmek için, içimde onları kontrol etme dürtüsü duyarım.
39. İtiraf etmeliyim ki birine duygusal olarak yakınlaştığımda, bazen onlara acı çektirme isteği duyarım.

Appendix D: Inventory of Personality Organization (IPO)

Yönerge: Bu envanterde insanların hayatları boyunca sergilediği çeşitli tutum, duygu ve davranışlar ile ilgili ifadeler vardır. Lütfen aşağıdaki tüm yönergeleri dikkatle okuyun ve size uygun şekilde tamamlayın. Bu envanteri tamamlamak için uzman olmanız gerekmemektedir. Bu envanter, her bir soruyu olabildiğince dürüstçe ve içtenlikle yanıtlarsanız amacına ulaşacaktır.

Tutum, duygu ve davranışlarınızla ilgili olabildiğince açık şekilde bilgi verin lütfen. Kendinizi ve deneyimlerinizi düşünürken, sadece alkol ya da ilaç etkisi altında sergilemiş olabileceğiniz tutum, duygu ya da davranışları dikkate almayın.

(1) Doğru Değil (2) Nadiren Doğru (3) Bazen Doğru (4) Sıklıkla Doğru (5) Her Zaman Doğru

1. İnsanları üzen şeyler yaptığımı; ancak bunların insanları neden üzdüğünü anlayamadığımı fark ederim.
2. Bir şeyi sadece gerçek olarak algılamayı mı istiyorum yoksa o şey sahiden gerçek mi söyleyemem.
3. Kaygılıyken ya da aklım karışık olduğunda, dış dünyadaki şeyler de bana anlamsız gelir.
4. Çevremdeki her şey belirsizleştiyse ve karıştıysa iç dünyam da belirsiz ve karışık bir hal alır.
5. Yakın bir ilişki içindeyken benlik duygumu yitirmekten korkarım
6. İnsanlar beni başarılı bulduğunda çok mutlu, başarısız bulduğunda ise mahvolmuş hissederim.
7. Sıcakkanlı ve fedakâr olmak ile soğuk ve ilgisiz biri olmak arasında gidip gelirim.

8. İşte ya da okuldaki halime kıyasla evde daha farklı bir kişiymişim gibi hissederim.
9. İnsanlar hayran olduğum kişilerin eksik yönlerini görmekte zorluk çektiğimi söyler.
10. Duyduğum bir sesin ya da gördüğüm bir şeyin hayal dünyamın ürünü olup olmadığından emin olamam.
11. Her nasılsa, insanlarla ilişkilerimi nasıl yürüteceğimi asla tam olarak bilemem.
12. Benim için önemli olan insanların benimle ilgili duygu ve düşünceleri aniden değişecek diye korkarım.
13. İnsanlar bana o kadar çok ihanet eder ve düşman olur ki, insanlara güvenmekte zorluk çekerim.
14. Bir hevesle hobiler ve ilgi alanlarına yönelip sonra onlardan kolaylıkla vazgeçerim.
15. İnsanlar bana, ya sevgiye boğarak ya da terk ederek karşılık verme eğilimindeler.
16. Kendimi, farklı zamanlarda tamamen farklı huyları olabilen bir insan olarak görüyorum.
17. Mantıklı bir açıklaması olmayan şeyler duyduğum veya gördüğüm olur.
18. Bazı fiziksel duyumlar bedenimde gerçekten var mı yoksa hayal ürünü mü söyleyemem.
19. Yanıldığım sonradan ortaya çıksa bile, insanlara taparcasına hayranlık duymaya devam ederim.

20. Bir şeyi sadece gerçek olarak algılamayı mı istiyorum yoksa o şey sahiden gerçek mi söyleyemem.
21. Gerçekte var olmayan şeyleri gördüğüm olur.
22. Güvende hissedebilmem için birisine hayranlık duymam gerekir.
23. Beni iyi tanıyan kişiler bile nasıl davranacağımı tahmin edemez.
24. Beni çok iyi tanıyan insanlar da dahil olmak üzere, insanların benimle ilgili düşüncelerinden emin olmam zordur.
25. Hiç kimsenin göremeyeceği ya da duyamayacağı şeyleri görebilirim ya da duyabilirim.
26. Kendimi, neredeyse bir başkasıymışım, tanıdığım (arkadaş, akraba gibi) hatta tanımadığım birisiymişim gibi hissederim.
27. Hiç kimsenin anlayamayacağı ya da bilemeyeceği şeyleri anlarım ya da bilirim.
28. Davranışlarımdaki değişimlere bir anlam veremem.
29. Başkalarının gerçekte var olmadığını iddia ettiği şeylerin seslerini duyduğum olur.
30. Duygularımı aşırı uçlarda, ya çok mutlu olarak ya da derin bir kederle yaşama eğilimindeyim.
31. Gördüğüm şeylerin, onlara yakından baktığımda, başka şeylere dönüştüklerini düşünürüm.

ETHICS BOARD APPROVAL

Ethics Board Approval is available in the printed version of this dissertation.