

日本赤十字九州国際看護大学/Japanese Red
Cross Kyushu International College of
Nursing

Lifestyle image mapping method =
生活イメージマップの方法

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<https://nam-dinh-lecture.blogspot.com/2016/06/mapping.html>

Participatory approach of mapping to lifestyle

Hi, everyone. This time, I will talk about a participatory approach of mapping to lifestyle.

1. Lifestyle

The first topic is “Lifestyle “. Lifestyle is: a particular way of living: the way a person lives or a group of people live (Merriam-Webster). The term lifestyle can denote the interests, opinions, behaviors, and behavioral orientations of an individual, group, or culture.

This term was originally used by Austrian psychologist Alfred Adler (1870-1937). Adler emphasized the interpretation of early memories in working with patients and school children. Adler viewed memories as expressions of “private logic” and as metaphors for an individual’s personal philosophy of life or “lifestyle.”

To think about the relationship between lifestyle and health, A Dictionary of Epidemiology (by Porta, 5th edition, 2008) is helpful. This book states about Lifestyle as follows;

“The set of habits and customs that is influenced, modified, encouraged, or constrained by the lifelong process of socialization. These habits and customs include a use of substances such as alcohol, tobacco, tea, coffee; dietary habits; exercise; etc., which have important implications for health and are often the subjects of epidemiological investigations.”

2. Mapping to challenge lifestyle

So far, lifestyle is complex. We are all living our lifestyle. However, we often do not have chances to reflect our lifestyle. To assist people to reflect and narrate about one’s lifestyle, I propose the use of a map.

Why map?

To describe why I use map, I will firstly show major definitions of “map”.

- 1st. (Surveying) a diagrammatic representation of the earth's surface or part of it, showing the geographical distributions, positions, etc., of natural or artificial features such as roads, towns, relief, rainfall, etc
- 2nd. (Astronomy) a diagrammatic representation of the distribution of stars or of the surface of a celestial body: a lunar map.
- 3rd. a map like drawing of anything

(Collins English Dictionary – 12th Edition 2014 ©)

I am neither a geographer nor an astronomer. I'm a public health science researcher. Therefore, I recognize "map" as "a maplike drawing of health related concepts, i.e. lifestyle, wellbeing, etc.".

In the early 1980s, I came across the idea of "concept mapping", and started inquiries of map use.

3. Concept mapping

I got the idea of concept mapping from my friend, Dr. Shin-ichi Matsubara, an educational technology researcher (Nagasaki University).

Joseph Novak defines "concept" as a perceived regularity in events or objects, or records of events or objects, designated by a label. In a report (Novak 2008, The theory underlying concept maps and how to construct and use them.), Novak wrote as follows.

Concept maps are tools for organizing and representing knowledge. They include concepts, usually enclosed in circles or boxes of some type, and relationships between concepts or propositions, (indicated by a connecting line and linking word) between two concepts. Linking words on the line specify the relationship between the two concepts.

In the 1980s, Dr. Matsubara was a member of research society "ISM (Interpretive Structural Modeling) and concept mapping" in Japan. Dr. Matsubara's teacher, Prof Takahiro Sato conducted this society. Prof Sato was developing the educational use of ISM (ISM learning method; ISM-LM). I joined this society and learned about the method.

In this method (ISM-LM), a sequence of items (educational items) were judged by one to one comparisons, which is multiply repeated until all of the items are compared using matrix, and finally, overall directed-relationships are determined and visualized as a hierarchy map (chart).

As I practiced this method, I realized these computer-assisted multiple comparisons is suitable to map hierarchically structured human knowledges and behaviors. However, to reflect and map human lifestyle in a face-to-face situation, more simple and interactive comparison is appropriate.

In quest of simplified mapping procedure, I thought of paper chromatogram procedure, and finally, thought of the idea of two-dimensional mapping.

4. Paper chromatogram as an origin of idea of mapping

Chromatography is an analytical technique of chemistry, which separates the components of a mixture by differential migration. Among the chromatographic methods, paper chromatography is characterized by the choice of heterogeneous phases of the liquid/liquid type and also by the flatbed arrangement.

The result of differential migration is displayed map wise on one sheet.

The followings are the procedures.

Step 0: Prepare the sample (a mixture of components), a square piece of paper, and two solvents.

Step 1: Put the sample in the form of a spot near one corner of the paper. Apply the first solvent one side of the paper. The solvent flows to one direction. As a result of development, the sample is separated into components which are apparent on a line.

Step 2: Apply the second solvent at the right angle of the paper. The second development is carried out in the direction at a right angle to the first one. The linear arrangement of components changes into two-dimensional arrangements.

5. Transferred steps of mapping cards

Aforementioned two-steps-approach of paper chromatography was transferred to card mapping on a sheet of paper. As for the theme of mapping, I focused on dietary life among multiple dimensions of lifestyle. I proceed to visualize one's unique food choice by arranging cards, on which an image of a particular food and its name are shown.

Step 0: Identify essential cards.

At the beginning of mapping, essential food cards are prepared to visualize one's dietary life.

When I initially developed this card mapping procedure in 1988 for a rural health promotion project at Nagasaki, Japan, I asked the following question to participants;

“Please indicate seven to ten food names important for your daily life.”

At that time, the following were identified as essential food name cards: rice, miso-soup, tsukemono (Japanese pickles), salads, fish, meats, noodles, milk, and nishime (boiled vegetables).

Step 1: Arrange cards along the horizontal axis.

The horizontal axis can be labeled as “eating frequency.” Participants are requested to arrange cards on the horizontal axis (eat infrequently <-----> eat frequently).

This step yields a one-dimensional array of cards (one-dimensional mapping; 1DM). Making the arrangement allows participants to start reviewing their dietary habits.

Step 2: Move and arrange cards along the vertical axis.

The vertical axis can be labeled as “importance to one's own health.” Participants are requested to move and arrange cards along the vertical axis (not important <-----> very important). This step yields a two-dimensional array of cards (two-dimensional mapping; TDM).

6. Participatory reflection, sharing and assessment

Throughout previous steps, participants construct their food images and organize their food images as maps. Each participant accomplishes a unique map corresponding to one's unique lifestyle.

In the later steps, the accomplished maps help participants to reveal, narrate, communicate and share one's unique lifestyle with other participants.

7. Expanding application

After I developed the card mapping procedure, my colleagues and I call this procedure as “mental chromatogram”, “TDM” or “Life Map”.

By setting different axes and different card sets, we can expand the theme of mapping to varieties of lifestyle dimension.

In this example, physical activities and human relationships are shown in a new card set.

The horizontal axis corresponds to “favorite degree of doing”, such as “dislike <-----> like very much”.

The vertical axis corresponds to “frequency of doing”, such as “do infrequently <-----> do frequently”.

These cards set and axes settings were used to reflect the lifestyle of school children.

8. Further theoretical framework of TDM

Since I developed TDM in 1988, I had many chances to present about TDM in Japan. At these domestic conferences, my presentation was always regarded as a communicative activity in a public health setting, and only practitioners showed interests. Then, a turning point came when I did a poster presentation at AERA (American Educational Research Association), held in San Francisco California in 1992.

At the conference, several delegates who came to my poster told me that “your work must be based on constructivist’s perspective.” At that time, I had not yet understood the meaning of constructivism. After this episode, I started to realize that I had been under the influence of constructivism.

Conclusion

Our lifestyle is obviously influenced, modified, encouraged, or reconstructed by the lifelong process of socialization. Two-dimensional mapping helps people to realize our daily socialization.

References

Moriyama M & Harnisch DL (1992) Use of visual symbols to promote communication between health care providers and receivers. Paper presented at AERA, San Francisco, CA. April, 1992.

<http://hdl.handle.net/10069/22064>

Moriyama M & Matsubara S (1996) Mapping of food images and assistance by face-to-face communication in nutrition education. Japanese Journal of Nutrition 54(1) 47-57. (in Japanese with English abstract)

<https://doi.org/10.5264/eiyogakuzashi.54.47>

Moriyama M (2010) Health promotion through rediscovery of one's sensibilities of health: the Lifemap and WIFY Methods. Global Health Promotion 17: 44-47.

Moriyama’s work

https://www.researchgate.net/profile/Masaki_Moriyama/

,(Masaki Moriyama)