



Making the narrative walk-in-real-time methodology relevant for public health intervention: Towards an integrative approach

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ABSTRACT

The purpose of this article is to describe a novel approach for understanding the subjective experience of being a pedestrian in urban settings. In so doing, we take into account the “experience of the body in movement” as described in different theories and according to different methods, and develop a tool to allow citizens and urban planners to exchange ideas about how to make cities more walkable. Finally, we present the adaptation of the approach for use in public health and provide a rationale for its more widespread use in place and health research.

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1. Introduction

In recent years, there has been a growing interest in qualitative methodologies in place and health research because these methods allow for richer accounts of perceptions and subjective interpretations about the locations in which people live (Morrow, 2001; Matthews et al., 2006; Carpiano, 2009; Dennis et al., 2009). As underscored by Moon (1995), qualitative methods offer pivotal opportunities for developing new ideas. From the applied perspectives of urban planning and public health – professions that encourage walking and other forms of non-motorized ambulation – capturing what motivates or intimidates individuals in relation to moving around in urban settings also appears critical. In this regard, only limited research has focused on the subjective experience of the body in movement in urban settings (Allemand et al., 2004). One reason for this dearth of

information is the very recent availability of mobile methods for understanding the nature of the pedestrian experience, which is based, at least in part, on the experience of the body.

The purpose of this article is to describe a novel approach for understanding the subjective experience of being a pedestrian in urban settings. In so doing, we take into account the “experience of the body in movement” as described in different theories and according to different methods, and develop more specific procedures as part of the approach to allow citizens and urban planners to exchange ideas about how to make cities more walkable. The approach offers a complement to ongoing research on the determinants of walking (Frank and Pivo (1995); Frank and Engelke (2001); Gauvin et al., 2008; Pikora et al., 2003; Van Dyck et al., 2009) and draws upon a qualitative method called the itinerary method (Petiteau and Pasquier, 2001) which is one of many emerging mobile methods (Büsher and Urry, 2009; Sheller and Urry, 2006; Jones et al., 2008; Hein et al., 2008). To appropriately cast the new approach, we review relevant literature, describe the concept of itinerary that allows us to underscore the added-value of using a “mobile method”, and describe its adaptation for public health while providing a rationale for its more widespread use in place and health research.

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2. Understanding the experience of the body in movement among pedestrians: a complementary perspective for active transportation and urban planning research

The number of studies on the effects of urban sprawl and increased car use (Ewing et al., 2003; Frank et al., 2000, 2003, 2005) on health and population safety (Julien and Carré, 2000; Yerpez and Girard, 1998) has increased dramatically in recent years (Morency and Cloutier, 2006). A variety of reviews, books, and reports (Transportation Research Board, 2005; Frank et al., 2004; Jackson, 2003) shows that the widespread use of motor vehicles as a mode of transportation and its accompanying urban sprawl have led to numerous health problems such as asthma, cardiovascular and pulmonary diseases, and also to weight gain and obesity. As a result, some public health officials (e.g., Agence de la santé et des services sociaux de Montréal, 2006; Kunzli et al., 2000; Pucher and Dijkstra, 2003) suggest that automobile traffic should be greatly reduced and active transportation opportunities (walking and biking) should be increased.

Many studies are available that pertain to neighborhood effects (Gauvin et al., 2008; Macintyre et al., 2002; Newman and Kenworthy, 1999; Pikora et al., 2003; Lenthe et al., 2005; Rossa et al., 2004), and to the characteristics of the environment that are determinants of walking or biking. Researchers such as Frank and Schmid (2003) suggest that some work be conducted on the design and development of urban space in order to increase active transportation by improving connectivity and land-use mix and by increasing safety.

An entirely separate literature has focused on pedestrian travel episodes or more precisely, on the duration of pedestrian travel episodes (Paquot, 2001; Lepetit and Pumain, 1993; Gwiazdzinski, 2003), their frequency, their underlying motives (Handy et al., 2002), and pedestrian behavior (Bergeron et al., 2007; Carré and Arantxa, 2000). Other authors (Augoyard, 2007; Lynch, 1998) have studied how the city is perceived in terms of images or ambiance, thus incorporating a sensory (i.e., visual, auditory, kinesthetic) dimension into the concept of public space. These alternative research approaches focus on other relevant yet complementary questions pertaining to what leads an individual to choose a specific travel route, what directs choice of routes, and whether or not the individual develops a particular connection within the area. They allow for the human body to be included in our understanding of the effects of place on health. As mentioned by Raveneau (1999): walking is an “*experience [that] is first perceived by the body and the senses before being thought about intellectually*” (translation; p. 33). Thus, walking not only provides a vista for the eyes but also awakens the senses when the body moves through space. Moreover, a walking pace (rather than a driving speed) provides the time needed to take in surroundings. The pedestrian’s experience in movement can provide information about the potential for developing public space and the pitfalls to be avoided. Similarly, Ledrut (1973) has worked specifically on the idea of a meaningful city through a better understanding of the subjective experience of urban environments. Mondada (2003), who studied life stories of city-dwellers in order to analyze ways “of expressing the city”, studied the experience from the perspective of the city-dweller.

Although these authors have developed a strong case for considering the daily experience of city-dwellers in understanding the effects of place on health, further advances in geography are limited by the absence of a theory incorporating movement and of a structured methodology for collecting information on the subjective experience of the body in movement. Towards these ends, we further extend the concept of itinerary and exploit the use of mobile methods to more broadly capture the pedestrian

experience and to allow for a population-based description of the pedestrian experience in urban settings.

3. The concept of itinerary: a starting point for integrating perspectives about the experience of the body in movement

A starting point for our work consisted of identifying a term that might be suited to depicting the pedestrian experience in urban settings and more specifically the experience of the body in movement in relation to places (see also Miaux, 2004, 2005, 2007). The aim was to discursively identify dimensions for integrating perspectives about the experience of the body in movement into place and health research. The most appropriate starting point was deemed to be the ‘itinerary’.

An itinerary is commonly defined as “a way to be followed, or followed (chosen), from one place to another” (Brunet, 1991, p. 285) and underscores the importance of a relationship between a person and space. In effect, the function of an itinerary is to make connections among the different places along a route. An itinerary can also be defined figuratively as the road of life. Indeed, it is not only by walking on the ground that someone can become lost or needs to seek direction. We talk of “an easy road”, “a rough road”, “a straight road”, “steps” through life, etc.

An analysis of these two meanings of the term “itinerary” offered two initial dimensions for understanding the experience of the body in movement: existential and spatial. The itinerary, as a concept, is not merely a route from point A to point B—it thus covers the pedestrian’s experiences along the way, emphasizing the depth of feeling in the individual, both spatially and experientially.

Another aspect of defining the term ‘itinerary’ centered on aspects related to place design. In particular, two dimensions were identified, namely an objective dimension related to design which can set out the most ideal manner in which to get from point A to point B and thus directs the subject in choosing his/her route; we refer to this dimension as the “way to be followed” (Miaux, 2005), and a subjective dimension related to the person’s autonomy in choosing his/her route, which we termed “followed”.

These two latter dimensions of the itinerary approach underscore a difference between the behaviors that might be expected and the behaviors that are actually adopted. Rather than seeing them as contradictory, the itinerary approach instead joins them together to establish a consensus between the morphology of the space and the experience of the body in movement. This combination provides another insight for potential proposals for designing and laying out public spaces, so that they meet both the spatial and planning requirements of a place while still allowing the individual to make his/her own choices for moving about within them. This means thinking about the “sense of place” (as defined by Eyles, 1985) as being dependent on the individual’s actual experience and his/her perceptions, with the idea of accounting for the unexpected and surprises, which attract and hold the individual’s attention.

Incorporating the notion of the body in movement was central to designing the new approach because the body houses the sensory experience that constitutes its interface with the world (Merleau-Ponty, 1964; Le Breton, 2006). As suggested by philosophers such as Hume (2004), there is nothing in the spirit that does not first pass through the senses. To understand the pedestrian experience, we must thus examine the experience of the body in movement and thus the senses. The concept of the body in the new approach is based on the phenomenology and anthropology of the senses (Le Breton, 2006), which grasp the mutual relationship between the individual and the place and which function as two basic premises of the human experience

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