

Planning for gender health justice: A scoping review and research agenda

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Abstract:

Urban planning plays a crucial role in advancing social justice, public health, and gender equity in parallel. Increasingly, scholars are investigating the field's potential to simultaneously enhance outcomes across all three areas through planning for gender health justice. This scoping review assesses the extent to which planners are incorporating gender in healthy cities scholarship, including current work already being done in this area and gaps where further research is needed. Our analysis suggests that planners are making progress on violence against women in public spaces and planning deficits related to women's unpaid care labor. However, our review also indicates that further research is needed to address more diverse forms of gender violence, expand the scope of gendered health issues being investigated, and incorporate a more holistic understanding of gender identity. Based on these findings, we outline an integrated research agenda designed to support planning scholars in advancing gender health justice.

Keywords: gender, health equity, healthy cities, social justice

Introduction:

The purpose of this scoping review is to develop a holistic research agenda to bolster urban planners' capacity to advance gender health justice. Although gender health equity is a strong focus in other fields like public health and social work, we argue that, on the whole, the field of urban planning could do more to take responsibility for its capacity to influence gendered health outcomes. We believe that planners have a unique and vital role to play in addressing gender health disparities because the urban built environment plays a role in creating and perpetuating these disparities. At the same time, urban planning and policymaking can facilitate better health outcomes and advance gender health justice. To that end, we argue that urban planning researchers can and should play a critical role in addressing gender health inequities in our communities.

Through a scoping review of planning literature, which was recently published with the *Journal of Planning Literature*, we explore the extent to which planning scholarship incorporates a gender-sensitive approach towards planning for healthy cities (Kinder & Spence, 2025). We uncover key gaps in this area and use them to build out a preliminary gender health justice research agenda for planning scholars focused on addressing diverse forms of gender violence, expanding understandings of gender health disparities beyond health disparities associated with mothering, and integrating the health needs of transgender and nonbinary populations.

Methods:

Our findings are based on a scoping review of planning literature published in the last decade. Our scoping review followed the recommended multi-stage reflexive approach, which consists of (1) research question formation, (2) search strategy, (3) evidence screening and selection, (4) data extraction, and (5) data analysis (Arksey and O'Malley 2005; Peters et al. 2020; Tricco et al., 2018). As a first step, we formulated our research question as: to what extent does urban planning incorporate gender in efforts to plan for healthy cities?

In the second phase, search strategy, we reviewed peer-reviewed articles published in English between 2014 and mid-2024 with a triple focus on planning, health, and gender in the Global North. We used the Web of Science database to search for articles, following the precedent of other recent planning literature reviews (Kim 2023; Lee et al. 2024; Xiao and Watson, 2019). In order to find articles that focused on planning, health, and gender, we searched for articles that included the term "health" as well as one or more of the following gender-related terms: "gender", "women", "woman", "girl", and "transgender". In order to retain our focus on planning literature,

and in keeping with other recent planning literature reviews (Hartt et al., 2024; Pothukuchi, 2021), we searched a hand-selected list of the top 35 planning journals as identified by Goldstein and Maier (2010). Next, following another recent precedent (Kim, 2023), we conducted a second search of the same terms in journals included within Web of Science's predefined regional and urban planning category. This search strategy resulted in a total of 1,567 articles that merited possible inclusion in this review.

As part of the third phase, evidence screening and selection, we uploaded RIS data for these 1,567 articles into Rayyan, an application that facilitates literature review screening. After reviewing the titles and abstracts of each article and removing duplicates, we reached agreement on 109 articles that merited possible inclusion in this review. In order to assess whether each article contained a significant triple focus in all three of our focus areas (planning, health, and gender), we carefully reviewed the full text of each article. This process resulted in a mutually agreed upon list of forty-one articles to be included in this scoping review.

The fourth phase, data extraction, revealed a number of interesting themes. The forty-one articles included in this review represent a diverse range of planning and health topics. With a total of 121 co-authors and very little overlap between authors and articles, it is clear that there is a growing scholarly community interested in planning for gender health justice. Moreover, more than two-thirds of our sample were published within the last five years, suggesting a recent increase in research interest on this topic. However, there was less diversity in publication sources: just twelve journals published the entirety of planning for gender health justice scholarship in the last ten years.

Table 1: Journals included in this scoping review.

Journal	Number of articles
<i>Landscape and Urban Planning</i>	7
<i>Urban Studies</i>	6
<i>Cities</i>	5
<i>Housing Policy Debate</i>	4
<i>Transportation Research Part A - Policy and Practice</i>	4
<i>Environment and Planning C - Politics and Space</i>	3
<i>Environment and Planning A - Economy and Space</i>	3
<i>Journal of the American Planning Association</i>	2
<i>Journal of Urban Affairs</i>	2
<i>Environment and Planning E - Nature and Space</i>	1
<i>Urban Planning</i>	1
<i>Urban Affairs Review</i>	1

The geographic focus of the articles was more or less evenly distributed between Europe and North America, with a small number focused on Australia.

Table 2: Geographic focus of articles included in this scoping review.

Geographic Focus	Number of articles
Europe	19
North America	18
Australia	3
Europe & North America (dual focus)	2

The articles were also roughly evenly split between qualitative and quantitative methods..

Table 3: Methods used by articles included in this scoping review.

Methods	Percentage of articles
Qualitative methods	56%
Quantitative methods	44%

The most common planning topics in this review were transportation and public safety. The remaining articles considered housing, urban green space, right to the city, economic development, care planning, energy planning, climate adaptation planning, indigenous planning, neighborhood planning, healthy city planning, land use, and gentrification.

Table 4: Planning topics included in this scoping review.

Planning topic	Number of articles
Transportation	10
Public safety	8
Housing	5
Urban green space	4
Right to the city	2
Economic development	2
Care planning	1
Energy planning	1
Climate adaptation planning	1
Neighborhood planning	1
Healthy city planning	1
Land use	1
Gentrification	1
Indigenous planning	1

The most common health topic by far was violence, following by wellbeing, reproductive health, and the health benefits of nature. Other health issues explored included environmental justice, physical activity, healthcare, urban health, aging, mortality, disability, and healthy cities.

Table 5: Health topics included in this scoping review.

Health topic	Number of articles
Violence	17
Reproductive health	4
Wellbeing	4
Health benefits of nature	3
Environmental justice	3
Physical activity	2
Aging	1
Disability	1
Healthcare	1
Mortality	1
Urban health	1
Healthy cities	1
Mental health	1

Most articles had a primary gender focus on women, with some articles exploring issues pertinent to girls and transgender individuals.

Table 6: Gender focus of the articles included in this scoping review.

Gender focus	Percentage of articles
Women	90%
Older women	2.5%
Girls	2.5%
Transgender	2.5%
Women and transgender (dual focus)	2.5%

After conducting the initial data extraction, we used NVivo – a qualitative data analysis software program – to code the articles during the fifth phase, data analysis. We coded the articles based on key themes identified during the third and fourth phases, including violence, social reproductive, health issues unrelated to violence or social reproduction, gender identities other than cisgender women, and mentions of planning as a determinant of health. We then analyzed the coded material to develop the research agenda presented in this paper.

Conceptualizing gendered violence beyond the gender fear gap:

The first component of our gender health justice research agenda is the opportunity for planning research to conceptualize planning's role in gendered violence beyond women's fear of unknown assailants in public space. As the focus of seventeen articles – over 40% of our sample – violence was by far the most commonly researched gendered health issue in this scoping review. This research reveals the value of investigating violence as an expression of gendered health disparities from a health perspective. At the same time, it reveals opportunities for the field to expand its understanding of gender violence.

The articles in this review often discuss violence in the context of the “gender fear gap” (Jiang et al., 2014), which is framed as women’s disproportionate experiences of fear in public spaces compared to men (Agusti et al., 2022; AitBihiOuali & Klingen, 2022; Navarrete-Hernandez et al., 2021). Specifically, this gap focuses on women’s fear of harassment and assault by strangers in public spaces, leading many to “restrict their mobility, to varying degrees, because they feel afraid” (Sandberg & Ronnblom, 2015, 2665; see also Lee et al., 2018). The gender fear gap compromises women’s right to the city by creating “fear-based exclusion” from urban locations and resources (Loukaitou-Sideris et al., 2024, 212; see also Biswas & Sweet, 2024). This exclusion in turn limits women’s access to education and employment opportunities, directly and indirectly compromising their health and wellbeing (Agusti et al., 2022; AitBihiOuali & Klingen, 2022; Navarrete-Hernandez et al., 2021).

The gender-fear gap is an important issue for planners to reckon with. That said, the overwhelming emphasis on the gender-fear gap in planning scholarship on gendered health issues reveals a missed opportunity to engage with other types of gendered violence. We found evidence that this hyper-focus on women’s fear of unknown male assailants in public spaces is matched by a near total-silence on other forms of gender violence that are also heavily influenced by urban infrastructure and policymaking.

Some planners are reluctant to address intimate partner violence, arguing that “it is inappropriate and naive to expect violence indoors should be tackled by urban planners” (quoted in Sweet and Escalante, 2015, 1831). However, other research included in this review reveals that urban planning and policymaking shapes gendered vulnerability to IPV. One area that is notably influenced by planning is housing. Access to high quality, affordable, and stable housing is critical to avoiding, escaping, and recovering from IPV (Ballen et al., 2024; Martino et al., 2020; Thomas et al., 2020). However, emergency and affordable housing is often located in areas with limited access to economic opportunities or public transit due to zoning laws and housing market conditions, despite the fact that women are more likely to be low-income and less likely to access a private vehicle (Ballen et al., 2024; Fan et al., 2016; Martino et al., 2020). These inadequacies “could mean the difference between gaining employment, education, or social support and hence not returning to an abusive partner” (Martino et al., 2020, 4; see also Thomas et al., 2020).

This is where planners have an opportunity to play a role in preventing and responding to IPV. Rethinking housing, land use, and transportation policies could be an act of violence prevention championed by planners, changing the current reality in which “violence and housing instability combine to become a major cause of poor health in women” (Martino et al., 2020, 2).

In addition to IPV, this scoping review revealed opportunities for planners to address the gendered components of structural violence. Due to the feminization of poverty, women “more often reside in socioeconomically deprived areas” (Johansson & Haandrikman, 2023, 1242) and “bear the brunt of poor environments” (Navarrete-Hernandez et al., 2021, 2). Women, therefore, are disproportionately impacted by the “slow violence” of extreme urban disinvestment (Vasudevan & Smith, 2020; see also Moffett-Bateau, 2024), which exposes residents to air pollution, water contamination, and unsafe housing, in combination with limiting access to health promoting resources like accessible and affordable grocery stores, green spaces, and housing. Women are also disproportionately exposed to neighborhood violence in these areas, resulting in chronic stress which, when “sustained over a long period of time, can make residents more vulnerable to disease and more susceptible to negative coping behaviors” (Zuberi et al., 2016, 548).

Other examples of structural violence often neglected by planners include transphobic harassment in public spaces (Smith et al., 2023), the “hypercriminalization” of Black women living in gentrifying areas (Versey, 2023), the gendered dimensions of Islamophobic hate crimes (Hancock et al., 2018), and poor public housing conditions (Moffett-Bateau, 2024).

Taken together, this evidence suggests that planners recognize violence as an important planning-related gendered health issue. While most of this research focuses on the gender fear gap, emerging research demonstrates opportunities for planners to play an increased role in addressing the gendered dimensions of interpersonal and structural violence.

Conceptualizing gendered health disparities beyond caregiving:

Our next finding concerns reproductive labor, which was a dominant framework within the planning literature on gendered health disparities. Twenty-nine articles – nearly 70% of our sample – invoke women's gendered role as caregivers as a primary frame of reference. What this invocation does, either implicitly or explicitly, is equate "gender" as a frame of analysis with "cis women engaging in mothering tasks", which then implies that gendered health disparities are health disparities related to the act of mothering. While we recognize the importance of care work as a factor in gendered health outcomes, we also argue that planning researchers should expand their conceptualization of gender health disparities beyond disparities associated with parenthood and caregiving. For instance, planners should attend to health disparities that affect younger and older women outside of childbearing years, health disparities that affect women regardless of whether or not they are parents, and health disparities specific to transgender and/or nonbinary gender identities.

The overwhelming focus of the articles that invoke caregiving is on mothers caring for minor children. In this context, care refers to the labor that is "necessary to maintain existing life and reproduce the next generation" (Binet et al., 2023, 284), which is disproportionately performed by women (Morris, 2018). Caregiving is an important gendered health issue for planners to reckon with. Although this work—and the infrastructure necessary to support it—has historically been undervalued within national governments (Horton 2022) and spatial policymaking (Martino et al. 2020), emerging research demonstrates that "the crisis of care is an urban planning problem" in that care became harder, more complex, or compromised "when environmental components for care were absent, inadequate, inaccessible, or spatially disconnected," and that planning can address these barriers by making care visible and valued "in the design and evaluation of policies and interventions in the built environment" (Binet et al. 2023, 284). This infrastructure could improve women's health—not just the health of their dependents—directly through improved access to safe mobility, healthy food, and medical care, as well as indirectly through increased access to health promoting resources related to economic advancement and leisure pursuits (Binet et al. 2023; Colley et al. 2022).

Transportation planning researchers are making notable progress on this issue. Multiple articles in this scoping review concern the ways in which car-oriented land use and transportation planning "reinforces traditional gender relations" and their associated gender health disparities by connecting men to better paid, commuter-based employment, while leaving more care-burdened women with few options beyond underpaid, local, part-time work (Giacomantonio et al. 2024; Lee et al. 2018; Navarrete-Hernandez et al. 2021; Sandberg and Ronnblom 2015; Sandow et al. 2014). Moreover, transportation systems center the needs of male commuters more than female caregivers, who tend to take more frequent and shorter trips, often in the context of chauffeuring children and/or trip chaining (AitBihiOuali and Graham 2021; AitBihiOuali and Klingen 2022; Giacomantonio et al. 2024; Johansson and Haandrikman 2023; Lee et al. 2018; Navarrete-Hernandez 2023). Researchers call on planners to redesign transportation systems to better accommodate the needs of caregivers, which would support their health and the health of their dependents (AitBihiOuali and Graham 2021; AitBihiOuali and Klingen 2022; Giacomantonio et al. 2024; Johansson and Haandrikman 2023; Lee et al. 2018; Navarrete-Hernandez 2023). We strongly support research at the intersection of planning, health, and caregiving, even as our second finding in this area calls on planners to address gender health disparities that affect women and gender minorities regardless of whether or not they are caregivers.

Although many studies in this review both explicitly and implicitly connect gendered health disparities to women's roles as mothers, others demonstrate that inequitable health outcomes impact women regardless of whether or not they are parents. These studies reveal that, even without caring for minor children, women still experience increased health risks associated with climate change (Amorim-Maia et al. 2023), substandard housing (Morris 2018), aging in place (Byles et al. 2018), food systems (Amorim-Maia 2023; Versey 2022), disabling environments (Fabula and Timár 2018; Martino et al. 2020), and neighborhood disinvestment (Lee et al. 2018; Moffett-Bateau 2024). Regardless of their status as caregivers, women have less access to the health promoting benefits of public space (Navarrete-Hernandez et al. 2021), green space (Colley et al. 2022), urban cycling (Giacomantonio 2024), paid work (Agustí et al. 2022; Ballan et al. 2024), and homeownership (Morris 2018). Additionally, women with or without children in the home appeared to receive the fewest benefits from and were exposed to

the greatest risks associated with gentrification (Versey 2022) and super-commuting (Morris 2018; Sandow et al. 2014; Kroesen 2022). In addition to planning for care infrastructure, this research presents important opportunities for planners to develop more diverse responses to gendered health injustices.

One way to respond to this call is for planning researchers to expand their research to include health disparities impacting older women and girls, who are less likely to care for minor children. While a majority in our sample address the health needs of mothers, very few investigate gendered health outcomes experienced by older women and girls. These articles include research on the positive health impacts of schoolyard greening which “stimulates physical activity, but only in girls” (van Dijk-Wesselius et al. 2018, 23), and the need to develop cycling infrastructure and programming tailored to the needs of adolescent girls (Giacomantonio et al. 2024). On the other end of the age spectrum, “gendered disadvantage across the lifecourse means that women may not have been as well set-up in later life, and hence have fewer resources” to manage the health challenges associated with aging (Byles et al. 2018, 921). Our findings suggest that older women’s and girl’s specific health needs are underconsidered in planning literature, offering a ripe opportunity for planning researchers to make an impact towards gender health justice.

Conceptualizing gender beyond the cisgender binary:

Another response could be to expand research on planning for the health needs of transgender and non-binary populations. This research is urgently needed given concerns that “systemic cissexism, transmisogyny, and transphobia” in urban planning and related fields “produces marginalisation across public institutions and spaces” including “housing, transportation, and facilities” (Smith et al. 2023, 2). Although numerous articles included in this scoping review mention these groups in passing, these mentions are usually found in the “limitations” section. Just two articles in our sample retain a significant focus on transgender identity (Chlala, 2020; Smith et al., 2023).

While few in number, these studies highlight several areas in which planning research could help the field to more effectively address the health of transgender communities. One area is transportation, which is important given that “transgender and gender-nonconforming individuals” have been found to “experience frequent sexual harassment in transit environments” (Loukaitou-Sideris et al. 2024, 216). Another area involves affordable housing, which matters because, in the U.S., “transgender people ... are four times more likely than cisgendered people to live in poverty, with nearly one-third of Black and Latinx transgender people living on less than \$10,000 a year” (Chlala 2020, 1185). A third area is accessible public space, which planning could improve through ordinances requiring or incentivizing “public, accessible, gender neutral toilets in shops and restaurants near the entrance to the building from the open space” (Smith et al. 2023, 5). In all these areas, in addition to producing co-benefits that improve health outcomes for mothers, older women, low-income women, immigrant women, disabled women, and women of color, these planning priorities could disproportionately benefit transgender and nonbinary people, and they could be tailored with those groups in mind (Smith et al. 2023).

Conclusion:

Planning is a determinant of health, and planners have a critical role to play in advancing gender health justice. In this scoping review, we find that planners are making important progress in this area, especially around resolving gendered health disparities related to the gender fear gap and health needs related to caregiving. While these contributions are important and beneficial, we cannot stop here. We have identified critical opportunities for planners to expand their research and advance gender health justice in the process. Specifically, we urge planning researchers to investigate a wide range of gender violence topics including interpersonal violence and structural violence, to expand their focus on gendered health issues beyond disparities associated with caregiving to include girls and older women, and to holistically incorporate the health needs of transgender and nonbinary individuals.

Expanding planning research on gender health disparities to include these health topics and identity groups can enable the field to develop actionable infrastructure and policy recommendations advancing gender health equity in communities across the world. In sum, we applaud the valuable contributions urban planning is already making towards addressing gender health disparities, and we urge the field to scale up these efforts by embracing

cing an expanded research agenda for gender health equity.

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Appendix:

Articles included in this scoping review		
Name	Author(s)	Year
Gender differences between the emotions experienced and those identified in an urban space, based on heart rate variability	Agusti et al.	2022
The impact of the MeToo scandal on women's perceptions of security	AitBihiOuali and Graham	2021
Inclusive roads in NYC: Gender differences in responses to cycling infrastructure	AitBihiOuali and Klingen	2022
Seeking refuge? The potential of urban climate shelters to address intersecting vulnerabilities	Amorim-Maia et al.	2023
Supporting the housing needs of domestic violence shelter residents: Considerations for survivors with and without disabilities	Ballan et al.	2024
Fracking and epistemic injustice: A feminist critique of knowledge formation	Beebeejaun	2024
The urban infrastructure of care planning for equitable social reproduction	Binet et al.	2023
Reimagining the urban through agency as healing justice: Stories from Kolkata and Chicago	Biswas and Sweet	2024
Changes in housing among older women: Latent class analysis of housing patterns in older Australian women	Byles et al.	2018
Misfit medicine and queer geographies: The diverse economy and politics of cannabis in carceral Los Angeles	Chlala	2020
Who benefits from nature? A quantitative intersectional perspective on inequalities in contact with nature and the gender gap outdoors	Colley et al.	2022
Beyond safety: Refusing colonial violence through indigenous feminist planning	Dorries and Harjo	2020
What limits Muslim communities' access to nature? Barriers and opportunities in the United Kingdom	Edwards et al.	2023
Violations of the right to the city for women with disabilities in peripheral rural communities in Hungary	Fabula and Timar	2018
Waiting time perceptions at transit stops and stations: Effects of basic amenities, gender, and security	Fan et al.	2016
Women's safety perception assessment in an urban stream corridor: Developing a safety map based on qualitative GIS	Gargiulo et al.	2020
Bicycle facilities and women's cycling frequency - An intersectional analysis of gendered travel behaviour	Giacomantonio et al.	2024
Banlieusardes claiming a right to the City of Light: Gendered violence and spatial politics in Paris	Hancock et al.	2018

Financialization and non-disposable women: Real estate, debt and labour in UK care homes	Horton	2022
Taking back the night? Gender and the contestation of sexual entertainment in England and Wales	Hubbard and Colosi	2015
A dose of nature: Tree cover, stress reduction, and gender differences	Jiang et al.	2014
Gendered fear of crime in the urban context: A comparative multilevel study of women's and men's fear of crime	Johansson and Haandrikman	2023
Working from home during the corona-crisis is associated with higher subjective well-being for women with long (pre-corona) commutes	Kroesen	2022
The "transportation disadvantaged": Urban form, gender and automobile versus non-automobile travel in the Detroit region	Lee et al.	2018
Documenting #MeToo in public transportation: Sexual harassment experiences of university students in Los Angeles	Loukaitou-Sideris et al.	2024
Utilitarian bicycling and mental wellbeing role of the built environment	Ma and Ye	2022
Planning with care: Violence prevention policy at the intersection of invisibilities	Martino et al.	2020
"I can't vote if I don't leave my apartment": The problem of neighborhood violence and its impact on the political behavior of Black American women living below the poverty line	Moffett-Bateau	2024
Is a fixer-upper actually a downer? Homeownership, gender, work on the home, and subjective well-being	Morris	2018
Building safer public spaces: Exploring gender difference in the perception of safety in public space through urban design interventions	Navarrete-Hernandez et al.	2021
"I don't think we'll ever be finished with this": Fear and safety in policy and practice	Sandberg and Ronnbom	2015
Is your commute killing you? On the mortality risks of long-distance commuting	Sandow et al.	2014
Planning in the "LGBTQ capital": Choreographing transgender in and out of policy	Smith et al.	2023
To recognize the tyranny of distance: A spatial reading of Whole Woman's Health v. Hellerstedt	Statz and Pruitt	2019
On pathways and agreement: Objective and perceived accounts of neighbourhood attributes and their associations with mental health during pregnancy	Subiza-Perez et al.	2023
Bringing bodies into planning: Visceral methods, fear and gender violence	Sweet and Escalante	2015
No easy decisions: Developing an evidence-informed process to allocate housing choice vouchers to survivors of intimate partner violence	Thomas et al.	2020
The impact of greening schoolyards on the appreciation, and physical, cognitive and social-emotional well-being of schoolchildren: A prospective intervention study	Van Dijk-Wesselius et al.	2018
The domestic geopolitics of racial capitalism	Vasudevan and Smith	2020
Gentrification, health, and intermediate pathways: How distinct inequality mechanisms impact health disparities	Versey	2023
Neighborhoods, race, and health: Examining the relationship between neighborhood distress and birth outcomes in Pittsburgh	Zuberi et al.	2016