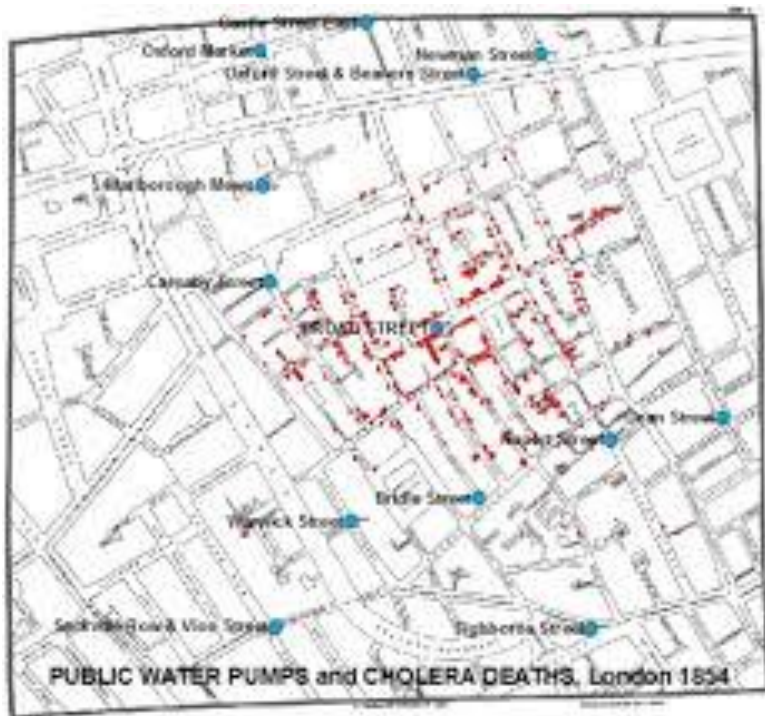


Cities, Planning, Health and Gender

Inés Sánchez de Madariaga

Director UNESCO Chair Gender in Science, Technology
Professor of City Planning, Universidad Politécnica de Madrid
Member of Leadership Council, UN-SDSN Spain
Member of Advisory Group on Gender, UN-Habitat

Health in the origins of modern city planning during the industrial revolution



John Snow's mapping of deaths by cholera, London 1854



Housing and living and conditions
Slums in New York and London late 19th century



Foundations of modern city planning, early 20th century



The Athens Charter and functionalism

Zoning and the Four functions of the city:

- Housing
- Employment
- Recreation
- Transportation

Infrastructures and facilities:

- Sanitation and sewerage
 - Water
 - Energy
 - Street lighting
 - Waste disposal and treatment
 - Open and green areas
-
- Educational services
 - Health services
 - Sports
 - Culture, libraries, etc.



Urban health in the developing world today



United Nations
Educational, Scientific and
Cultural Organization



UNESCO Chair on
Gender Equality Policies in Science,
Technology and Innovation

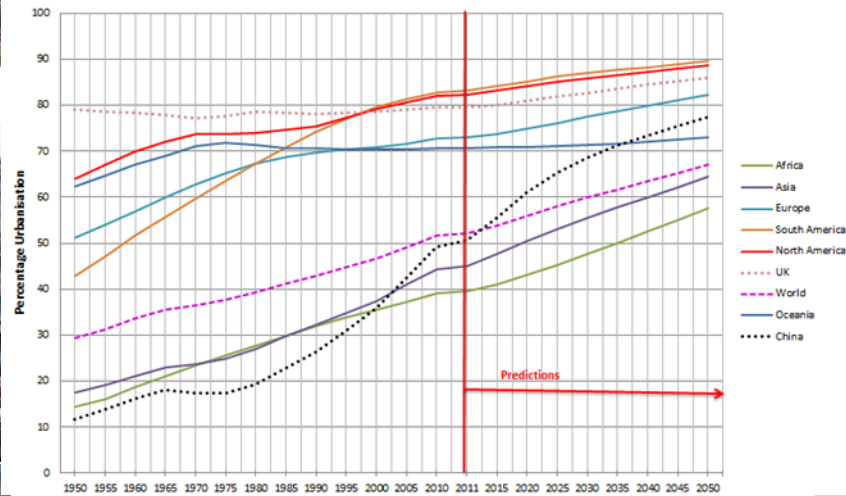


INTERNATIONAL
CAMPUS OF
EXCELLENCE

1.5 million people are added to the
global urban population **every week**



A graph to show World Urbanisation for different world areas from 1950 to 2050



Cities, infratructure, health and gender in the Agenda 2030



IMPLEMENTING
THE NEW
URBAN AGENDA

ADVISORY GROUP ON GENDER ISSUES (AGGI)



SUSTAINABLE DEVELOPMENT GOALS



 **REDS** | RED ESPAÑOLA
PARA EL DESARROLLO
SOSTENIBLE



Analysing implicit Gender assumptions

- They are usually unquestioned and invisible for the research community
- They can impact unconsciously on research priorities, questions, and methods
- When they go invisible and unexamined they can produce bias
- Questions:
 - What are the implicit gender assumptions and attitudes underpinning research and policy?
 - What are the needs, assumptions, behaviours and expectations of involved persons?
 - Do women and men have different needs and expectations regarding the results of research and policy?
 -
 - What are the real characteristics of users –men and women?
 - How are their own self assessments and how can this be influenced by gender stereotypes?

Some gender concepts relevant to urban planning

Gender stereotypes and social norms

Gender roles

Sexual división of labor

Double workload

Productive and reproductive spheres

...

CARE, a key concept for planning:

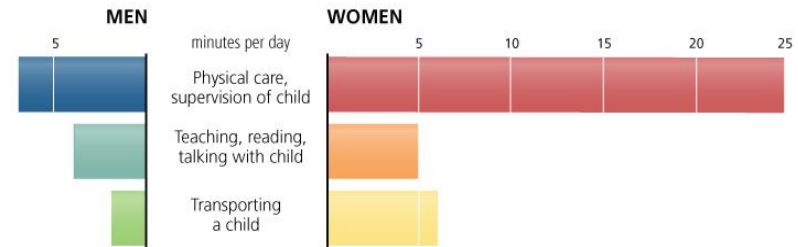
“Paid and mostly unpaid work performed by adult individuals on behalf of children, the old, the sick and the overall functioning of the household”

And also:

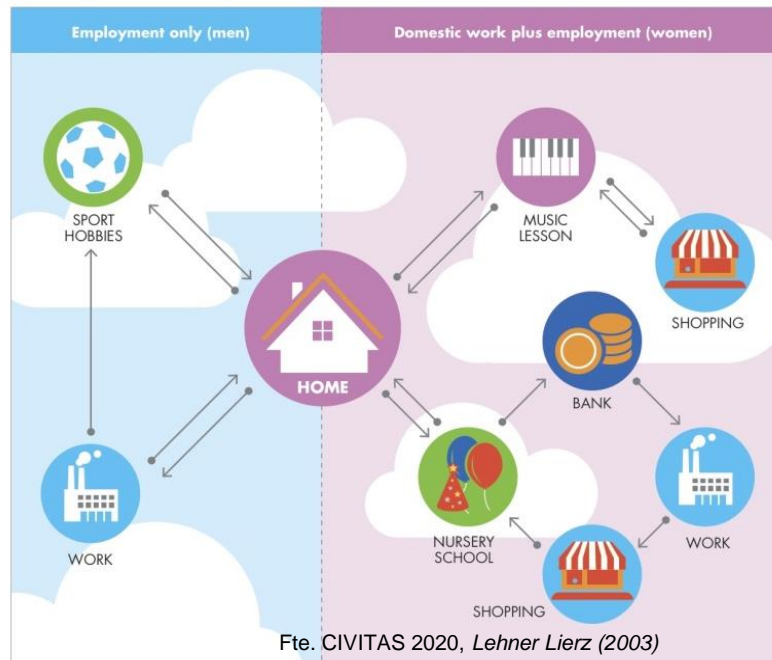
Gender violence
Universal design....

Average Time Spent Caring For Children

Spanish men and women, 2007*



*Data includes individuals without children

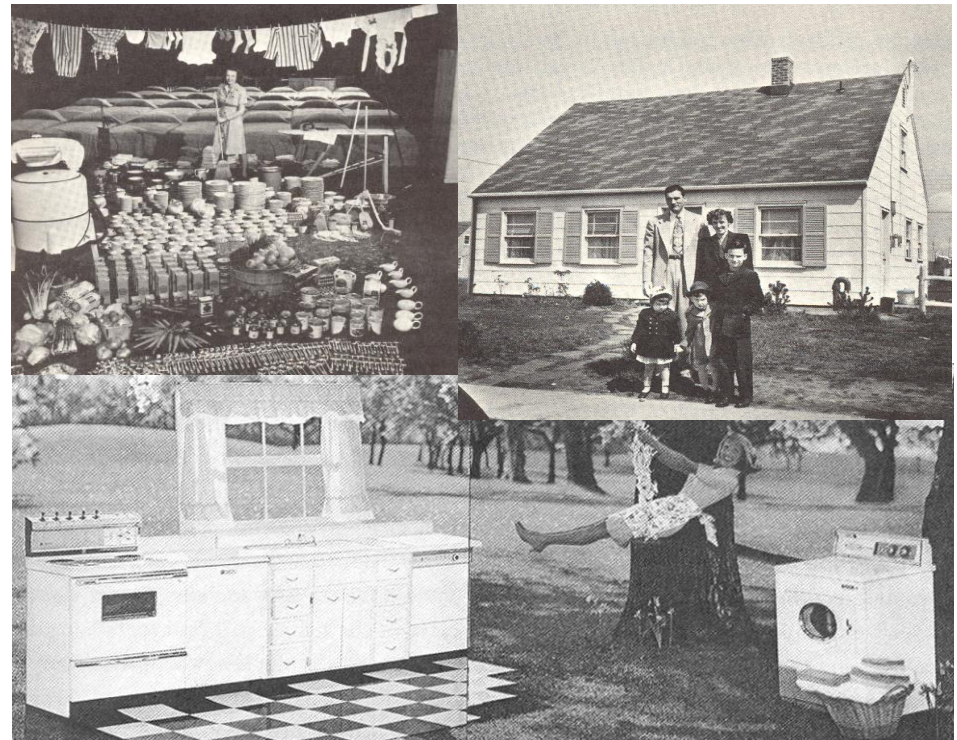


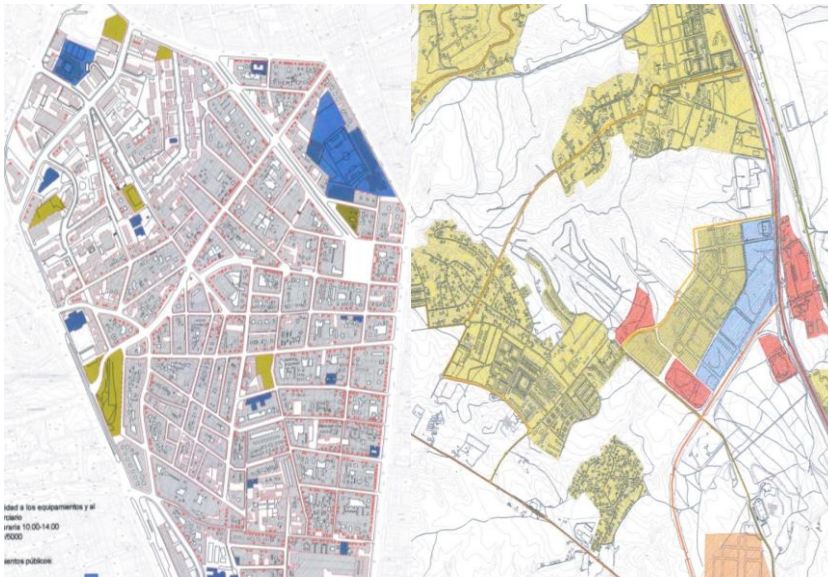
Implicit Gender assumptions in planning and transportation

Unquestioned implicit assumptions regarding sexual divisions of labour, often unconscious, underlying urban planning and design practices (*Built Environment 1994*)

Gender roles and stereotypes implicit in the building of contemporary suburban space (Hayden 1981)

The needs and experiences of those persons who undertake care responsibilities are not made explicit nor taken equally into account within policy processes.





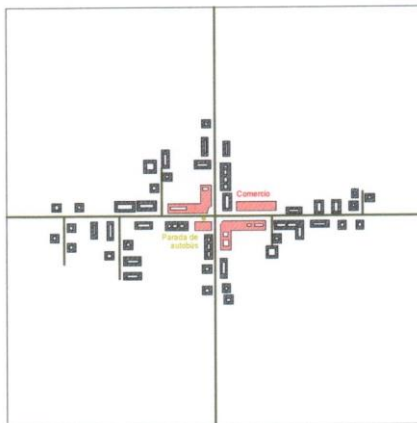
The Athens Charter and functionalism

Zoning and the Four functions of the city:

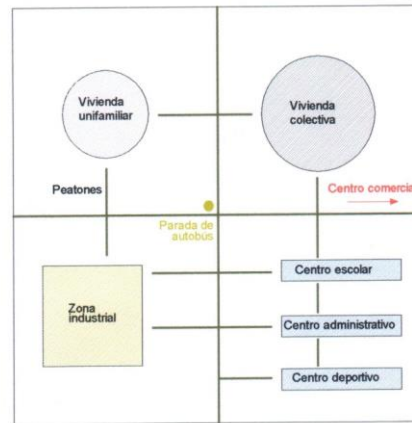
- Residential
- Production
- Leisure
- Transport

Underlying gender assumptions:

- The personal experience of those **living the city without care responsibility.**
- Paid employment is the main focus
- Housing as leisure and not care
- Transport as the means to link the spaces assigned to those functions.



Ciudad tradicional

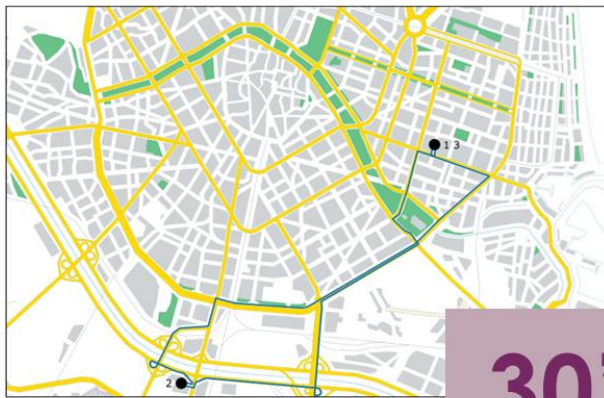


Ciudad dispersa

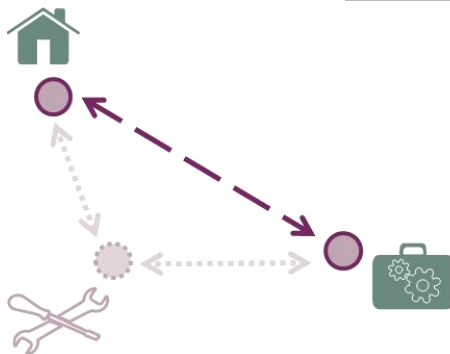
Mobility. Spatial- temporal relations

MOVILIDAD DEL EMPLEO.

Desplazamientos rutinarios de tipo pendular

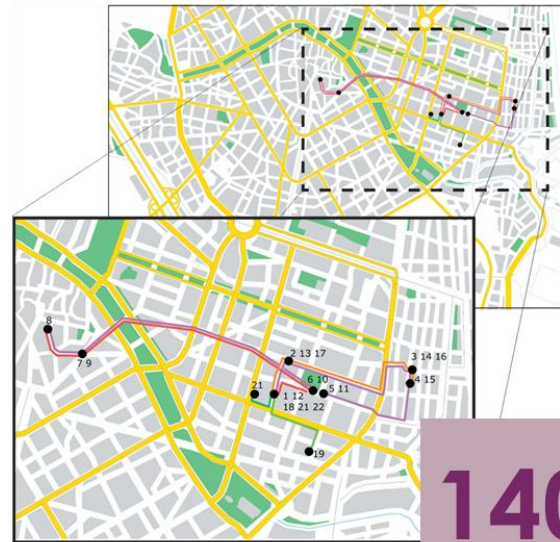


30'

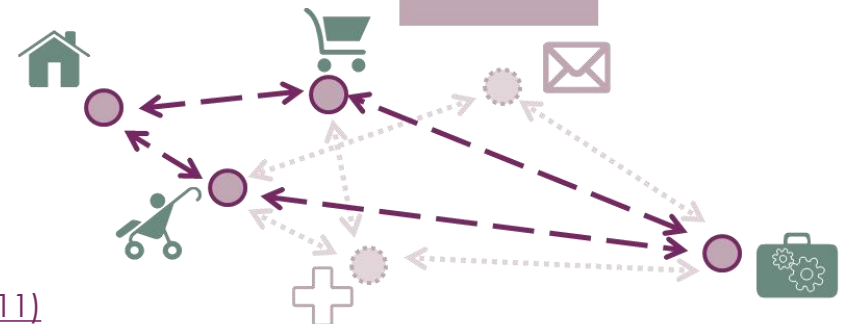


MOVILIDAD DEL CUIDADO.

Desplazamientos variables de tipo poligonal



140'



Author: Inés Novella Abril (2011)

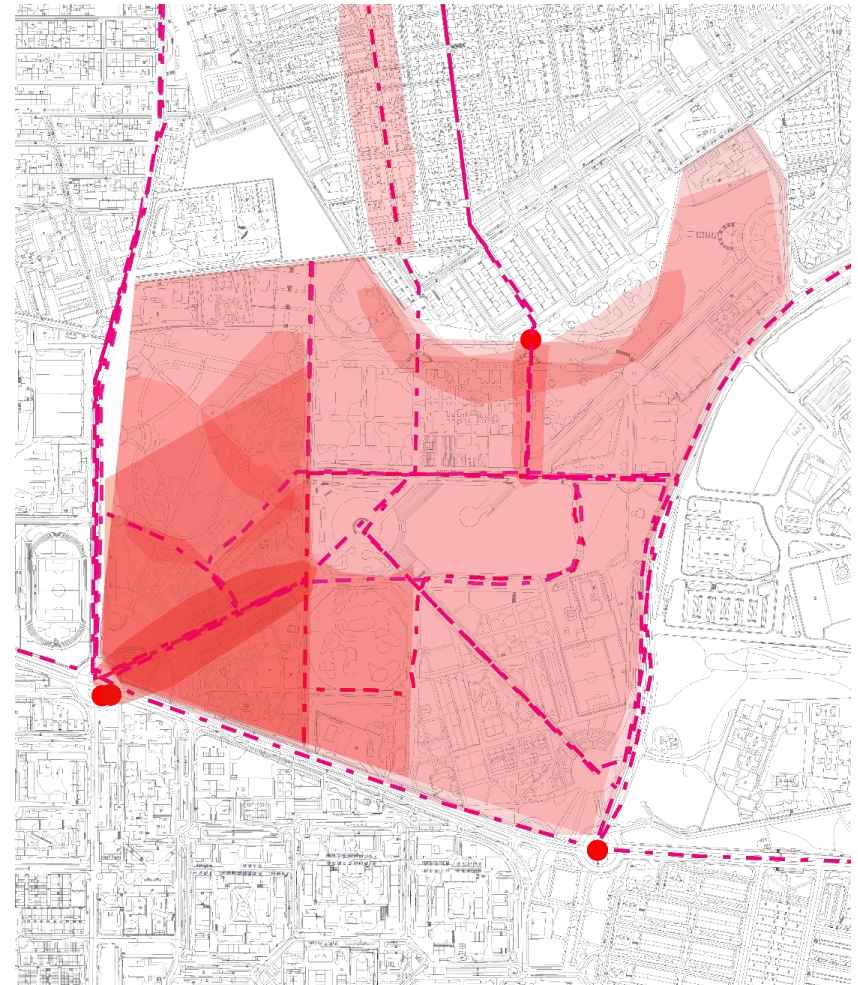
Mobility and public health.

Research on urban health in 4 neighborhoods in the city of Alicante

	BARRIO PERIFÉRICO Rentas Bajas		BARRIO DE ENSANCHE Inicio Gentrificación		BARRIO CÉNTRICO Multiservicios/Administrat.		BARRIO CÉNTRICO Casco Antiguo	
	H	M	H	M	H	M	H	M
% Vecinos/as encuestados/as que identifican cuestiones directamente relacionadas con MOVILIDAD como activos en salud.	14,5%	9,4%	15,7%	27,1%	21,4%	40,0%	22,3%	23,6%
POSICIÓN EN EL LISTADO DE ACTIVOS de SALUD	2ª	3ª	1ª	1ª	1ª	1ª	1ª	1ª

- Study presented at Spanish Society of Epidemiology (Septembre 2017)
- Director of project: Carlos Álvarez-Dardet (Universidad de Alicante)
- Researchers: Mª Teresa Ruiz Cantero, Elisa Chilet Rosell (Univ. Alicante) e Inés Novella Abril (UPM)

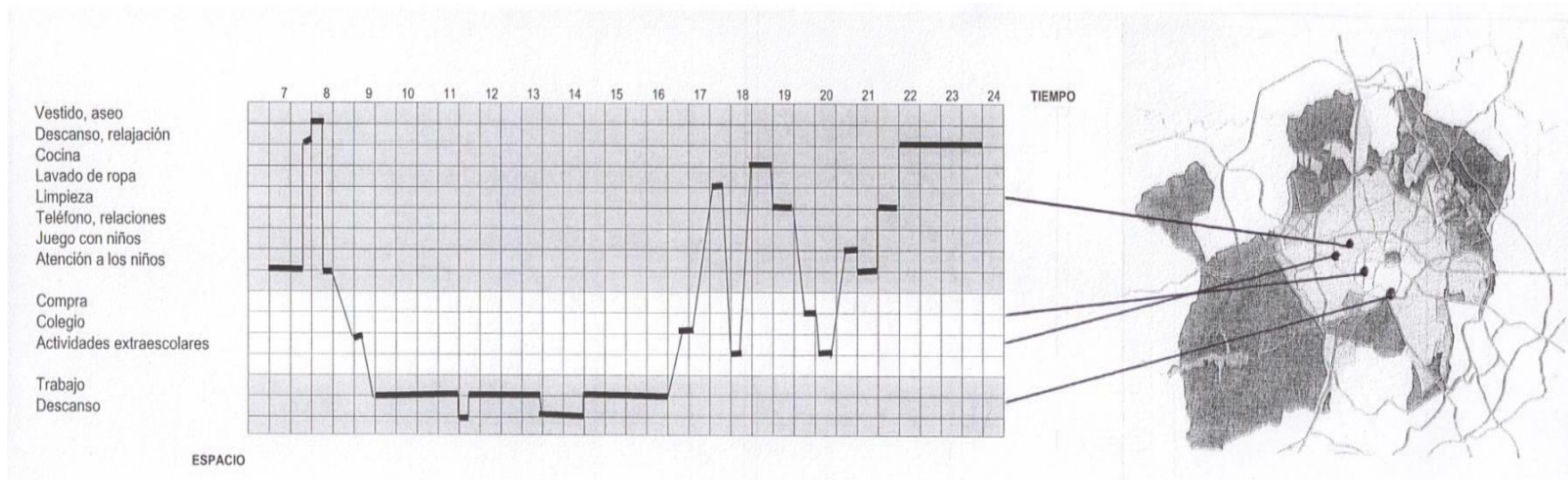
Mobility and urban safety: Exploratory Safety Audits



Chain of tasks

An operational concept allowing a better understanding of spatial- temporal dimensions within the everyday life of persons with care responsibilities working in paid employment (Hidding 2002)

Example applied to a person working in paid wemployment with care responsibilities, Madrid.

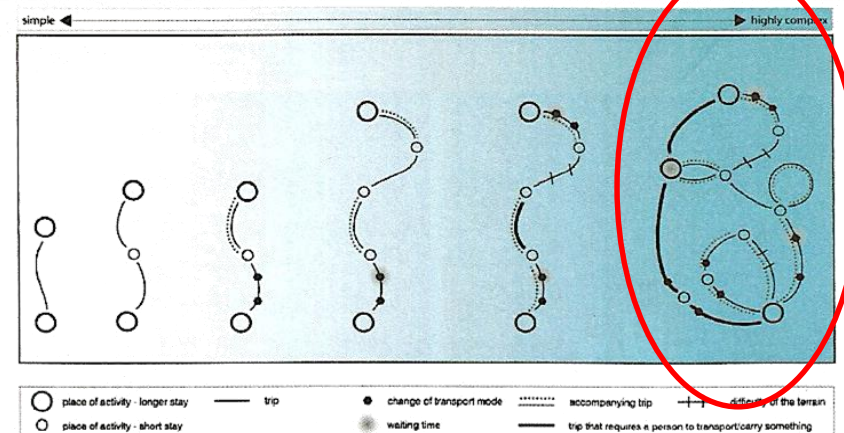
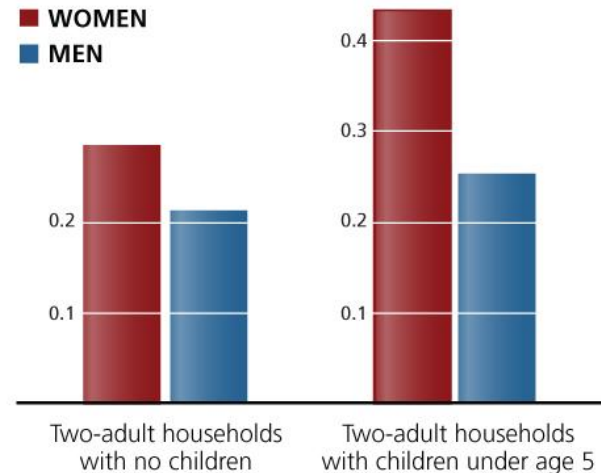


Source: Inés Sánchez de Madariaga

Main gender differences in transportation

- Distances
- Transportation modes
- Access to private car
- Purpose of trips
- Time
- Number of trips
- Spatial pattern of trips
- Chained trips
- Geographical scope
- Age of voluntary cessation of driving
- Safety
- Ergonomy

Trip Chaining by Women and Men During Commutes
Average number of stops per commute, United States, 2001



Identified in 35+ years of research of women in transportation
(pioneering research: Women' Issues In Transportation, FHA, 1979):

A new concept and one hypothesis

The **mobility of care** proposed as an umbrella concept:

- Quantifies
- Makes visible

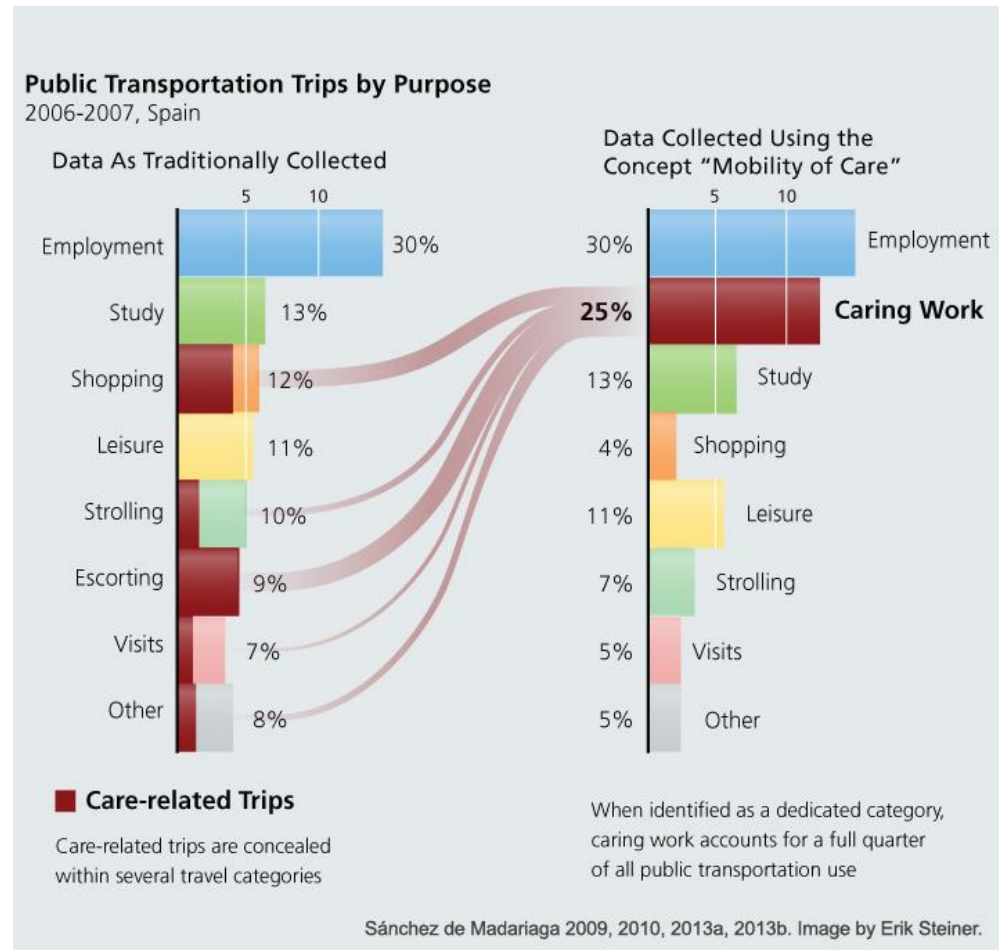
Trips made by adults for the care of others and the upkeep of the home.

Existing surveys do not allow to quantify it within the overall mobility because they have Gender bias and omissions.

Hypothesis:

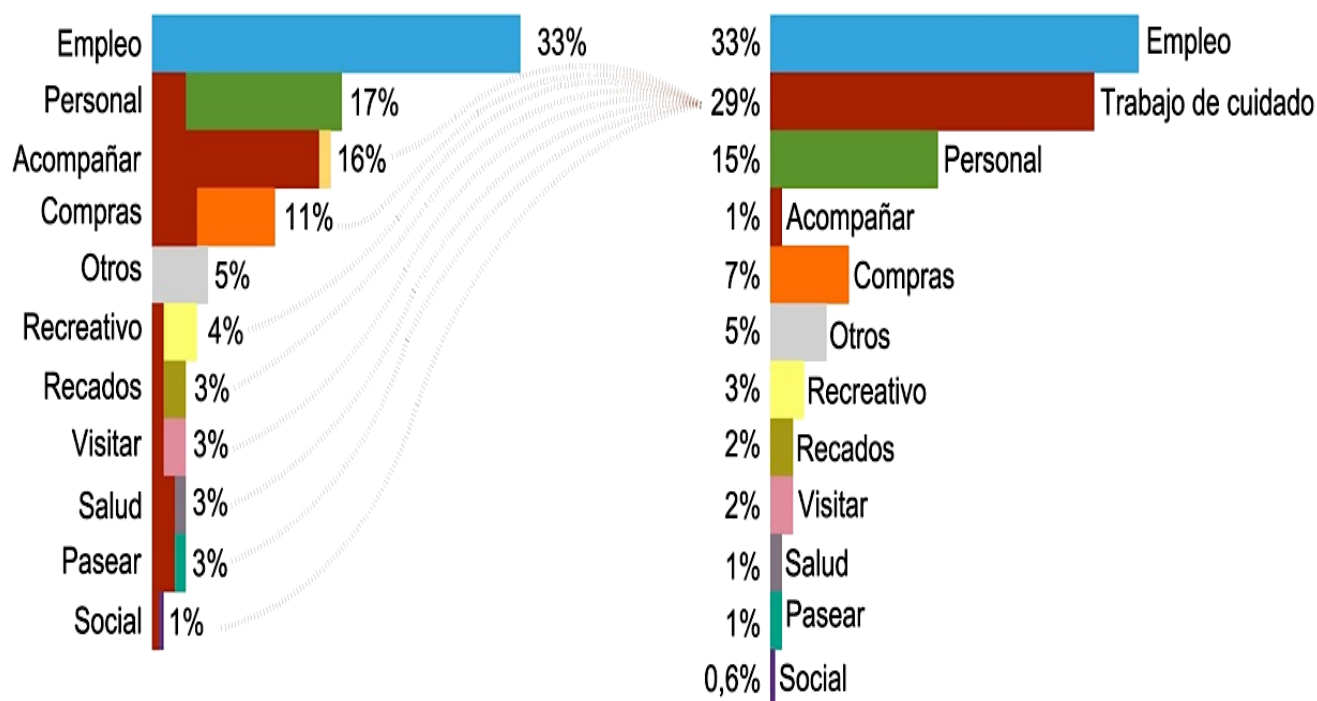
- In between 1/3 and 2/3 of trips normally counted as shopping, visits, strolling, other, should be considered as care trips.
- 100% of scorting trips should be considered as care trips.

Under these assumptions, the mobility of care is close to employment mobility.



Measuring the **Mobility of Care**

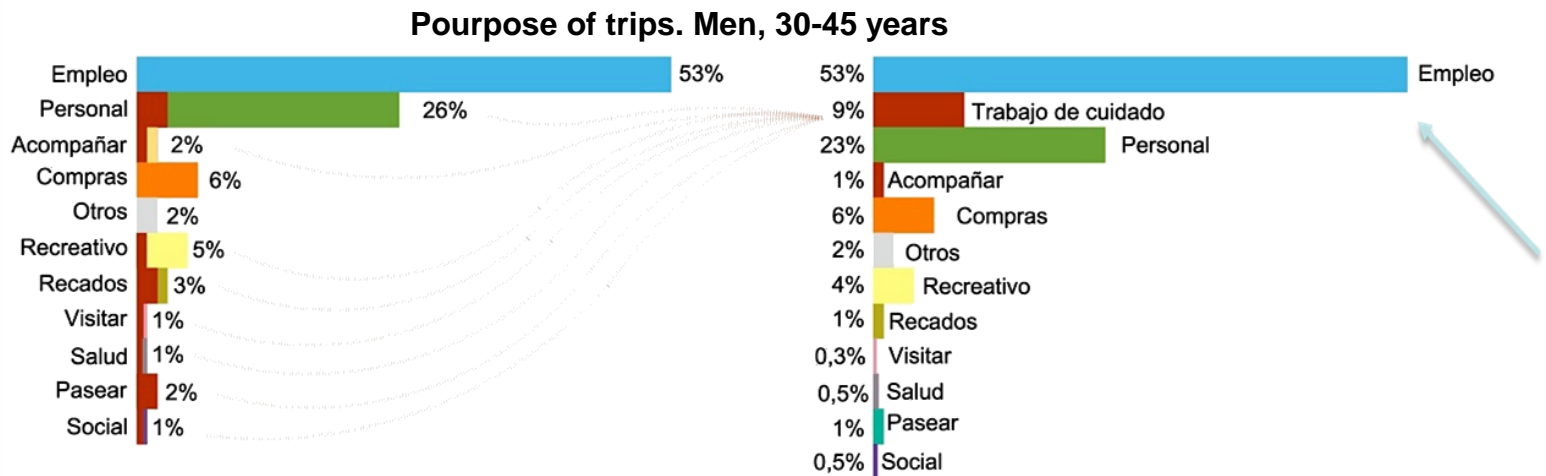
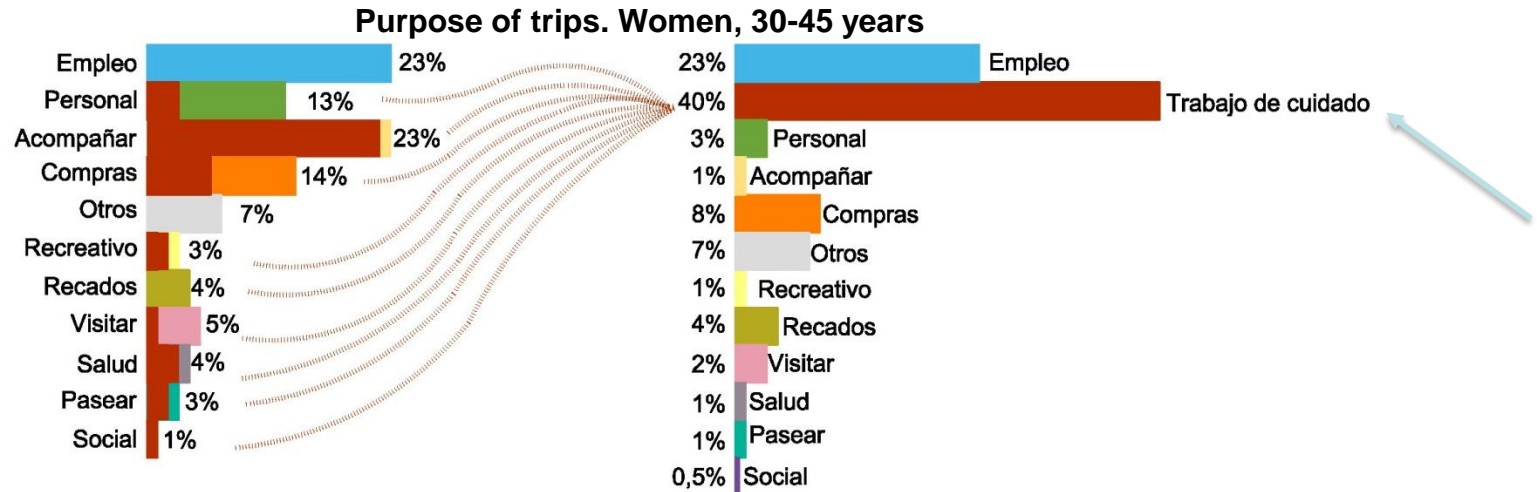
Purpose of trips, population 30-45 years, Madrid 2014.



Source: Sánchez de Madariaga and Zuchini, 2018

Measuring the mobility of care

Distribution by sex



Measuring the Mobility of Care: *Matatu system in Nairobi*

- Women do one additional trip
- Women users of the matatu system travel longer distances
- Spatial scope of women's travel is not covered by one bus line, requiring them to transfer
- The purpose of women's additional trip is related to care tasks
- Women's additional trip is done before or after going to work.
- The length of the trips done by women for care purposes not shorter than trips to the workplace.

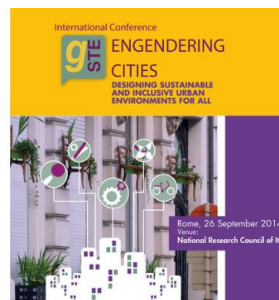


Measuring the Mobility of Care *Matatu* system in Nairobi: Safety issues

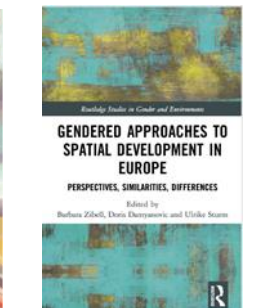
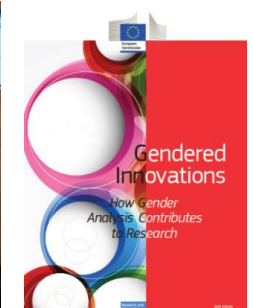
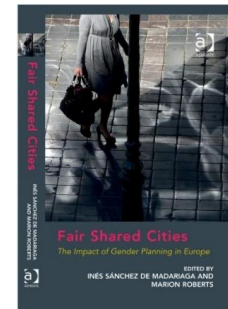
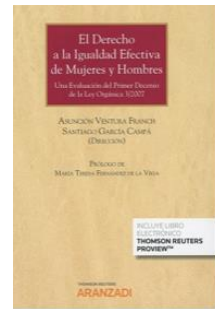
- A significant number of women do not travel because of safety concerns.
- Both men and women have safety concerns, but it is women who are concerned about sexual assault.
- Men are also concerned about safety albeit not of a sexual nature.
- Men's safety concerns need also be taken into account in transportation policies.
- Many women travel at night despite of safety concerns.
- People travel at night mostly because of employment.



SERIES OF INTERNATIONAL CONFERENCES *ENGENDERING*



PUBLICATIONS: architecture, planning and transportation





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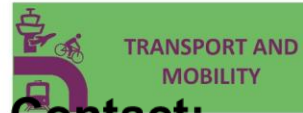
i.smadariaga@upm.es

Thank you

Contact:



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TRANSPORT AND
MOBILITY



SCIENCE &
TECHNOLOGY



ARCHITECTURE



SERVICE AND
POLICY DESIGN



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