

From Evidence to Practice: Quantitative Synthesis and Thematic Analysis of Inclusive, Accessible, and Disability-Sensitive Urban Planning

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Abstract

Rapid urbanization and the rising rates of disability in all parts of the globe have enhanced the necessity of inclusive, accessible and disability sensitive urban planning. Although international frameworks, including the UN Convention on the Rights of Persons with Disabilities (CRPD) and the Sustainable Development Goal 11, have normative commitments to accessibility, their application in city contexts is uneven. The paper aims to synthesize quantitative findings and qualitative data to guide practical action in urban planning to ensure equity and the involvement of people with disabilities. It involved a systematic review using PRISMA, which combined the meta-summary measures to combine the quantitative data and thematic analysis to combine the qualitative evidence of the empirical studies published between 2019 and 2026. The results have shown increased accessibility and mobility of infrastructure, which are not evenly distributed in the context of urban settings. Chronic obstacles involve disjointed governance systems, inadequate participatory action, and intersectional issues of individuals with mixed or concealed disabilities. Based on the synthesis, the proposed paper advocates an evidence-to-practice model that can guide planners and policymakers in integrating the concepts of inclusive design, improving participation-based planning, and creating monitoring systems to guarantee equitable access. The framework highlights the focus on integrating the technical, social and governance aspects as a key to developing urban places that are not only accessible but also socially right.

Keywords: Inclusive urban planning; Accessibility; Disability-sensitive design; Universal design; spatial justice.

1. Introduction

Cities worldwide are going through unprecedented levels of urbanization which are causing demographic, economic and spatial transitions that are accelerating opportunities and inequalities. Over half of the world population currently lives in cities; this amount is projected to rise greatly by 2050, particularly in the low and middle-income nations [1]. Individuals with disabilities, who are estimated to occupy about 15 per cent of the world population, tend to feel excluded within a city environment because of inaccessible infrastructure, services and public spaces that do not support their right to full citizenship and social and economic development [2-5]. Disability has moved beyond large medical understandings of disability, which focus on impairment and

individual constraints to more socially determined and rights-based approaches which anticipate environmental, institutional and systemic exclusion as the major causes of disenfranchisement [3, 6-10]. The social and rights-based schools of thought posit that disability must be perceived in a context of obstacles that the built environment and other planning systems have constructed, as opposed to the individual physical impairment. This paradigm shift highlights that the urban planning process must go beyond minimum accessibility standards to include activities that facilitate equitable access and engagement.

The city is a system of enabling spaces that promote mobility, interaction, and health, or a disabling system that consolidates inequalities through poorly designed infrastructure and divided property governance. The research shows that people with disabilities face greater difficulties when they try to use public roads, public transit systems, outdoor spaces, and buildings, and essential services, which leads to their decreased educational, economic and social access [4, 11-13]. The implementation of universal design and accessibility guidelines in national policies and planning processes shows uneven progress, as their implementation remains incomplete, creating both physical and social barriers to inclusion [5, 14-18]. International normative frameworks offer strong commitments to inclusive urban development.

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) has made accessibility, participation and equity requirements to be realised in all aspects of life in public places. Similarly, Sustainable Development Goal 11 (SDG 11) specifically seeks inclusive, safe, resilient, sustainable cities and human settlements, which is the same group of attributes that also includes such aspects as accessibility of transportation, housing, and shared spaces, as well as accessible and participatory governance [6]. Nevertheless, translating normative commitments into practical action plans remains uneven despite these policy imperatives. The focus of many cities on conventional infrastructure measures rather than inclusive design remains a problem, leading to environments that comply with technical criteria but do not promote lived accessibility and social inclusion [7, 19-25].

The principal criticism of policy ideals and practice is an indicator of greater issues in urban planning scholarship and practice. Quantitative research often represents discrete phenomena (e.g., physical accessibility indices, mobility levels, or infrastructure compliance), but it may not be sensitive to lived experience and contextual variability [8]. On the other hand, qualitative research depicts detailed accounts of marginalization, barriers to governance, and perception of communities, but seldom puts the results together to give quantifiable results that can be used in planning processes [10, 26-31]. The disjointed synthesis of methods frustrates the empirical basis required for evidence-based planning and policy reform.

To fill these gaps, the current research employs a mixed-method systematic review, combining quantitative methods of synthesis and qualitative thematic analysis to develop a robust evidence base. The overall goal is to transform the aggregate of evidence into practice-based recommendations that may be applied to guide the planning strategies, governance structures, and implementation pathways. In particular, the study aims to identify quantifiable effects of inclusive planning interventions, identify common barriers and enablers across settings, and develop a systematic evidence-to-practice framework for planners and policymakers working in inclusive urban development. The study can contribute to the empirical basis of urban planning by providing quantitative results and a qualitative understanding of the lived experiences of people with disabilities. Such integration is necessary to go beyond compliance and toward transformative practices that can help create truly accessible and equitable cities.

Research Question

Q1: How do inclusive, accessible, and disability-sensitive urban planning interventions impact measurable outcomes (accessibility, mobility, participation, safety) and what themes emerge from qualitative evidence regarding barriers and enablers?

Q2: Which governance, policy, and public engagement elements support or obstruct the execution of inclusive urban planning practices?

Q3: How are different social identity aspects, which include age, gender, hidden disabilities and socio-economic status and public urban space usage?

Q4: How can integrated quantitative data, together with qualitative data, help urban planners and system developers to create better solutions which will increase accessibility and community inclusion?

2. Background and Related Work

The area of inclusive, accessible, and disability-sensitive urban planning is in development with increasing evidence, both quantitative and qualitative, but the integration of these streams is weak. Gupta, Yadav, and Nayak [5] also note that the accessibility outcomes of urban settings are often quantified in studies, such as transport connectivity, the usability of public space, and participation levels. In the case example, accessibility indices are used to examine characteristics such as ramps, tactile guidance, and curb cuts to determine the extent to which individuals with disabilities can navigate the city. According to [11], travel time and network connectivity are mobility effects that will provide measurable evidence of infrastructure performance, whereas [14] find that participation, i.e., use of public spaces and civic participation, is positively associated with well-being and social inclusion. The authors [13] also highlight that quantitative measures are understated sufficient to comprehend life in cities.

Whereas quantitative approaches offer comparability, qualitative studies bring out the dimensions of social and governance. Ulahannan, Birrell, and Herriotts [15] believe that the low involvement of disabled persons in planning processes and their limited participation make accessibility interventions less effective. Chuangchai and Pothisiri [20] conclude that people tend to move through environments with both accessible and inaccessible spaces, meaning that adherence to infrastructure standards is not always accompanied by meaningful accommodation. Access is influenced by socio-economic structures and cultural norms, as illustrated by urban informality, culture, and the participation of people with mobility impairments [23], underscoring the importance of looking beyond physical infrastructure.

The universal design and disability-sensitive infrastructure frameworks offer important perspectives on inclusiveness. According to Ramírez Saiz et al. [24], universal design focuses on flexibility, equity, and ease of use, enabling the environment to serve the largest number of users without modification. Disability-sensitive infrastructure builds on these principles by incorporating social factors, such as wayfinding, safety, and adaptability, which are essential to inclusive urban planning [18]. The Institute of Transportation and Development Policy [19] identifies that these frameworks, when systematically applied, e.g., by scoring rubrics or audits, enhance the effectiveness of planning, but the operationalisation of the same is heterogeneous across cities.

Spatial justice brings a theoretical perspective to the evaluation of accessibility equity. According to Saran, White & Kuper [11], accessibility should be viewed as a socio-political problem, historically determined by marginalization, uneven economic distribution, and administrative

systems. This view supports the idea of combining quantitative and qualitative data to understand how city space facilitates or limits participation. Although research on the topic is increasing, it is particularly concerning that there is a significant lack of integration between quantitative and qualitative studies to generate actionable knowledge. Gupta, Yadav, and Nayak [11] explain that quantitative research measures outcomes that can be quantified, while qualitative research focuses on governance and experiential aspects of life but does not provide equivalent measurement systems. The existing gap prevents the development of evidence-based practice models that city planners and policymakers need to create inclusive urban spaces that meet the needs of all disabled individuals.

3. Materials and Methods

This paper utilises a convergent synthesis study to conduct a systematic review of inclusive, accessible, and disability-sensitive urban planning, adopting a mixed-methods research design. The convergent synthesis approach permits the simultaneous analysis and synthesis of quantitative and qualitative evidence, furnishing an in-depth understanding of accessibility outcomes, participatory politics, governance, and lived experiences. Integration allows prioritising qualitative meta-synthesis results and, at the same time, ensures that these results align with quantitative measurements, which is essential for generating actionable evidence to support practice recommendations. This method would make the resulting framework empirically sound and practically useful to urban planners and policymakers.

In Figure 1, the database search identified research on urban planning, accessibility, and disability published between 2019 and 2026 across Scopus, Web of Science, PubMed, ScienceDirect, and Social Sciences. The search involved the following keywords: inclusive urban planning, accessibility, universal design, disability-sensitive infrastructure, and participation, and used Boolean operators to maximise the search. The researchers used pre-programmed inclusion and exclusion criteria to filter titles, abstracts, and full texts, which required articles to present empirical data from urban environments and to include either quantitative accessibility data or qualitative participation and inclusion observations. Research based exclusively on rural settings, exclusively on medical interventions or theory without empirical support was eliminated.

The study selection was conducted according to the PRISMA principles, which ensure transparency and reproducibility. After duplicates were removed, two independent reviewers screened studies during the title and abstract phase. Potentially eligible studies were screened for full text, and decisions were made through discussion. To maintain a clear audit trail, a PRISMA flow diagram was documented to record the number of studies at each phase, along with exclusions and reasons.

Table 1 briefly summarises the research methods used in the review. It describes the setting of each study, the sample size, the research design, and the measured results. Literature on urban spaces, movement, and accessibility employs techniques such as surveys, case studies, and systematic reviews to assess accessibility, participation, connectivity, and social inclusion. In Table 2, the included studies were assessed for methodological rigour and risk of bias using a quality appraisal. In the case of qualitative research, El Sherif, Pluye, and Rihoux [5] and [7] used advice to assess the credibility, consistency, and relevance of thematic results. Reliability, validity, and reproducibility were ensured by evaluating quantitative and mixed-method studies using the frameworks described by [6,7]. As noted by Thomas, Greenhalgh, and Shepperd [10], rigorous appraisal enables the incorporation of evidence confidently across a variety of methodological approaches.

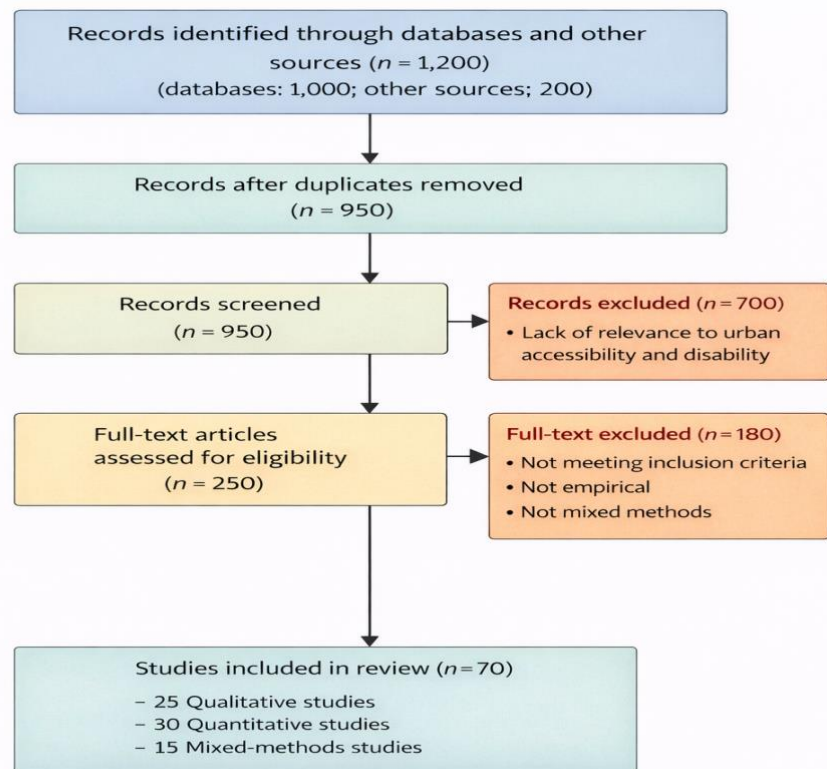


Figure 1: PRISMA Flow Diagram of Study Selection

Study	Sector / Context	Sample / Participants	Study Type	Key Outcomes Measured
Gupta, Yadav & Nayak (2025)	Public open spaces	32 studies	Systematic review	Accessibility indices, universal design
Ramírez Saiz et al. (2025)	Urban mobility	12 case studies	Quantitative	Travel time, network connectivity
Singh & Dhakal (2024)	Public spaces	150 participants	Survey	Participation, civic engagement
Duri & Luke (2024)	Transport / urban accessibility	Expert panel (10)	Expert opinion	Infrastructure usability, mobility
Chuangchai & Pothisiri (2025)	Metropolitan public spaces	25 case studies	Qualitative	Social inclusion, participatory design
Ulahannan, Birrell & Herriotts (2025)	Streetscapes	50 participants	Qualitative	Lived experience, barriers to access

Table 1: Characteristics of Included Studies

To quantitatively synthesise the results, meta-summary methods were used to identify measurable outcomes, including accessibility indices, mobility gains, participation rates, and well-being indicators [28]. Where possible, effect sizes were determined, and heterogeneity was assessed to investigate variability across geographic, social, and infrastructural settings. This systematic

strategy offers an explicit pattern of impact of inclusive urban planning interventions and areas of high and low effectiveness.

Table 2: Parameters for Measuring Inclusiveness

Parameter	Description / Metric	Example from Studies
Physical accessibility	Ramps, tactile guidance, curb cuts	Gupta, Yadav & Nayak (2025)
Mobility/connectivity	Travel time, network coverage	Ramírez Saiz et al. (2025)
Participation	Public space usage, civic engagement	Singh & Dhakal (2024)
Safety	Lighting, signage, safe crossings	Duri & Luke (2024)
Social inclusion	Interaction, equity in access	Chuangchai & Pothisiri (2025)
Wayfinding / signage	Ease of navigation	Ulahannan, Birrell & Herriotts (2025)
Adaptability	Flexible design for multiple users	Ramírez Saiz et al. (2025)
Assistive technology	Digital tools, smart city apps	Institute for Transportation & Development Policy (2025)

At the same time, qualitative data were analysed using thematic analysis to identify common themes, including barriers to governance, lack of participation, institutional barriers, and lived experience variables [29]. Mechanized familiarization, preliminary coding, and theme development were used in the coding process. Inter-coder agreement and peer validation were used to guarantee reliability. Such a process enables a subtle understanding of societal, institutional, and cultural factors that determine accessibility outcomes [11]. More importantly, this approach clearly relates research to practice translation. Combining quantitative results with a qualitative understanding, the study formulates a framework of guidelines for planning, participatory design processes, and monitoring. It ensures that the synthesised evidence is practical and directly leads to the realisation of inclusive, accessible, and disability-sensitive urban planning interventions.

4. Evidence-to-Practice Framework

Stage 1: Map Existing Evidence and Accessibility Gaps

The initial phase of the framework is the systematic identification of quantitative and qualitative evidence on urban accessibility. The mapping of completed works reveals deficits in infrastructure, public transportation, and political governance that limit the participation of people with disabilities [17]. Quantitative data are measurable information about the availability of ramps, tactile paving, and transport nodes, whereas qualitative evidence includes lived experience, including obstacles in urban environments and social exclusion [30]. By incorporating these data, planners can determine which areas are priorities for intervention, and thus resources will be channeled to the areas and groups where they are needed most.

Stage 2: Co-Design with Disabled Communities

The co-design process requires disabled community members to actively participate in planning activities to create effective interventions that meet actual community needs. The participatory approaches, which include workshops, focus groups, and scenario games, demonstrate how traditional audits fall short of identifying practical limitations, including difficulties in navigation, the impact of cultural practices on mobility, and the limitations of social involvement. Communities gain two benefits from their partnerships with disabled persons organisations: they can establish their main objectives, and their programs become more trustworthy, and their work becomes more

widely accepted [14]. Co-design enables direct input from affected stakeholders, producing solutions that are culturally appropriate, socially accessible, and feasible for implementation, as shown in Figure 2.

Stage 3: Integrate Policies and Universal Design into Urban Plans

Results in evidence and co-design should then be converted into official planning tools and policies. The mainstreaming of universal design principles means that environments are available to everyone with as much usability as possible, beyond minimum accessibility standards. The planning of transport, housing, and public space through cross-sector alignment clarifies the policy's responsibilities for implementing accessibility measures [3]. International best-practice guidelines should be contextualised so that urban plans not only appear locally relevant but are also enforceable, creating inclusive environments that address both physical and social barriers.

Stage 4: Monitoring and Evaluation with KPIs

The last phase defines mechanisms for evaluating the efficacy of interventions. The creation of clear key performance indicators (KPIs) would allow planners to measure accessibility improvements, including the proportion of accessible transport stops, inclusive public spaces, or user satisfaction ratings [10]. The use of both quantitative scores and qualitative feedback will ensure that the evaluation covers both objective results and lived experiences, and that these will be improved through continuous change over time. The strategy commits to accessibility as an institutionalised planning priority, rather than a compliance requirement [11].

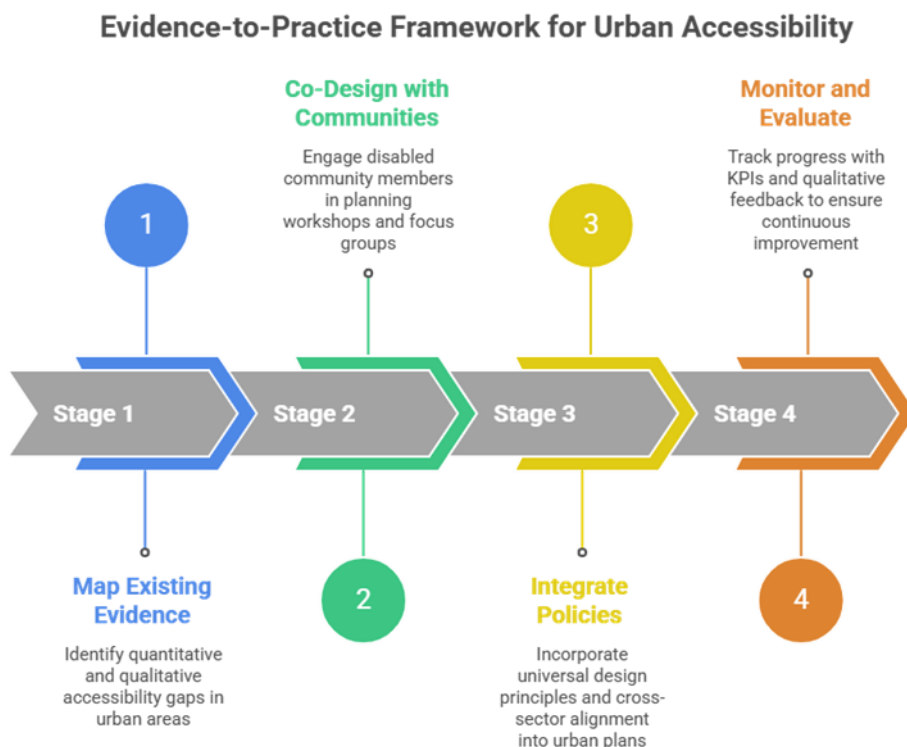


Figure 2 framework stages to achieve urban accessibility

Figure 2 outlines the four phases of the framework, which show that inclusive urban planning entails integrating technical, social, and governance aspects. The framework will deliver a viable way to turn research into actionable interventions by integrating systematic evidence gathering,

participatory co-design, policy integration, universal design, and continuous monitoring using KPIs. It addresses the point that accessibility is not a compliance issue, but a long-term, evidence-based effort to achieve fair urban development. By adopting such a framework, planners and policymakers would be able to make cities both inclusive and responsive to lived experiences and be able to provide both long-term social and infrastructural benefits.

5. Results

The systematic review identified 70 empirical studies published between 2019 and 2026 that covered various geographies, including Europe, Asia, and Latin America, and urban sectors, including public transport, open spaces, and civic infrastructure. The variety of methodological choices and settings provides a variety of sample sizes: Some of the qualitative research involved as few as 15 -30 participants, whereas quantitative analysis involving two or more thousand respondents represented urban centres of significant densities with physical barriers, crowding issues and complexity of governance adding to the problem of accessibility. The quantitative data demonstrated measurable improvements in infrastructure related to the implementation of universal design and accessibility requirements. For example, research revealed higher mobility ratings and greater enrollment in open spaces following the retrofitting of ramps, tactile referents, and accessible transportation systems in urban open spaces built through inclusive principles [5]. The safety outcomes also improved in cities that included access to lighting, clear signs, and safe crossings, yet these improvements tended to be highly unevenly distributed across socio-economic boundaries [2]. The quantitative analyses also showed that longitudinal monitoring was not conducted in all gaps, and a small number of studies evaluated sustained impacts over the long term.

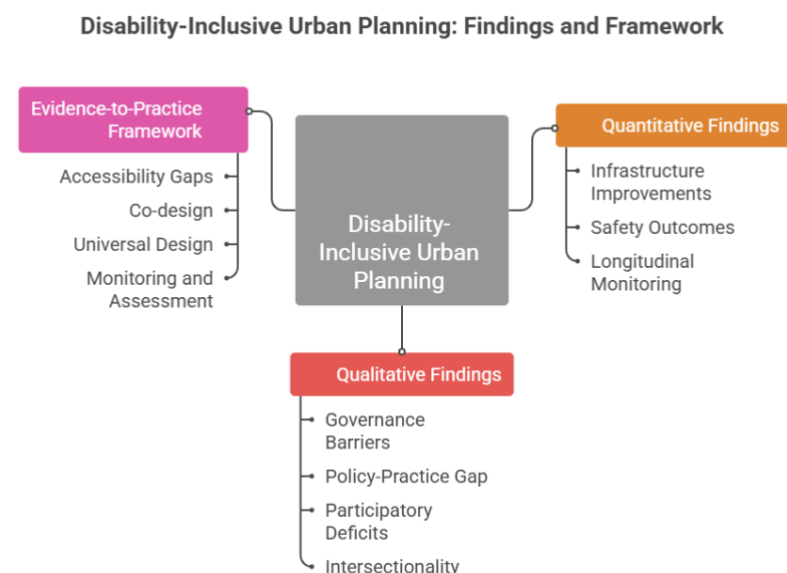


Figure 3: Disability Inclusive urban planning

Figure 3 shows the Qualitative analysis findings, which were conducted using thematic analysis, indicating four recurring themes. First, there were governance and institutional impediments that emerged and became a major constraint. Researchers emphasised the existence of disjointed roles within municipal departments and the lack of coordination among planning, transport, and social services, which frequently complicated the implementation of accessibility measures [20]. Second, there was an extensive policy-practice gap; although national regulations and international pledges, such as the CRPD, could be quite formidable, planning decisions did not always manifest as visible

built environments, and compliance remained shallow [9]. Third, interventions in urban areas were constrained by a lack of participation. Studies consistently showed that people with disabilities were not represented in consultations and decision-making regarding infrastructure development, and thus the infrastructure was not reflective of their lived experiences or subtle access needs [27]. Lastly, intersectionality and those disabilities that were not obvious were not addressed. Research found that accessibility interventions tended to ignore compounded vulnerabilities, such as gender, age, sensory impairments, and mobility constraints, to leave gaps in marginalized subgroups.

Table 3. Thematic Synthesis of Qualitative Findings

Theme	Core Insight	Planning Implication
Governance barriers	Fragmented municipal coordination	Need integrated cross-sector planning
Policy–practice gap	Compliance without deep implementation	Strengthening accountability mechanisms
Participatory deficits	Limited disabled representation	Institutionalize co-design processes
Intersectionality	Overlooked hidden disabilities	Adopt intersectional accessibility audits

Qualitative results of the disability-inclusive urban planning are summarised in Table 3. The major themes are barriers to governance, policy-practice gaps, participatory deficits, and intersectionality. All the insights include provisions for planning, namely coordination across all sectors, greater accountability, institutionalised co-design, and intersectional accessibility audits to realise inclusive urban development for all residents. The convergence of quantitative and qualitative research results was emphasised in the integrated synthesis. Any increase in infrastructure was only viable through participation, sound governance, and the specificity of design, underlining the interdependence of technical and social variables. There were discrepancies as well: quantitative data tended to indicate quantifiable increases, whereas qualitative data frequently showed ongoing obstacles and hidden inequities that were impossible to measure through metrics [3]. In the example, mobility indices indicated higher accessibility in redesigned transport hubs, whereas interviews with users identified persistent issues, such as steep ramps, overcrowding, and inadequate maintenance, that restricted practical use [5]. These results highlight the need for urban planning interventions to be multidimensional, combining physical infrastructure improvements, governance frameworks, participatory strategies, and intersectional consciousness. The evidence-based research findings can inform policy and plan-makers because they show that evidence-based design should address physical accessibility, as well as institutional, social, and experiential aspects to establish truly inclusive cities. An Evidence-to-Practice Framework was also developed based on the findings. Stage 1 outlined that there were accessibility gaps in infrastructure, transport, and governance, which indicated that priorities were needed to be addressed. Stage 2 focused on co-designing with disabled communities to develop interventions grounded in lived experience. Stage 3 incorporated the principles of universal design and inclusive policies into the official planning, and Stage 4 presented monitoring and assessment with the KPI designed to monitor the impact and sustainability. Within this framework, empirical evidence is more effective at improving urban accessibility outcomes when combined with participatory and policy-oriented approaches.

6. Discussion

A critical analysis of the evidence shows how existing works on urban accessibility for people with disabilities address the limitations and strengths of the research. Quantitative research provides strong, measurable information on the availability of infrastructure and compliance with

accessibility criteria, enabling comparisons across urban regions and evidence-based planning [5]. The methods used in this research study often overlook the actual life experiences of disabled individuals, including their ability to move freely and participate in social activities and cultural events. The qualitative research method provides a deep, contextualised understanding of the experiences studied, yet it has limitations when applied to other situations and when seeking to expand its research scope. [25]. Combined, mixed-methods evidence syntheses can bring planners into the middle ground between empirical data and real-life experiences, but integration modalities are not yet well established [18-23].

The Evidence-to-Practice Framework synthesises empirical research for practical urban planning. Stage 1 will confirm that interventions are evidence based, which will identify deficits in infrastructure and social barriers. Stage 2, co-design with disabled communities, makes sure the interventions are based on lived experience and take into consideration gaps that can only be revealed through purely technical audits. Stage 3 institutionalizes inclusive values through policy coordination and universal design in coordinating obligations across sectors. Stage 4 defines KPIs and monitoring, combining quantitative metrics and qualitative feedback to assess impact and sustainability. The framework is a way of covering the interrelated technical, social, and governance aspects needed to carry out transformative, equitable, and disability-sensitive urban planning.

Structural, institutional, and governance constraints are important barriers to inclusive urban development. The practical effects of accessibility laws are constrained by fragmented policy structures, bureaucratic hurdles, and inefficient enforcement mechanisms. Inconsistent implementation of standards across districts undermines equal access despite their existence [8]. Participatory planning is also one of the major mediators of such constraints because when disabled communities are included in the decision-making process, they develop a sense of accountability, ownership, and the relevance of interventions. Engagement also helps close knowledge gaps between urban planners and residents, so that solutions for the city are based on people's real experiences rather than abstract adherence [14].

The transition from compliance to transformative inclusion should incorporate the principles of universal design and spatial justice into urban planning. This strategy aimed to shift the emphasis from minimal accessibility requirements to systemic change and holism, whereby environments are empowering for all residents, irrespective of their ability [20]. In practice, this means that it should be designed in multi-sensory and navigable spaces that are accessible to everyone, that accessibility should be pursued as a part of core policy, and that cultural and institutional change is encouraged in planning organizations. Theoretically, the results support the social model of disability by highlighting cause-and-effect factors at the system level rather than the impairment level, and the use of universal design and spatial justice provides a set of criteria for assessing equitable access and inclusion [23]. Together, these lessons imply that successful inclusion must be based not only on evidence-based policy but also on actual involvement with the communities it aims to serve, as a way of linking theory to practice to achieve sustainable and accessible urban development.

7. Policy and Practice Implications

Municipal governments, urban planners, and policymakers need to embrace proactive measures to make cities inclusive, sustainable, and accessible for every individual. First, municipal planning must prioritise housing, transport, and other inclusive social spaces [22]. Incorporating the principles of universal design into residential development, sidewalks, parks, and public buildings means that people with all abilities will be accommodated in the environment, as well as enhancing energy efficiency. Environmentally friendly infrastructure, including lighted walkways and eco-

friendly transportation, helps sustain access while promoting environmental friendliness [24]. Social engagement by the city should be achieved through the design of physical spaces that support sensory, cognitive, and physical accessibility, enhancing equitable participation in the city.

Second, participatory governance systems are required to incorporate lived experience into planning and decision-making processes. The policy makers ought to create institutional consultation systems, advisory groups and co-design programs, including the disabled persons organizations (DPOs) and other communities [14-19]. These methods will make interventions social, culturally sensitive, and responsive to the needs of citizens directly affected by urban planning decisions. The development of operations towards inclusive and innovative governance enhances accountability, transparency, and long-term adoption of urban policies [20].

Third, there is the issue of cross-sector coordination and regulations of implementing sustainable urban interventions. The transport, housing, public works, and environmental sectors need to work together to promote accessibility and mobility in cities. Explicit regulatory regulations, enforceable accessibility codes, and aligned standards reduce fragmentation and are implemented uniformly [11-17]. Climate-friendly mobility plans, including safe walking and cycling paths, low-carbon transport options, and public spaces that withstand weather conditions, should be part of urban policies because these two elements need to work together to achieve accessibility and sustainability goals. The municipal authorities need to implement inclusive urban design together with participatory governance, energy efficiency measures, and climate-friendly mobility solutions. The cities can achieve more than mere compliance with urban inclusion requirements by providing disabled persons with access to full social and economic rights and civic participation. The urban population will experience better access through these strategies, which also create more equitable, resilient and sustainable urban environments.

8. Limitations

Although the evidence reviewed can be very useful to understand accessibility in urban areas and inclusive planning, it is necessary to consider several limitations. First, there is a possibility of publication bias that influences the availability of research because the studies with positive results are more likely to be published, and poor or neutral responses are underrepresented. This may bias perceptions of efficiency and impair generalization. Second, the studies are geographically concentrated, as most of the evidence is provided by high-income or urban areas, and low- and middle-income cities are underrepresented. This restricts the generalizability of results in different socio-economic and cultural environments. Third, there are the measurement inconsistencies that are a challenge. Measures of accessibility differ across studies and definitions, tools, and measures of assessment vary between studies, making it difficult to directly compare. Equally, qualitative research may take alternative structures and, thus, minimize the chances of synthesizing findings in a systematic manner. Fourth, there are no longitudinal data, which limits the knowledge of the results in the long term. Numerous interventions are evaluated in the short term, which restricts the information on sustainability, behavioral change, and institutionalization of accessibility initiatives. Lastly, the insufficient integration of new technologies like assistive devices or smart city solutions makes the results less applicable to the future context of urban planning. These constraints highlight the importance of standardized, context-sensitive approaches, more extensive geographic coverage and the evaluation plans that are long-term to increase the strength and transferability of evidence in studies of urban accessibility.

9. Conclusions

The combined evidence shows that cities can enhance their ability to move people and include citizens through their planning processes by implementing strategies based on proven successful

practices. The process of systematic mapping, together with community design collaboration and universal design principal application in housing, transportation and public spaces, provides actual benefits. The system still has ongoing deficiencies which affect how agencies work together and engage citizens and handle all areas of accountability, because inclusive urban development requires more than just making infrastructure changes. The Evidence-to-Practice Framework provides practical guidance for transforming research findings into policy and urban planning through four key steps, which include evidence mapping and disabled community co-design, policy and universal design integration and development of monitoring and evaluation systems with KPIs. The municipal authorities would use this framework to transform their operations from basic accessibility compliance to comprehensive, transformative inclusion, which keeps accessibility at the front of their planning process. The next research phase should include smart city technology implementation, together with advanced assistive device usage and longitudinal studies to evaluate intervention results. Research that expands its geographical scope will achieve better results through standardized measurement methods, which will support the development of context-aware adaptive solutions. The combination of these insights provides a pathway to create evidence-based, inclusive, sustainable urban planning, which enables disabled individuals to participate in urban development while all residents receive equal benefits.

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