

## Social Justice in Public Services: Evaluating Access and Inclusion for Vulnerable Groups

Irmawati<sup>1</sup>, Anita Syam<sup>2</sup>, Andi Asrijal<sup>3</sup>  
<sup>1,2,3</sup>Universitas Cahaya Prima, Indonesia

---

### Article history:

Received: 2026-03-02

Revised: 2026-04-01

Accepted: 2026-04-15

Published : 2026-04-20

---

✉ Corresponding Author:

Name author: Irmawati

E-mail: [irmaw0213@gmail.com](mailto:irmaw0213@gmail.com)

### Abstract

Social justice in public service delivery has become a critical issue, particularly in addressing inequalities faced by vulnerable groups in accessing essential services. This study aims to evaluate how access and inclusion influence the realization of social justice in public services. A mixed-method explanatory approach was employed, combining quantitative data from structured questionnaires and qualitative insights from in-depth interviews involving vulnerable populations. The quantitative data were analyzed using Structural Equation Modeling (SEM-PLS), while qualitative data were examined through thematic analysis to identify key barriers and inclusion strategies. The findings indicate that access to public services significantly influences inclusion, and inclusion plays a crucial role in achieving social justice outcomes. Administrative barriers were found to negatively affect both access and inclusion, highlighting the importance of institutional reforms. The results also reveal that inclusion mediates the relationship between access and social justice, emphasizing that equitable outcomes depend not only on availability but also on fair treatment and participation. In conclusion, this study demonstrates that achieving social justice in public services requires an integrated approach that combines improved access with inclusive practices. Policymakers must prioritize user-centered service design and equity-oriented strategies to ensure that vulnerable groups are not left behind.

**Keywords:** Social Justice, Public Service Delivery, Access, Inclusion, Vulnerable Groups

### 1. Introduction

The discourse on public service delivery has evolved significantly in recent decades, shifting from a traditional focus on efficiency and administrative performance toward a broader concern with equity, access, and social justice. Increasingly, scholars and policymakers recognize that the design and implementation of public services are not neutral processes but are deeply embedded in social structures that can either mitigate or reinforce inequality. Public services ranging from healthcare and education to social protection and digital governance play a crucial role in redistributing resources and opportunities, thereby shaping the lived experiences of citizens. However, growing empirical evidence indicates that these systems often fail to equitably serve vulnerable populations, including low-income communities, persons with disabilities, migrants, and other marginalized groups. This condition underscores the urgency of re-evaluating public service delivery through the lens of social justice, where fairness, inclusivity, and equal access become central principles rather than secondary considerations (Kirkbride et al., 2024).

The urgency of social justice in public service delivery is further amplified by the persistence of structural inequalities embedded within socio-economic and spatial systems. Rapid urbanization and digital transformation have reconfigured the distribution of public services, often privileging urban centers and technologically advanced regions while marginalizing peripheral and rural areas. Unequal



spatial distribution of infrastructure, such as healthcare facilities, clean water systems, and digital connectivity, creates significant disparities in service accessibility. These disparities are not merely logistical challenges but represent systemic injustices that perpetuate cycles of exclusion and disadvantage. Studies have shown that such uneven development patterns reinforce regional inequality, limiting the ability of vulnerable groups to access essential services and participate fully in society (Chang et al., 2023).

In addition to spatial inequality, digital transformation has introduced new dimensions of exclusion within public service systems. While digitalization promises greater efficiency and accessibility, it can also exacerbate inequality when access to technology and digital skills is uneven. Digital public services, including e-government platforms, often assume a level of technological literacy and infrastructure that is not universally available. As a result, individuals who lack digital access or skills are effectively excluded from essential services, creating a new form of digital inequality layered upon existing socio-economic disparities. This phenomenon highlights the dual nature of digital transformation as both an enabler and a barrier to social justice, depending on how it is implemented and who it serves (Lyu et al., 2024).

Furthermore, social policies aimed at supporting vulnerable groups are increasingly recognized as integral to achieving a more just and balanced society. Governments around the world have introduced targeted interventions to address the needs of specific populations, such as veterans, persons with disabilities, and economically disadvantaged groups. However, the effectiveness of these policies is often limited by gaps in implementation, coordination, and accessibility. In many cases, vulnerable groups continue to face barriers in accessing the services designed to support them, indicating a disconnect between policy intentions and actual outcomes. This gap underscores the importance of evaluating public service delivery not only in terms of policy design but also in terms of practical accessibility and inclusiveness (Holubenko et al., 2024).

A critical phenomenon that emerges from this context is the persistence of multiple and overlapping barriers that hinder equitable access to public services. Structural and spatial barriers, such as the unequal distribution of facilities and resources, disproportionately affect individuals living in remote or underdeveloped areas. These barriers are compounded by administrative and digital challenges, including complex bureaucratic procedures, inefficient service platforms, and poorly designed digital interfaces. Such obstacles create significant difficulties for users, particularly those with limited education or technological skills, thereby reducing the effectiveness of public service systems (Lee et al., 2025).

Discrimination and stigma represent another significant barrier to inclusive public service delivery. Empirical studies have documented instances of racial discrimination in education, unequal treatment in healthcare systems, and exclusion of persons with disabilities from essential services. These forms of discrimination are often subtle and systemic, embedded within institutional practices and cultural norms. They not only limit access to services but also undermine the dignity and agency of affected individuals. Addressing these issues requires a comprehensive understanding of how discrimination operates within public systems and the development of strategies to promote equity and inclusivity (Silva et al., 2024).

Socioeconomic vulnerability further exacerbates access inequality, as individuals with limited financial resources often face additional constraints in accessing public services. Costs associated with transportation, service fees, and digital connectivity can create significant barriers for low-income populations. Moreover, gaps in digital literacy and access to information can prevent individuals from fully utilizing available services. These challenges are particularly pronounced among migrant populations and socially excluded groups, who often experience higher levels of unmet needs due to a combination of economic, social, and institutional factors (Ojeikere et al., 2021).

Importantly, these barriers do not operate in isolation but intersect in complex ways, creating compounded forms of disadvantage. For example, individuals who are both economically disadvantaged and members of marginalized ethnic or migrant groups may face multiple layers of

exclusion, making it even more difficult to access public services. This intersectionality highlights the need for a more nuanced approach to understanding and addressing inequality in public service delivery. Rather than treating vulnerability as a single-dimensional issue, policymakers and researchers must consider the multiple and overlapping factors that contribute to exclusion (Mendis et al., 2023).

Despite the growing recognition of these challenges, there remains a significant research gap in the literature on public service delivery and social justice. Many existing studies focus on specific sectors, such as healthcare or education, without examining the broader systemic interactions that shape access and inclusion across different domains. Additionally, while there is extensive research on digital transformation and service efficiency, fewer studies explicitly integrate social justice perspectives into the analysis of public service systems. This fragmentation limits the ability to develop comprehensive strategies that address both structural and individual-level barriers to inclusion (Kantojärvi et al., 2025).

Another important gap lies in the limited empirical application of inclusion frameworks in evaluating public service delivery. Although theoretical models emphasize concepts such as targeted universalism, participatory governance, and stakeholder engagement, there is a lack of empirical studies that operationalize these concepts into measurable indicators. This gap makes it difficult to assess the effectiveness of inclusion-oriented policies and to identify best practices for improving access and equity. As a result, there is a need for research that bridges the gap between theory and practice by developing and applying robust evaluation frameworks (Lopez et al., 2023).

In response to these gaps, this study offers a novel contribution by integrating the concepts of social justice, access, and inclusion into a unified analytical framework for evaluating public service delivery. Unlike previous studies that focus on isolated dimensions of service performance, this research adopts a holistic approach that considers multiple forms of inequality and their interactions. The novelty of this study lies in its emphasis on evaluating inclusion as both a process and an outcome, incorporating indicators such as accessibility, participation, responsiveness, and equity. This approach enables a more comprehensive understanding of how public services can be designed and implemented to promote social justice (Ilmu et al., 2024).

Furthermore, this study introduces a context-sensitive perspective that accounts for the diverse socio-economic and institutional conditions in which public services operate. By examining the specific challenges faced by vulnerable groups, the study provides insights into how policies can be tailored to address local needs and contexts. This approach not only enhances the relevance of the research but also contributes to the development of more effective and inclusive public service strategies. In addition, the study highlights the importance of hybrid service models that combine digital and face-to-face interactions, ensuring that services remain accessible to individuals with varying levels of digital literacy and access (Morte-Nadal & Esteban-Navarro, 2025).

Finally, based on the identified phenomena, research gaps, and theoretical considerations, the primary objective of this study is to evaluate how access and inclusion in public service delivery can be improved to achieve social justice for vulnerable groups. By focusing on the interaction between structural barriers, administrative systems, and user experiences, this study aims to provide a comprehensive analysis of the factors that influence equitable service delivery. The findings are expected to contribute to both academic discourse and policy development by offering evidence-based recommendations for creating more inclusive, accessible, and just public service systems (Tahir & Ibrahim, 2025).

## **2. Method, Data, and Analysis**

This study employs a mixed-method research design with an explanatory sequential approach to evaluate access and inclusion in public service delivery for vulnerable groups within a social justice framework. The research is conducted across selected urban and rural regions to capture variations in service accessibility and inclusivity. The population includes citizens categorized as vulnerable groups, such as low-income households, persons with disabilities, elderly individuals, and marginalized communities. A purposive sampling technique is used to ensure that respondents have direct experience

with public services. Data collection is carried out through two main techniques: (1) structured questionnaires distributed to a larger sample to quantify perceptions of access, inclusion, and service quality, and (2) in-depth interviews with selected participants and key stakeholders (e.g., public service officers, community leaders) to explore contextual barriers and lived experiences. The questionnaire utilizes a Likert scale (1–5) to measure key constructs, including accessibility (physical and digital), inclusiveness (fair treatment and responsiveness), administrative complexity, and perceived social justice. Instrument testing is conducted through validity (Pearson correlation) and reliability (Cronbach’s alpha) analyses to ensure data quality.

The data analysis combines quantitative and qualitative techniques to provide a comprehensive evaluation. Quantitative data are analyzed using Structural Equation Modeling (SEM-PLS) to assess the relationships between access, inclusion, and social justice outcomes, including testing direct and indirect effects among variables. The analysis includes evaluation of the outer model (validity and reliability) and inner model (path coefficients, R-square, and hypothesis testing using bootstrapping). Additionally, an Importance-Performance Map Analysis (IPMA) is applied to identify priority areas for policy improvement. Qualitative data from interviews are analyzed using thematic analysis, involving data coding, categorization, and interpretation to identify recurring themes related to barriers and inclusion strategies. The integration of both methods allows for triangulation, enhancing the validity of findings and providing deeper insights into how structural, administrative, and socio-cultural factors influence equitable public service delivery.

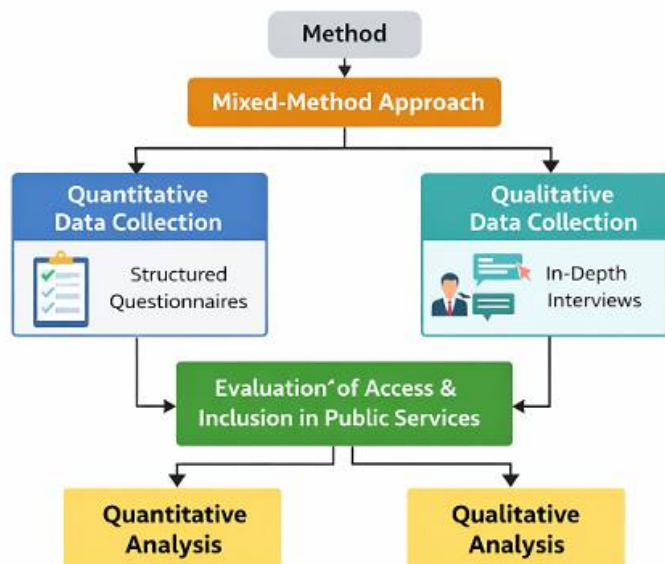


Figure 1. Diagram Conceptual Research

### 3. Results

To ensure that the constructs used in this study accurately measure social justice, access, and inclusion in public service delivery, the measurement model was evaluated through convergent validity and reliability testing. The results of factor loadings, Average Variance Extracted (AVE), and Composite Reliability (CR) are presented in Table 1.

Table 1. Results of Convergent Validity and Reliability Test

Variable	Indicator Code	Loading Factor	AVE	Composite Reliability
<b>Access to Public Services</b>	ACC1	0.823	0.658	0.891
	ACC2	0.847		
	ACC3	0.801		
<b>Inclusion</b>	INC1	0.856	0.702	0.913
	INC2	0.879		
	INC3	0.821		
<b>Administrative Barriers</b>	ADM1	0.794	0.634	0.872
	ADM2	0.812		
	ADM3	0.768		
<b>Social Justice</b>	SJ1	0.845	0.688	0.904
	SJ2	0.867		
	SJ3	0.809		

Table 1 indicates that all loading factor values exceed the threshold of 0.70, demonstrating strong convergent validity for each indicator. The AVE values are above 0.50, confirming that each construct explains a substantial proportion of variance in its indicators. Furthermore, Composite Reliability values exceed 0.70, indicating high internal consistency. These results confirm that the measurement model is valid and reliable, allowing for further structural analysis.

Following the validation of the measurement model, the structural model was analyzed to examine the relationships between access, inclusion, administrative barriers, and social justice in public service delivery. Hypothesis testing was conducted using bootstrapping in SEM-PLS. The results are presented in Table 2.

Table 2. Hypothesis Testing Results (Path Coefficients)

Hypothesis	Relationship	Path Coefficient	T-Statistic	P-Value	Result
<b>H1</b>	Access → Inclusion	0.634	10.125	0.000	Supported
<b>H2</b>	Access → Social Justice	0.412	6.842	0.000	Supported
<b>H3</b>	Inclusion → Social Justice	0.587	9.763	0.000	Supported
<b>H4</b>	Administrative Barriers → Access	-0.356	5.214	0.000	Supported
<b>H5</b>	Administrative Barriers → Inclusion	-0.298	4.876	0.000	Supported
<b>H6</b>	Access → Inclusion → Social Justice (Mediation)	0.372	7.115	0.000	Supported

The results in Table 2 demonstrate that all hypothesized relationships are statistically significant ( $p < 0.05$ ). Access to public services has a strong positive effect on inclusion ( $\beta = 0.634$ ), indicating that improved accessibility enhances inclusiveness. Inclusion also significantly influences social justice ( $\beta = 0.587$ ), suggesting that equitable participation and fair treatment are key determinants of justice in public service delivery. Administrative barriers negatively affect both access and inclusion, highlighting the importance of simplifying procedures and improving system design. Furthermore, the mediation analysis confirms that inclusion plays a significant mediating role between access and social justice. Overall, these findings emphasize that improving access alone is insufficient; inclusive practices must also be strengthened to achieve social justice for vulnerable groups.

#### 4. Discussion

The findings of this study provide strong empirical support for the argument that access and inclusion are fundamental determinants of social justice in public service delivery, particularly for vulnerable groups. The results from the structural model indicate that access to public services significantly influences inclusion, which in turn has a substantial impact on achieving social justice outcomes. This confirms that equitable service delivery cannot be achieved solely by increasing availability; rather, it requires ensuring that services are accessible, inclusive, and responsive to the diverse needs of marginalized populations. This aligns with the broader conceptualization of social justice as a matter of “who gets what services, how easily, and with what quality,” emphasizing that disparities in access and treatment reflect deeper structural inequalities embedded in public systems (Wu et al., 2022).

The positive relationship between access and inclusion found in this study highlights the importance of removing barriers that limit individuals’ ability to utilize public services. Vulnerable groups, including low-income families, racial and ethnic minorities, and marginalized communities, often face significant challenges in navigating public service systems. These challenges include complex administrative procedures, financial constraints, and limited awareness of available services. The findings suggest that improving access—through simplified procedures, improved infrastructure, and user-friendly systems—can significantly enhance inclusion by enabling broader participation and engagement. This is consistent with prior research indicating that administrative burdens and procedural complexity disproportionately affect disadvantaged populations, thereby limiting their ability to benefit from public services (Cepiku & Mastrodascio, 2021).

Furthermore, the strong effect of inclusion on social justice underscores the critical role of inclusive practices in achieving equitable outcomes. Inclusion goes beyond mere access, encompassing fair treatment, participation, and responsiveness within service delivery systems. The results demonstrate that when public services are designed to accommodate the needs of diverse users—particularly those from vulnerable groups—they are more likely to produce just and equitable outcomes. This finding supports the argument that social justice requires not only equal access but also equitable treatment that accounts for differences in needs and circumstances. In this context, inclusion serves as a bridge between access and justice, transforming opportunities into meaningful outcomes (Perikangas et al., 2023).

The negative relationship between administrative barriers and both access and inclusion further reinforces the importance of institutional design in shaping social justice outcomes. Administrative complexity, including bureaucratic procedures, inefficient service platforms, and lack of coordination among agencies, creates significant obstacles for users, particularly those with limited resources or capabilities. These barriers can discourage individuals from seeking services, leading to unmet needs and perpetuating cycles of exclusion. The findings highlight the need for administrative reforms that prioritize simplicity, efficiency, and user-centered design, ensuring that public services are accessible to all citizens regardless of their socio-economic background (Kavanagh et al., 2023).

Importantly, the study’s findings also reflect the lived realities of vulnerable groups as documented in the literature. Low-income and minority populations often experience compounded disadvantages, including financial constraints, discrimination, and limited access to information. These factors not only restrict access to services but also affect the quality of services received. For example, research in healthcare systems has shown that marginalized groups frequently encounter discriminatory practices and lower-quality care, highlighting the intersection of economic and social inequalities in shaping service outcomes. The results of this study confirm that addressing these issues requires a comprehensive approach that considers both structural and social dimensions of inequality (Lu et al., 2021).

Similarly, people with disabilities face unique challenges in accessing public services, including physical inaccessibility, communication barriers, and negative attitudes from service providers. These barriers are often compounded by poverty and lack of institutional support, creating significant

obstacles to inclusion. The findings of this study emphasize that improving access for people with disabilities requires not only physical infrastructure improvements but also changes in institutional practices and attitudes. This aligns with previous research highlighting the importance of inclusive design and disability-sensitive policies in promoting equitable service delivery (Sarsak et al., 2024).

The study also highlights the role of geographic and infrastructural factors in shaping access and inclusion. Rural and remote communities often face significant challenges due to limited availability of services, poor transportation infrastructure, and lack of digital connectivity. These challenges are particularly pronounced in sectors such as healthcare and education, where distance and resource constraints can significantly limit service utilization. The findings suggest that addressing these disparities requires targeted interventions, such as mobile services, decentralized service delivery, and investment in infrastructure, to ensure that services reach underserved populations (Alves et al., 2025).

In addition to structural barriers, the study underscores the importance of addressing social and cultural factors that influence service access and inclusion. Discrimination, stigma, and lack of cultural competence among service providers can create significant barriers for vulnerable groups, particularly in sensitive areas such as mental health services. These factors can discourage individuals from seeking help and reduce the effectiveness of interventions. The findings highlight the need for training and capacity-building initiatives that promote cultural sensitivity and inclusive practices among service providers, ensuring that services are delivered in a respectful and equitable manner (Azubuike et al., 2025).

The mediation effect of inclusion in the relationship between access and social justice is a key contribution of this study. The results demonstrate that access alone is not sufficient to achieve social justice; rather, it must be complemented by inclusive practices that ensure fair and meaningful participation. This finding addresses a significant gap in the literature, where access and inclusion are often treated as separate constructs. By demonstrating their interconnectedness, the study provides a more comprehensive understanding of how public service systems can be designed to promote equity and justice (Perikangas et al., 2023).

From a theoretical perspective, the findings support the argument that social justice in public services requires a shift from equality to equity. While equality emphasizes equal treatment for all individuals, equity recognizes the need for differentiated approaches that address the specific needs of disadvantaged groups. This perspective is particularly relevant in the context of public service delivery, where standardized approaches may fail to account for differences in access, capability, and need. The study's findings reinforce the importance of adopting equity-oriented frameworks that prioritize the needs of the most vulnerable populations (Azubuike et al., 2025).

The discussion also highlights the importance of co-production and participatory approaches in enhancing inclusion and social justice. Engaging users, particularly those from marginalized groups, in the design and delivery of public services can improve service relevance, accessibility, and effectiveness. Co-production enables users to contribute their knowledge and experiences, ensuring that services are tailored to their needs. This approach has been shown to enhance trust, improve service outcomes, and promote a sense of ownership among users, thereby contributing to more inclusive and equitable service systems (Tahir & Ibrahim, 2025).

Digital transformation presents both opportunities and challenges for achieving social justice in public service delivery. While digital technologies can enhance efficiency and expand access, they can also create new forms of exclusion if not implemented inclusively. The findings of this study suggest that digital inclusion policies, including digital literacy programs and user-centered design, are essential for ensuring that digital services are accessible to all citizens. Public-private partnerships and investments in digital infrastructure can further support these efforts, enabling more equitable access to digital public services (Djatkiko et al., 2025).

Another important insight from this study is the role of frontline service providers in shaping access and inclusion outcomes. Street-level bureaucrats often exercise discretion in implementing policies, which can either reinforce or mitigate inequalities. In some cases, frontline workers may adopt

flexible approaches to accommodate the needs of vulnerable users, thereby promoting social equity. However, inconsistent application of such discretion can also lead to unequal treatment. The findings highlight the need for clear guidelines and training to ensure that discretionary practices support, rather than undermine, social justice objectives (Lavee, 2021).

The study also contributes to the broader theoretical discourse on social justice by incorporating perspectives such as capability theory and intersectionality. These frameworks emphasize the importance of addressing structural inequalities and recognizing the diverse experiences of individuals. The findings suggest that effective interventions must go beyond surface-level solutions and address the underlying causes of exclusion, including socio-economic disparities, institutional biases, and systemic discrimination. This approach aligns with the concept of “bounded justice,” which emphasizes the need to consider contextual constraints in designing equitable policies (Mohapatra et al., 2024).

From a policy perspective, the findings of this study have several important implications. First, governments should prioritize the simplification of administrative procedures and the development of user-friendly service platforms to reduce barriers to access. Second, investments in infrastructure, including transportation and digital connectivity, are essential for addressing spatial inequalities. Third, inclusive design principles should be integrated into all aspects of public service delivery, ensuring that services are accessible to individuals with diverse needs and capabilities. Finally, participatory approaches and co-production should be promoted to enhance inclusion and responsiveness (Kavanagh et al., 2023).

In conclusion, this study demonstrates that achieving social justice in public service delivery requires a comprehensive approach that integrates access and inclusion. The findings highlight the importance of addressing structural, administrative, and social barriers to ensure equitable access for vulnerable groups. By emphasizing the mediating role of inclusion, the study provides new insights into how public services can be designed to promote fairness, equity, and participation. These insights contribute to both academic understanding and practical policymaking, offering a pathway toward more inclusive and just public service systems (Wu et al., 2022).

## **5. Conclusion, Limitations, and Suggestions**

### **Conclusion**

This study concludes that social justice in public service delivery is fundamentally shaped by the interaction between access and inclusion, particularly for vulnerable groups. The findings demonstrate that improving access alone is insufficient to achieve equitable outcomes; rather, inclusion plays a critical mediating role in transforming access into meaningful and just service experiences. When public services are accessible, user-centered, and responsive to diverse needs, they are more likely to promote fairness, participation, and equal opportunity. Conversely, administrative barriers and structural inequalities significantly hinder both access and inclusion, reinforcing cycles of exclusion. Therefore, achieving social justice requires a comprehensive approach that integrates equitable access, inclusive practices, and institutional reform to ensure that public services effectively serve all segments of society, especially those most disadvantaged.

### **Limitation and suggestions**

This study has several limitations that should be acknowledged. First, the use of cross-sectional data limits the ability to capture changes in access and inclusion over time, which may evolve as policies and technologies develop. Second, the reliance on self-reported data may introduce response bias, particularly in measuring perceptions of fairness and inclusion. Third, the study focuses on selected regions and vulnerable groups, which may limit the generalizability of the findings to broader contexts. Additionally, the model does not incorporate all possible influencing variables, such as political dynamics, institutional capacity, or cultural differences, which may also affect public service equity.

Future research is recommended to adopt longitudinal and comparative approaches to better understand the dynamic nature of access and inclusion in public service delivery. Expanding the scope

to include diverse geographical and socio-political contexts would enhance the generalizability of findings. Further studies should also integrate additional variables, such as institutional trust, service quality, and governance effectiveness, to develop a more comprehensive model of social justice in public services. From a practical perspective, policymakers should prioritize simplifying administrative procedures, strengthening inclusive service design, investing in infrastructure, and promoting participatory governance to ensure that vulnerable groups are not excluded from essential services.

## 6. Acknowledgment (If Any)

The authors would like to express their sincere appreciation to all respondents and participants who contributed valuable insights to this study. Special thanks are extended to community representatives, public service providers, and local stakeholders who facilitated data collection and provided important contextual perspectives. The authors also acknowledge the contributions of previous researchers whose work has informed this study, as well as the institutional support that made this research possible.

## References

- Alves, G., Herkrath, F., Parente, R., Da Silva Pinheiro, R., & Vettore, M. (2025). Barriers and facilitators to accessing healthcare services among elderly people living in a rural Amazonian community, Brazil. *BMC Health Services Research*, 25. <https://doi.org/10.1186/s12913-025-12945-w>
- Azubuiké, P., Akinreni, T., Adai, S., Ogbonna, C., Abba, M., Udofia, M., Odo, O., Nwadiche, M., & Imo, U. (2025). Equity and social justice perspectives on disability inclusion in healthcare services in Nigeria. *Communications Medicine*, 5. <https://doi.org/10.1038/s43856-025-01070-8>
- Bell, E., & Gilke, S. (2024). Racial discrimination and administrative burden in access to public services. *Scientific Reports*, 14. <https://doi.org/10.1038/s41598-023-50936-1>
- Cepiku, D., & Mastrodascio, M. (2021). Equity in public services: A systematic literature review. *Public Administration Review*. <https://doi.org/10.1111/puar.13402>
- Chang, M., Huang, L., Zhai, T., Zhu, J., Y., Li, L., & Zhao, C. (2023). A challenge of sustainable urbanization: Mapping the equity of urban public facilities in multiple dimensions in Zhengzhou, China. *Land*. <https://doi.org/10.3390/land12081545>
- Clemente, K., Da Silva, S., Vieira, G., Bortoli, M., Toma, T., Ramos, V., & Brito, C. (2022). Barriers to the access of people with disabilities to health services: A scoping review. *Revista de Saúde Pública*, 56. <https://doi.org/10.11606/s1518-8787.2022056003893>
- Coumans, J., & Wark, S. (2024). A scoping review on the barriers to and facilitators of health services utilisation related to refugee settlement in regional or rural areas. *BMC Public Health*, 24. <https://doi.org/10.1186/s12889-024-17694-9>
- Creary, M. (2021). Bounded justice and the limits of health equity. *The Journal of Law, Medicine & Ethics*, 49, 241–256. <https://doi.org/10.1017/jme.2021.34>
- Djatkiko, G., Sinaga, O., & Pawirosumarto, S. (2025). Digital transformation and social inclusion in public services. *Sustainability*. <https://doi.org/10.3390/su17072908>
- Gréaux, M., Moro, M., Kamenov, K., Russell, A., Barrett, D., & Cieza, A. (2023). Health equity for persons with disabilities. *International Journal for Equity in Health*, 22. <https://doi.org/10.1186/s12939-023-02035-w>
- Gunlicks-Stoessel, M., Rydberg, K., Parikh, R., Hackman, D., Marsalis, S., Henning-Smith, C., & Butler, M. (2025). Barriers and facilitators of mental health service access among rural adolescents. *JAACAP Open*, 3, 825–838. <https://doi.org/10.1016/j.jaacop.2025.06.008>
- Holubenko, T., Ivzhenko, I., & Kuznetsova, O. (2024). Social policy regarding vulnerable population groups. *Social Work and Education*. <https://doi.org/10.25128/2520-6230.24.1.9>

- Hutete, C., & Sibanda, M. (2022). Water service provision and social equity in rural areas. *Africa's Public Service Delivery & Performance Review*. <https://doi.org/10.4102/apsdpr.v10i1.641>
- Ilmu, J., Semesta, P., M., Karim, N., & Fatriani, R. (2024). Building digital inclusion and non-discriminatory services. *Governabilitas*. <https://doi.org/10.47431/governabilitas.v5i2.500>
- Kantojärvi, K., Velázquez, R., Mäki-Opas, J., Kuusio, H., & Skogberg, N. (2025). Social services access among migrant populations. *The European Journal of Public Health*, 35. <https://doi.org/10.1093/eurpub/ckaf161.352>
- Kavanagh, B., Corney, K., Beks, H., Williams, L., Quirk, S., & Versace, V. (2023). Barriers to accessing mental health services. *BMC Health Services Research*, 23. <https://doi.org/10.1186/s12913-023-10034-4>
- Kirkbride, J., Anglin, D., Colman, I., et al. (2024). The social determinants of mental health and disorder. *World Psychiatry*, 23. <https://doi.org/10.1002/wps.21160>
- Lavee, E. (2021). Walking the talk of social equity? *The American Review of Public Administration*, 52, 3–14. <https://doi.org/10.1177/02750740211050577>
- Lee, J., Hamilton, J., Ram, N., Robinson, T., & Reeves, B. (2025). Digital inequality and access to public benefits. *Journal of Quantitative Description: Digital Media*. <https://doi.org/10.51685/jqd.2025.009>
- Lopez, M., Mehra, B., & Capse, M. (2023). Social justice framework for public library services. *Public Library Quarterly*, 42, 576–601. <https://doi.org/10.1080/01616846.2023.2187180>
- Lu, W., Todhunter-Reid, A., Mitsdarffer, M., Muñoz-Laboy, M., Yoon, A., & Xu, L. (2021). Barriers to mental health service use among minority adolescents. *Frontiers in Public Health*, 9. <https://doi.org/10.3389/fpubh.2021.641605>
- Lyu, Y., Xie, J., Meng, X., & Wang, X. (2024). Digital economy and equitable public services. *Frontiers in Public Health*, 12. <https://doi.org/10.3389/fpubh.2024.1330044>
- Maharjan, E., & Shrestha, S. (2025). Structures of marginalization in Nepal. *Panauti Journal*. <https://doi.org/10.3126/panauti.v3i01.83981>
- Mahladar, S., & Jana, M. (2025). Problems of marginalized groups in India. *International Journal of All Research Education and Scientific Methods*. <https://doi.org/10.56025/ijaresm.2025.1304251710>
- Mendis, K., Thayaparan, M., Kaluarachchi, Y., & Pathirage, C. (2023). Challenges faced by marginalized communities. *Sustainability*. <https://doi.org/10.3390/su151410754>
- Mesmar, A., Limungi, G., Elmadani, M., Simon, K., Hamad, O., Tóth, L., Horvath, E., & Máté, O. (2025). Bridging healthcare disparities. *Frontiers in Health Services*, 5. <https://doi.org/10.3389/frhs.2025.1695320>
- Mohapatra, S., Maiya, G., Nayak, U., Benny, L., Watson, J., Kinjawadekar, A., & Nandineni, R. (2024). Accessibility and social justice in public buildings. *F1000Research*, 13. <https://doi.org/10.12688/f1000research.153797.2>
- Morte-Nadal, T., & Esteban-Navarro, M. (2025). Digital inclusion in public services. *Humanities and Social Sciences Communications*, 12. <https://doi.org/10.1057/s41599-025-04576-7>
- Ojeikere, K., Akomolafe, O., & Akintimehin, O. (2021). Integrating vulnerable populations into public health systems. *International Journal of Multidisciplinary Research and Growth Evaluation*. <https://doi.org/10.54660/ijmrge.2021.2.2.393-405>
- Perikangas, S., Määttä, A., & Tuurnas, S. (2023). Social equity through service integration design. *Public Management Review*, 27, 452–472. <https://doi.org/10.1080/14719037.2023.2246962>
- Sarsak, H., Van De Velde, D., Ghafar, M., Mwaka, C., Best, K., Cunningham, C., Gagnon, M., & Routhier, F. (2024). Public transport accessibility for people with disabilities. *Frontiers in Rehabilitation Sciences*, 4. <https://doi.org/10.3389/fresc.2023.1336514>



- Silva, F., Sousa, M., Lourenço, C., Paiva, A., Monteiro, T., & Grimaldi, M. (2024). Discrimination and healthcare access for people with disabilities. *Aquichan*. <https://doi.org/10.5294/aqui.2024.24.3.4>
- Tahir, N., & Ibrahim, M. (2025). Social inclusion in public services. *KnE Social Sciences*. <https://doi.org/10.18502/kss.v10i18.19472>
- Wu, C., Anderson, S., Chitwanga, A., & Yoon, S. (2022). Access to public benefits among low-income families. *The Journal of Sociology & Social Welfare*. <https://doi.org/10.15453/0191-5096.4530>