



Public health, nutrition security, and social justice: Reframing inclusive growth in India

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Abstract

Inclusive growth in India requires a transformative approach that integrates public health, nutrition security, and social justice within a unified development framework. Despite sustained economic expansion, disparities in healthcare access, nutritional outcomes, and environmental vulnerability continue to affect marginalized communities across caste, gender, class, and regional lines. This study adopts a qualitative, literature-based approach to examine the structural determinants linking health inequities and food insecurity with broader patterns of social exclusion. By synthesizing interdisciplinary scholarship and policy perspectives, the research highlights how fragmented governance, institutional inequalities, and climate-related risks limit the effectiveness of sector-specific interventions. The findings reveal that inclusive growth must move beyond income-based metrics to prioritize equity, capability enhancement, and participatory governance. Nutrition security is conceptualized not merely as food availability but as access to diverse, affordable, and sustainable diets. Similarly, public health is framed as a social and institutional outcome shaped by distributive justice and multisectoral coordination. The study proposes an integrated, justice-centered framework that aligns health systems, food systems, environmental sustainability, and social protection policies. Reframing inclusive growth through these interconnected dimensions offers a pathway toward resilient, equitable, and sustainable national development in India.

Keywords: Inclusive Growth, Public Health, Nutrition Security, Social Justice, Health Equity, Food Systems, Sustainable Development, Governance, Structural Inequality

Introduction

Inclusive growth in India cannot be meaningfully conceptualized without foregrounding the interconnections between public health, nutrition security, and social justice. As India advances toward its long-term development vision, the persistence of malnutrition, unequal access to healthcare, gendered vulnerabilities, and socio-economic disparities continues to challenge the promise of equitable development. While economic growth has accelerated in recent decades, structural inequalities rooted in caste, class, gender, and geography have limited the translation of growth into universal well-being (Chandra, 2018; Siciliano *et al.*, 2018) ^[5, 14]. Reframing inclusive growth therefore requires a multidimensional lens that integrates health systems, food systems, and justice-oriented policy frameworks.

Public health is increasingly recognized not merely as a sectoral concern but as a foundational pillar of national development. Contemporary scholarship emphasizes that health inequities are deeply embedded in social, political, and economic structures (Agyepong *et al.*, 2023; Baker *et al.*, 2025) ^[3]. Health outcomes are shaped by broader determinants such as income distribution, employment conditions, sanitation, housing, and food accessibility. In rapidly developing economies like India, uneven urbanization and informal labor markets exacerbate exposure to health risks while limiting access to preventive and curative services (Marshall & Dolley, 2019; Mensah & Tuokuu, 2025) ^[9, 10]. Thus, inclusive growth must be understood as a process that systematically addresses these social determinants of health rather than treating healthcare delivery in isolation.

Nutrition security constitutes a critical interface between public health and social justice. Despite improvements in

food production and targeted welfare schemes, India continues to face the paradox of simultaneous undernutrition, micronutrient deficiencies, and rising obesity—reflecting structural imbalances in food systems and consumption patterns (Hawkes *et al.*, 2025; Ullah *et al.*, 2025) ^[8, 16]. Nutrition insecurity is disproportionately concentrated among marginalized communities, women, and children, reinforcing intergenerational cycles of poverty and ill-health (Shahida, 2024; Wabukala *et al.*, 2024) ^[13, 17]. Scholars argue that equitable food systems require not only increased food availability but also affordability, accessibility, dietary diversity, and culturally appropriate interventions (Dogru *et al.*, 2025; Perrin, 2025) ^[6, 11]. Therefore, nutrition must be embedded within broader frameworks of distributive justice and rights-based development.

The concept of social justice provides the normative foundation for reimagining inclusive growth. Development discourse has gradually shifted from aggregate economic indicators to equity-sensitive metrics that assess who benefits from growth and who remains excluded (Bhattacharjee *et al.*, 2025; Toth, 2025) ^[4, 15]. In the Indian context, historical exclusions based on caste hierarchies, tribal marginalization, gender inequality, and rural-urban divides continue to shape disparities in health and nutrition outcomes (Chandra, 2018) ^[5]. Addressing these disparities requires intersectional and participatory governance mechanisms that ensure accountability and representation (Alizadeh & Prasad, 2025; Riaduzzaman *et al.*, 2025) ^[2, 12]. Without embedding social justice within policy design, public health and nutrition interventions risk reproducing existing inequalities rather than dismantling them.

Recent global debates further highlight the importance of integrating climate resilience, sustainability, and equity into

health and nutrition policies (Ahmadi Dehrashid *et al.*, 2025; Eelager *et al.*, 2025) ^[1, 7]. Environmental degradation, water scarcity, and climate-induced migration disproportionately affect vulnerable populations, thereby intensifying health risks and food insecurity. For India, which faces significant climate variability and agrarian distress, linking sustainable agriculture with nutrition-sensitive policies becomes central to inclusive growth (Hawkes *et al.*, 2025) ^[8]. This integrated approach recognizes that economic expansion without ecological balance undermines long-term public health outcomes.

Moreover, governance and institutional capacity play a decisive role in translating policy commitments into tangible outcomes. Evidence suggests that cross-sectoral collaboration—between health, agriculture, education, and social protection systems—enhances the effectiveness of inclusive development strategies (Agyepong *et al.*, 2023; Baker *et al.*, 2025) ^[3]. Fragmented implementation, however, weakens accountability and limits impact, particularly in resource-constrained settings. Hence, a justice-oriented public health framework must emphasize transparency, community participation, and decentralized decision-making.

In sum, reframing inclusive growth in India demands a paradigmatic shift from growth-centric metrics to equity-centered development. Public health and nutrition security are not peripheral welfare concerns but central determinants of human capability, productivity, and social cohesion. By situating these within a social justice framework, policymakers can move toward a model of development that is not only economically robust but also ethically grounded and socially transformative. This study therefore conceptualizes inclusive growth as an integrated framework that aligns health equity, nutrition security, and distributive justice to advance sustainable and inclusive national development.

Literature Review

The discourse on inclusive growth has increasingly shifted from purely economic metrics to multidimensional frameworks that incorporate public health, nutrition security, and social justice as foundational pillars of sustainable development. This shift reflects growing recognition that economic expansion alone does not automatically translate into improved human well-being, particularly in societies marked by structural inequalities such as India. The literature reviewed in this section synthesizes global and national scholarship across three interconnected domains: public health equity, nutrition security and food systems, and justice-oriented development frameworks.

1. Public Health and the Social Determinants Framework

Public health scholarship has evolved from biomedical models to broader socio-ecological approaches that emphasize structural determinants of health. Agyepong *et al.* (2023) argue that health systems must be embedded within equity-oriented governance frameworks that address disparities arising from poverty, gender inequality, and institutional exclusion. Similarly, Baker *et al.* (2025) ^[3] contend that health outcomes are deeply shaped by policy coherence across sectors, including housing, sanitation, education, and employment. These perspectives align with

the social determinants of health framework, which situates illness and well-being within socio-economic contexts rather than individual behavior alone.

In developing economies, rapid urbanization and informal labor structures further complicate public health governance. Marshall and Dolley (2019) ^[9] highlight that informal settlements often experience disproportionate exposure to environmental and occupational hazards, reflecting uneven development patterns. Mensah and Tuokuu (2025) ^[10] extend this argument by demonstrating how marginalized populations frequently encounter systemic barriers to accessing quality healthcare services, thereby reinforcing cycles of deprivation.

In the Indian context, Chandra (2018) ^[5] underscores the historical roots of health inequities, particularly those linked to caste-based exclusion and rural-urban disparities. The persistence of malnutrition, maternal mortality, and preventable diseases in marginalized communities illustrates that economic growth has not been evenly distributed. Bhattacharjee *et al.* (2025) ^[4] further emphasize the need for decentralized governance and participatory accountability mechanisms to ensure that public health interventions reach vulnerable groups effectively.

Recent scholarship also situates health equity within broader global sustainability debates. Ahmadi Dehrashid *et al.* (2025) ^[1] argue that climate change, environmental degradation, and resource scarcity are intensifying health vulnerabilities, particularly in agrarian economies. Eelager *et al.* (2025) ^[7] similarly stress that climate-resilient health systems are essential for safeguarding inclusive development in the Global South. Thus, public health is increasingly conceptualized not only as a service sector but as a core component of long-term socio-economic resilience.

2. Nutrition Security and Food Systems Transformation

Nutrition security extends beyond food availability to encompass accessibility, affordability, dietary diversity, and cultural appropriateness. Hawkes *et al.* (2025) ^[8] note that contemporary food systems are characterized by a “double burden” of malnutrition—coexistence of undernutrition and obesity—reflecting structural distortions in agricultural production, food processing, and market incentives. Ullah *et al.* (2025) ^[16] similarly argue that globalized food chains often prioritize caloric sufficiency over nutritional quality, contributing to micronutrient deficiencies and rising non-communicable diseases.

In developing countries, food insecurity disproportionately affects women, children, and marginalized social groups. Shahida (2024) ^[13] emphasizes that gendered inequalities in household food allocation perpetuate intergenerational malnutrition, particularly in patriarchal contexts. Wabukala *et al.* (2024) ^[17] highlight the role of social protection programs in mitigating nutrition vulnerability, but caution that implementation gaps and targeting inefficiencies can limit their effectiveness.

Dogru *et al.* (2025) ^[6] advocate for integrated food system reforms that connect agricultural sustainability with nutrition-sensitive interventions. Perrin (2025) ^[11] reinforces this perspective by arguing that nutrition policies must align with environmental sustainability goals to ensure long-term food security. From a justice-oriented standpoint, Riaduzzaman *et al.* (2025) ^[12] contend that equitable food governance requires inclusive participation of smallholder

farmers, indigenous communities, and women's collectives in decision-making processes. In India, the paradox of food surplus alongside persistent malnutrition illustrates structural contradictions within the food distribution system. While public distribution mechanisms and supplementary nutrition schemes have expanded coverage, disparities in dietary diversity and micronutrient intake remain prevalent across socio-economic strata. Siciliano *et al.* (2018) ^[14] argue that land access, agrarian distress, and rural livelihood precarity significantly influence household nutrition outcomes. Therefore, nutrition security must be understood within broader political-economic contexts rather than as a purely technical challenge.

3. Social Justice and Inclusive Growth

The normative foundation of inclusive growth lies in principles of social justice, distributive equity, and human capability expansion. Toth (2025) ^[15] asserts that inclusive growth frameworks must move beyond GDP-centric evaluations to incorporate equity-sensitive indicators that capture disparities in access to health, education, and nutrition. Alizadeh and Prasad (2025) ^[2] further emphasize that intersectional analysis—accounting for caste, class, gender, and ethnicity—is crucial for designing policies that address layered vulnerabilities. Theoretical contributions in this domain draw on capability theory and rights-based approaches, arguing that development must enhance individuals' substantive freedoms rather than merely increase aggregate income levels. Baker *et al.* (2025) ^[3] suggest that justice-oriented governance requires institutional accountability and participatory mechanisms to ensure that marginalized voices shape policy priorities. Bhattacharjee *et al.* (2025) ^[4] reinforce the importance of decentralized institutions in fostering community-level empowerment.

From a structural perspective, Siciliano *et al.* (2018) ^[14] highlight that global economic systems often reproduce inequalities through land dispossession, labor precarity, and unequal trade regimes. These structural forces intersect with local hierarchies, producing layered forms of exclusion. In India, caste-based discrimination continues to influence access to healthcare facilities, sanitation, and nutrition schemes (Chandra, 2018) ^[5]. Thus, inclusive growth cannot be achieved without dismantling entrenched power relations embedded within social institutions.

4. Integrating Health, Nutrition, and Justice

Emerging scholarship calls for integrated frameworks that link public health, nutrition security, and social justice within a cohesive development paradigm. Agyepong *et al.* (2023) argue for multisectoral coordination across health, agriculture, education, and social protection systems to enhance policy coherence. Hawkes *et al.* (2025) ^[8] advocate for “nutrition-sensitive” health systems that incorporate dietary interventions within primary care strategies. Similarly, Mensah and Tuokuu (2025) ^[10] emphasize the role of community participation in bridging service delivery gaps.

Climate and environmental sustainability are increasingly recognized as cross-cutting themes within this integration. Ahmadi Dehrashid *et al.* (2025) and Eelager *et al.* (2025) ^[1, 7] underline that environmental shocks disproportionately impact vulnerable populations, thereby linking ecological

resilience with public health equity. Perrin (2025) ^[11] highlights that sustainable agriculture and equitable land governance are essential for achieving long-term nutrition security. Collectively, the literature suggests that inclusive growth must be reconceptualized as a justice-centered, multisectoral framework that addresses structural determinants of inequality. Health and nutrition are not peripheral welfare concerns but central components of human development and economic productivity. However, gaps remain in translating integrated theoretical models into context-specific policy frameworks for India. While numerous studies address individual dimensions—health systems reform, food security, or social justice—comprehensive models that synthesize these domains remain limited.

Despite growing global scholarship, there is limited conceptual integration of public health, nutrition security, and social justice within the specific socio-political context of India's inclusive growth agenda. Existing studies often adopt sector-specific lenses, thereby overlooking systemic interdependencies. Furthermore, while climate resilience and sustainability are increasingly discussed, their intersection with distributive justice in India requires deeper exploration. This literature review underscores the need for a holistic framework that situates public health and nutrition security within a broader justice-oriented development paradigm. By synthesizing global and national scholarship, the present study aims to contribute to the theoretical and policy discourse on reframing inclusive growth in India through an integrated, equity-centered lens.

Research Methodology

This study adopts a qualitative research approach to examine the interconnections between public health, nutrition security, and social justice in reframing inclusive growth in India. Given the focus on structural inequalities, distributive justice, health governance, food systems, and policy interventions, a qualitative design enables an in-depth exploration of socio-economic, political, and institutional dimensions that quantitative approaches may not fully capture. Inclusive growth is not merely an economic phenomenon but a normative and structural process shaped by power relations, access to resources, and governance mechanisms. Therefore, a qualitative framework is particularly suitable for analyzing how health and nutrition disparities are embedded within broader systems of inequality.

The research is grounded in a critical review of scholarly literature, policy reports, and empirical studies that address health equity, food security, and justice-oriented development frameworks. Key academic contributions include analyses of health systems governance and equity (Agyepong *et al.*, 2023; Baker *et al.*, 2025) ^[3], climate-resilient public health frameworks (Ahmadi Dehrashid *et al.*, 2025; Eelager *et al.*, 2025) ^[1, 7], and structural determinants of inequality (Siciliano *et al.*, 2018; Toth, 2025) ^[14, 15]. The study also draws on literature examining nutrition transitions, food system transformation, and gendered vulnerabilities (Hawkes *et al.*, 2025; Shahida, 2024; Ullah *et al.*, 2025; Wabukala *et al.*, 2024) ^[8, 13, 16, 17]. Indian-specific scholarship on caste-based disparities and governance challenges (Chandra, 2018; Bhattacharjee *et al.*, 2025) ^[4, 5] further informs the contextual analysis.

Objectives of the Study

1. To examine how public health systems, nutrition security frameworks, and social justice principles interact to shape inclusive growth trajectories in India.
 - To analyze the role of structural inequalities—such as caste, gender, class, and rural-urban divides—in mediating access to health and nutrition resources.
 - To identify institutional, environmental, and governance mechanisms that either reproduce or challenge health and nutrition disparities.
 - To synthesize insights from interdisciplinary scholarly and policy literature to develop a comprehensive, justice-oriented conceptual framework for inclusive growth in India.

Data collection involved systematic extraction and synthesis of information from policy documents, global development reports, and case-based empirical studies. Sources were selected based on relevance to three thematic domains: (1) public health governance and equity, (2) nutrition security and food systems, and (3) social justice and inclusive development. Government reports, multilateral agency documents, and academic analyses were reviewed to identify recurring patterns in health and nutrition disparities across rural and urban contexts.

The literature review process followed a structured screening strategy, prioritizing recent contributions (2018-2025) that addressed equity-oriented frameworks, sustainability dimensions, and policy implementation challenges. Emphasis was placed on interdisciplinary studies that connected macro-level policy analysis with localized experiences of vulnerability. This approach enabled identification of recurring themes such as intersectional exclusion, gendered nutrition burdens, climate-induced health risks, institutional fragmentation, and accountability gaps.

The objectives guiding this methodology are twofold. First, to critically map how public health systems, nutrition security policies, and social justice principles intersect to shape inclusive growth in India. Second, to explore how structural inequalities and governance mechanisms influence patterns of inclusion and exclusion in access to health and nutrition resources. A qualitative, literature-driven approach is particularly appropriate because it allows for conceptual synthesis across disciplines—public health, development economics, sociology, and environmental studies. Rather than measuring isolated indicators, this methodology prioritizes understanding systemic interdependencies and normative dimensions of justice. By integrating global scholarship with India-specific evidence, the study offers a comprehensive framework that situates contemporary health and nutrition disparities within broader socio-economic, political, and environmental transformations.

In doing so, the research contributes to theoretical advancement by reframing inclusive growth as a justice-centered, multisectoral development paradigm. It provides a holistic understanding of how public health and nutrition security function not merely as welfare concerns but as central determinants of equitable and sustainable national development.

Discussion

The findings of this study reinforce the argument that inclusive growth in India cannot be achieved without structurally integrating public health, nutrition security, and social justice within a unified policy framework. The literature consistently demonstrates that health and nutrition disparities are not isolated sectoral problems but manifestations of deeper socio-economic and institutional inequalities (Agyepong *et al.*, 2023; Baker *et al.*, 2025) ^[3]. In the Indian context, historical stratifications based on caste, gender, and rural-urban divides continue to shape differential access to healthcare services and nutritional resources (Chandra, 2018; Bhattacharjee *et al.*, 2025) ^[4, 5]. This indicates that economic expansion alone is insufficient to dismantle entrenched hierarchies unless accompanied by equity-centered governance reforms.

The discussion also highlights the persistent “double burden” of malnutrition, reflecting systemic imbalances within food systems (Hawkes *et al.*, 2025; Ullah *et al.*, 2025) ^[8, 16]. While policy interventions have expanded food distribution and maternal-child health programs, structural challenges—such as dietary diversity gaps, gendered food allocation practices, and agrarian distress—continue to undermine nutrition security (Shahida, 2024; Siciliano *et al.*, 2018) ^[13, 14]. These findings suggest that nutrition policy must transcend caloric sufficiency and adopt a rights-based, sustainability-oriented approach that integrates agricultural reform, social protection, and community participation (Dogru *et al.*, 2025; Perrin, 2025) ^[6, 11].

Another significant theme emerging from the literature is the growing intersection between climate vulnerability and health inequity. Climate-induced disruptions disproportionately affect marginalized communities, intensifying risks of food insecurity and disease exposure (Ahmadi Dehrashid *et al.*, 2025; Eelager *et al.*, 2025) ^[1, 7]. This underscores the need for climate-resilient public health systems that are sensitive to distributive justice concerns. Inclusive growth strategies must therefore align environmental sustainability with social equity to ensure long-term resilience.

Overall, the discussion emphasizes that justice-oriented institutional reforms—such as decentralized governance, participatory accountability, and multisectoral coordination—are essential for translating policy commitments into equitable outcomes (Mensah & Tuokuu, 2025; Toth, 2025) ^[10, 15]. Reframing inclusive growth in India requires moving beyond fragmented interventions toward an integrated model that recognizes health and nutrition as central capabilities underpinning human development. Only by embedding social justice within health and food systems can India advance toward truly sustainable and inclusive national development.

Major Findings

The study reveals several critical findings regarding the interrelationship between public health, nutrition security, and social justice in shaping inclusive growth in India.

1. Structural Inequalities Remain Central Determinants of Health and Nutrition Outcomes

One of the most significant findings is that disparities in public health and nutrition are deeply embedded in historical and structural inequalities. Caste hierarchies, gender norms, rural-urban divides, and income disparities

continue to influence access to healthcare services, sanitation, and balanced diets (Chandra, 2018; Siciliano *et al.*, 2018) ^[5, 14]. Economic growth has improved aggregate indicators, yet marginalized communities still experience disproportionate burdens of malnutrition, maternal mortality, and preventable diseases. This indicates that inclusive growth must address distributive justice rather than relying solely on macroeconomic expansion.

2. Fragmented Governance Limits Policy Effectiveness

The literature highlights that although India has implemented numerous health and nutrition schemes, fragmented institutional coordination reduces their overall impact (Agyepong *et al.*, 2023; Baker *et al.*, 2025) ^[3]. Lack of integration between health, agriculture, sanitation, and social protection systems often results in duplication, targeting inefficiencies, and accountability gaps. Effective inclusive growth requires multisectoral coordination and decentralized governance mechanisms that ensure equitable service delivery.

3. The Double Burden of Malnutrition Reflects Food System Imbalances

Another major finding is the coexistence of undernutrition and rising obesity, particularly in transitioning economies (Hawkes *et al.*, 2025; Ullah *et al.*, 2025) ^[8, 16]. While caloric availability has improved, dietary diversity and micronutrient sufficiency remain inadequate, especially among women and children (Shahida, 2024; Wabukala *et al.*, 2024) ^[13, 17]. This demonstrates that nutrition security must move beyond food quantity toward quality, sustainability, and equity-driven food system reforms (Dogru *et al.*, 2025; Perrin, 2025) ^[6, 11].

4. Climate Vulnerability Intensifies Health and Nutrition Risks

Environmental and climate-related shocks disproportionately affect vulnerable populations, exacerbating food insecurity and disease exposure (Ahmadi Dehrashid *et al.*, 2025; Eelager *et al.*, 2025) ^[1, 7]. Agrarian distress and environmental degradation further compound inequalities, underscoring the need for climate-resilient health and food systems integrated within inclusive growth strategies.

5. Justice-Oriented Governance Is Essential for Sustainable Inclusion

The findings emphasize that inclusive growth must be grounded in social justice principles, including participatory governance, accountability, and rights-based policy frameworks (Bhattacharjee *et al.*, 2025; Toth, 2025) ^[4, 15]. Without embedding equity at the core of development planning, public health and nutrition interventions risk reproducing existing hierarchies rather than transforming them. Overall, the study concludes that inclusive growth in India requires a holistic, justice-centered, and multisectoral approach that integrates public health resilience, nutrition security, and structural reform to achieve sustainable and equitable development.

Conclusion

This study reaffirms that inclusive growth in India must be fundamentally reframed through the integrated lenses of public health, nutrition security, and social justice.

Economic expansion, while necessary, is insufficient to guarantee equitable development outcomes. Persistent disparities in healthcare access, nutritional status, and environmental vulnerability reveal that structural inequalities—rooted in caste, gender, class, and geography—continue to mediate the distribution of development benefits. Thus, inclusive growth cannot be reduced to income generation or macroeconomic stability; it must prioritize equity, capability enhancement, and institutional accountability.

The analysis demonstrates that public health and nutrition security are not peripheral welfare concerns but central determinants of human productivity, social cohesion, and long-term economic resilience. Fragmented governance structures and sector-specific interventions often dilute the transformative potential of policy initiatives. A multisectoral approach—integrating health systems, food systems, environmental sustainability, and social protection—is therefore essential to address interlocking vulnerabilities. Climate change and ecological stress further intensify health and nutrition risks, underscoring the urgency of embedding sustainability within inclusive growth strategies.

Importantly, the study highlights that justice-oriented governance mechanisms—such as participatory decision-making, decentralized accountability, and rights-based policy frameworks—are crucial for ensuring that marginalized communities are not merely beneficiaries but active stakeholders in development processes. Without addressing power asymmetries and institutional exclusion, public health and nutrition policies risk reproducing historical hierarchies rather than dismantling them.

Moving forward, policymakers must adopt an integrated development paradigm that aligns economic growth with distributive justice and environmental stewardship. Future research may build on this framework by incorporating empirical case studies and mixed-method approaches to assess the effectiveness of integrated health and nutrition interventions at regional and community levels. Practical implications include strengthening cross-sectoral coordination, enhancing data transparency, and prioritizing nutrition-sensitive and climate-resilient public health planning.

In conclusion, achieving inclusive growth in India requires a structural and normative shift—from growth-centric metrics to justice-centered development. By embedding equity at the heart of public health and nutrition governance, India can advance toward a more sustainable, resilient, and socially just model of national progress.

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