

## **Concerning mobilising transport for accessing maternal health care and how impactful strategies are in low resourced settings: a scoping review**

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### **Abstract**

There is very limited research examining the impact of transport mobilisation strategies across different geographical domains. This scoping review explores information holes on strategies for mobilising transport to maternal healthcare, and how strategies potentially impact women's care-seeking behaviours in Low-Income Countries (LICs) and Lower Middle-Income Countries LMICS. The scoping review employs a multi-database search approach retaining 59 articles after a full article review. Three themes were identified; efficient coordination between several institutions; paying attention to key proximal and distal factors as well as strengthening sustainable local solutions to interventions. However, initiatives would generally thrive through (i) Integrating health promotion into organised maternal healthcare programs equipped with requisite infrastructure; (ii) improving capacity, autonomy, and participation within and across social/ community structures, and (iii) maternal healthcare regionalisation addressing barriers due to physical and socio-economic geographies through the use of approved/secure facilities (iv) addressing cases of endemic poverty (v) subscribing to socio-cultural, and religious identifications in transport mobilisation. There is a significant variation in scope, context, legislative regulation, and relevance across environmental-societal dynamics making the transferability of transport mobilisation strategies problematic. Strategies for mobilising transport for maternal care ought to be approached within the spatiotemporal confines of this variation. Successful interventions must integrate place-specific approaches, holistically integrating Women/Maternal Health policing, financing schemes, and geographically aware transport mobilisation strategies.