**Study Objective:** To identify barriers, opportunities and determinants to early pregnancy identification, antenatal care (ANC), facility delivery and postnatal care (PNC) at community level in the study areas in order to inform preparation of an effective social and behavioral change communication strategy.

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| • Improving Maternal, Newborn and Child Health (MNCH) is currently one of the top priorities of the health sector in Ethiopia.  
• Low care seeking practice for MNCH services is among the major challenges.  
• The government of Ethiopia is undertaking different initiatives in line with this.  
• Launching Community Based Newborn Care (CBNC) is one of these initiatives.  
• Launching Community Based Newborn Care (CBNC) is one of these initiatives.  
• Findings of the study have been used to inform CBNC initiative as well as development of Demand Creation Strategies for MNCH services.  
• This study was conducted by Save the Children funded by Bill and Melinda Gates Foundation. | • A qualitative cross sectional was used. conducted.  
• Purposive sampling method was used to select the study areas and informants.  
• **Study Area:**  
  • **Region:** Oromia and Southern Nations, Nationalities and People’s Regions  
  • **Zones:** East Shawa, Sidama and Gurage Zones  
  • **Woredas and Kebeles:** 7 woredas (district) and 21 kebeles (sub-district) were included in the study.  
  • A total of 21 key informant interviews and 93 focused group discussions were conducted  
  • Sources of information: Mothers, fathers, grandmothers, traditional birth attendants and religious and community leaders, health development army leaders, health service providers and health service managers. | • **Major Barriers for ANC and Institutional Delivery:**  
  • Lack of awareness; past experience of safe delivery at home; religious and cultural influences and women’s low decision making power  
  • **Major Barriers to Institutional Delivery:**  
  • Absence of traditional ceremonies in health facilities; fear of undergoing surgery; quality of service provided at health facilities and absence of return ambulance service.  
  • **Major Barriers for PNC:**  
  • Confining the mother and the newborn in house after delivery; an attitude that once delivery is safe, there is nothing to worry about; perceived fear of cost; lack of transportation facility and traditional ways of treating newborns were reported.  
  • The health extension program and health development army initiatives were reported as major opportunities to improve maternal and newborn health at community level. | • **Conclusion:**  
  • The study revealed multiple and interrelated barriers to MNH care seeking which are mainly rooted in the traditions and belief systems of the community. Low awareness and poor quality of care were also identified as important barriers. The Health Extension Program and the Health Development Army can be used as a basic platform in addressing the barriers.  
  • **Recommendations:**  
  • There is a need for context specific, comprehensive, community centered and effective demand creation strategy that is based on the existing platform  
  • Involve male, community and religious leaders actively  
  • Promote client friendly, culturally competent and quality MNH services  
  • Empower women  
  • Build capacity of health workers and community leaders on demand creation |