**Abstract**

**Background**

Disparities in health service utilisation by ethnic minority groups have been well documented in Nepal, yet much less is known about the factors that contribute to these disparities. One way that the Nepali government has attempted to address these disparities is through mobilising community health workers, known as Female Community Health Volunteers (FCHVs). FCHVs provide basic maternal and child healthcare services across Nepal and in other resource poor countries, yet, women from ethnic minority groups continue to underutilise such services. This study sets out to explore perceived barriers to accessing maternal and child healthcare services amongst ethnic minority groups.

**Methods**

Villages were selected in two different geographical locations (the hill and terai regions- flatland bordering south India) with varying degrees of access to local healthcare centres. Data was collected between April 2014 and September 2014 using qualitative methods. Semi-structured interviews were conducted with twenty FCHVs, 26 women service users and 11 paid local health workers. In addition, 19 FCHVs participated in four focus group discussions. Data were analysed thematically.

**Results**

Service users from ethnic minority communities, Dalits, Madhesi, Muslim, Chepang and Tamang, underutilised FCHVs’ services, including biomedical services. The following four key barriers to accessing maternal and child healthcare services by ethnic minority communities were reported: a) a lack of awareness of healthcare services; b) traditional beliefs and healthcare practices; c) low decision-making power of women; and d) perceived indignities experienced when using health centres.

**Conclusions**

We conclude that community health programmes should focus on increasing awareness of the importance of healthcare services amongst ethnic minority groups and the programme should involve family members and traditional health practitioners. Both the FCHVs and local healthcare providers need training and educational support to develop effective communication skills for delivering context specific and respectful care to these groups if we want to achieve universal healthcare coverage for maternal and child health.