



Skill Birth Attendants (SBA) Training – 2026

Rationale

IDEA INITIATIVE, referred to as IDEA, is a small charity in Nepal. We implement community level health projects to help develop our communities' health and wealth.

Health professionals are reluctant to go, live and work in rural communities in Nepal. Thus, Skill birth attendants (SBA) are shortages in the rural birthing centre/health posts/center throughout the country. Therefore throughout the year, skilled health personnel shortages remain in rural areas. Due to lack of skilled birth attendants in rural areas, there occurs the death of the mother and child during delivery. Thus, in order to have safe deliveries in rural areas and maternal mortality reduction (MMR), SBA personnel play a vital role for saving the lives of mother and child.

The uniqueness of the program is reflected in several ways. Pregnant women will be better equipped to identify pregnancy risks in a timely way and receive the required support to overcome potential harms. The health system will be strengthened to effectively respond to the needs of women during pregnancy and prepare them for safe delivery. Moreover, health professionals will be sensitized to the specific needs of vulnerable groups of women, particularly those from rural areas.

The maternal mortality rate in Nepal has been reduced significantly but the current maternal mortality ratio of 151 is more than double the SDG global target of 70 maternal deaths per 100 000 live births by 2030. Globally every 2 minutes a woman dies, while in Nepal 2 women die every day due to pregnancy related complications – most of which are completely preventable. These are staggering numbers. There are major delays that lead to mothers dying from pregnancy complications. The first is the delay in seeking care. The second delay is in transport to the facility, which can be hours or even days away from the labouring woman's home. Finally, once at the health facility, medical treatment may be unavailable or unaffordable. Therefore, SBA training is vital for the health professionals specially nurses and midwives so healthcare workers across Nepal can provide quality maternal healthcare to all mothers and new-borns and save many lives.

Nepal Government Ministry of Health does not have sufficient budgets to allocate to all the birthing centres, health post, health centres and hospitals. Thus, there is always a lack of good physical facilities, medical equipment, medicine and supplies, and health personnel. Based on our experience in producing midwives for 25 years, the Ministry of Health has asked us to help them in partnership for the capacity development of Auxiliary Nurse midwives (ANMs and Nurses) who are working on contracts in the birthing centres and health posts in rural Nepal. Thus a process of working on public private initiative in improving and strengthening the health system in rural areas has been initiated by us. We also do not have regular funds so we rely on individuals and like-minded organizations to help us in training of Skilled Birth Attendants.



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INNOVATIVE DEVELOPMENT EDUCATION ACADEMY (IDEA)

Post Box 186, Pokhara, Kaski, Nepal. Tel. 061-524898. Email: idea.pkr@gmail.com , ideanursingcollege@yahoo.com Fax. 061-526578

IDEA has expertise in the organization and conducts short-term training on health related issues. Thus, we proposed a Skilled Birth Attendant (SBA) course for the rural health professionals so that they will play a vital role for safe deliveries and care for the mother and new-born babies in their respective communities. Such trained personnel will be employed by the health projects, government health offices (birthing centres/health center/post/hospitals). Some of the individuals perform their jobs individually or in a small group to save the lives of the mothers and children.

Since the phase out of 18 months of Midwifery education, IDEA has been focusing on SBA training with the financial support of Trans Himalayan Aid Society (TRAS) Canada. The SBA training has been playing a vital role for the safe deliveries in their respective communities. Such trained personnel will be employed by the health projects, government health offices (health centres/posts/hospitals). Some of the individuals will perform their jobs individually or in a small group within the field of their expertise.

This year also one batch of training has already started as of March 29, 2026.

Goal:

The goal of the SBA training is to manage normal pregnancy, child birth, neonatal care and timely recognized obstetric complications, provide lifesaving care and referral.

Core competencies:

The training comprises 27 core competencies of safe deliveries through hands-on clinical work. All skilled birth attendants (SBA) must have core midwifery skills. All SBAs at all levels of the health system must have skills and abilities to perform all the core functions listed below:

1. Communicate effectively, to provide holistic "women-centered" care.
2. Take history, perform physical examination and specific screening tests as required, including voluntary counselling and testing for HIV, and provide appropriate advice/guidance.
3. Educate women and their families about the importance of making a birth plan (where the delivery will take place, how they will get there, who will attend the birth and, in case of a complication, how timely referral will be arranged).
4. Assist pregnant women and their families to make a plan for birth.
5. Identify complications in mothers and newborns, perform first line management (including performance of life saving procedures and administration of life saving drugs according to the national protocol when needed) and make arrangements for effective referral.
6. Perform vaginal examination and interpret the findings.
7. Identify the onset of labour.
8. Monitor maternal and fetal well-being during labour and provide supportive care.
9. Record maternal and fetal well-being on a partograph, identify maternal and foetal distress and take appropriate action, including referral where required.
10. Identify delayed progress in labour and take appropriate action including referral where appropriate.
11. Manage normal vaginal delivery.
12. Manage the third stage of labour actively
13. Assess the newborn at birth and give immediate care



14. Identify any life-threatening conditions in the newborn and take essential life-saving measures including, where necessary, active Making Pregnancy Safer.
15. Active management of the third stage of labour includes: using oxytocic drugs, clamping and cutting the cord, and applying controlled cord traction.
16. Identify haemorrhage and hypertension in labour, provide first line management (including lifesaving skills in emergency obstetric care where needed), and if required make effective referral.
17. Provide postnatal care to women and their newborns and post abortion care where necessary.
18. Assist women and their newborns in initiating and establishing early and exclusive breastfeeding, including educating women and their families and other helpers in maintaining successful breastfeeding.
19. Identify complications (illnesses and conditions) detrimental to the health of mothers and their newborns in the postnatal period and provide first-line management according to the national clinical protocol, and if required make arrangements for effective referral.
20. Supervise non-skilled and semi-skilled attendants, including TBAs, MCHWs and paramedics, in order to ensure that the care they provide during pregnancy, childbirth and early postpartum is of good quality.
21. Provide advice, counselling and services on postpartum family planning and refer if needed.
22. Educate women (and their families) on how to prevent sexually transmitted infections including HIV
23. Collect and report relevant data, collaborate in data analysis and case audits
24. Promote a sense of shared responsibility/partnership with individual women, their family members/supporters, and the community for the care of women and newborns throughout pregnancy, childbirth and the postnatal period SBAs working at the primary health facilities in remote areas with limited access to BEOC/CEOC facilities should also be able to do the following:
25. Use vacuum extraction in vaginal deliveries
26. Perform manual vacuum aspiration for the management of incomplete abortion.
27. Repair vaginal tears and perform manual removal of placenta

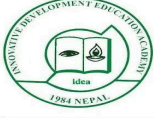
Training Methodology:

SBA training focused on simulation-based and competency-based learning approaches. These initiations focus more on practical skills, respectful maternity care, and emergency management. These include:

- Simulation-based practice
- Cadre-specific modules
- Emergency obstetric management
- Respectful maternal and newborn care
- Post-training mentorship and coaching

Management

In coordination with the Health Training Centre, Gandaki Province, Ministry of Health, IDEA had managed to implement SBA training in Lamjung Hospital Lamjung, Beshisahar. Periodic reports are prepared and submitted to the concerned authorities.



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IDEA has discussed with all the local authorities for the SBA graduates to have a secured placement of their job. We have already got the news that all our graduates are employed in the same place of the Government health posts and hospitals on a temporary basis with unlimited period.

Training Period:

The SBA Training started on March 29, 2026 in Lamjung Hospital Lamjung, Beshisahar, Lamjung district. This training lasts 2 months residential course and one month internship.

Training Site:

Lamjung Hospital, Lamjung, Beshisahar, Lamjung

SBA Participants:

There are 15 participants from various health institutions. Refer the list in Annex I

Training Impact:

All participants are so enthusiastic to learn many more new knowledge and skills from this SBA training. All are actively participating both in the theoretical and practical sessions. They hope that all of them have confidence to gain competency in 27 skills during this training.

The training team is devoted 24 hours to making this training meaningful, helping all the participants and encouraging them to take part in all the sessions to develop their self confidence.

SBA training has contributed to increased institutional deliveries and safer childbirth practices across Nepal. The presence of trained birth attendants is considered one of the most effective interventions for reducing maternal and neonatal deaths.

Nepal achieved major progress in maternal health over the last two decades, partly due to the expansion of SBA programs and maternal health services.

We are encouraged with the expression of the participants.

Participants' Expression:

Meena Gautam:

With the support of IDEA, I am able to participate in the SBA in Lamjung Hospital.

Sanam Pun:

Without the financial support of IDEA I would not have participated in SBA training this year.

Anju Lamsal:

Thanks to IDEA for supporting me for SBA training.

Ganga Purja:

We are learning many valuable knowledge and skills that are essential to our future work. Thanks to IDEA for the financial support to participate in this training.

Sunita Ale Rana:

I am happy to learn many skills. Thanks to IDEA for the financial support for this training.

Manju Darlami Magar:



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I am participating in this training with the support of IDEA and learning very essential knowledge and skills for my career.

Sapana Pariyar:

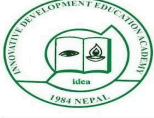
Thanks to IDEA for my support. I am learning and participating in all activities during training.

Dipa Neupane:

I am able to participate in this training to gain more knowledge and skills with the support of IDEA.

Om Kumari Rana:

I was not able to take part in this training without the financial support of IDEA. Now I learned many skills that are useful in my professional life.



Annex I

Skilled Birth Attendants (SBA) Training – 2026

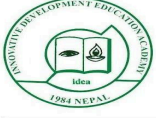
Start Date: March 29, 2026

S. No	Name	Qualification	Job Placement	Job Status	Remarks
1	Ganja Purja	ANM	Ramche HP, Annapurna Municipality, Myagdi	Volunteer	
2	Om Kumari Rana	ANM	Dhiring HP, Jallala Municipality, Parbagt	Volunteer	
3	Sunita Ale Rana	ANM	Bhimad HP, Bhimad Municipality, Tanahun	Volunteer	
4	Sandy Gurung	ANM	Bhujung HP, Bhujung Municipality, Lamjung	Volunteer	
5	Manju Darlami Magar	ANM	Bardhaghat HP Municipality, Nawalparasi	Volunteer	
6	Sanam Pun	ANM	Tarakhola HP, Tarakhola Municipality, Baglung	Volunteer	
7	Asmita Thakuri	ANM	Baddanda HP, Palungtar, Gorkha	Volunteer	
8	Surakchhya Shrestha	ANM	Aadhikhola HP, Aandhikhola , Syangja	Volunteer	
9	Mina Gautam	ANM	Bhalam HP, Bhalam, Kaski	Volunteer	
10	Sapana Pariyar	ANM	Chame HP, Chame, Manang	Volunteer	
11	Bishnu Kumari Gurung	ANM	Jharkot HP, Muktichhetra Municipality, Mustang	Volunteer	
12	Manisha Sreesh Magar	ANM	Burtibang HP, Burtibang, Baglung	Volunteer	
13	Mina Gurung	ANM	Manakamana HP, Biruwa Municipality, Syangja	Volunteer	
14	Dipa Neupane	ANM	Tribeni HP, Painu Municipality, Parbat	Volunteer	
15	Anju Lamshal	ANM	Chhoprak HP, Chitre Municipality, Gorkha	Volunteer	



Annex II Photos/Videos





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