ALL ORISSA SRI AUROBINDO STUDY CIRCLE COMMITTEE

Souvenir

34TH ALL ORISSA CONFERENCE of Sri Aurobindo Medical Association

9th & 10th September 2023

"THE NEW CHILDHOOD"



MATRUBHABAN

SRI AUROBINDO MARG, CUTTACK - 753 013 e-mail: matrubhaban@gmail.com visit us at : www.motherorissa.com Ph. : (0671) 2344338, 2974338



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ALL ORISSA SRI AUROBINDO STUDY CIRCLE COMMITTEE 34th ALL ORISSA CONFERENCE OF SRI AUROBINDO MEDICAL ASSOCIATION



"All Nature dumbly calls to Her alone to heal with her feet the aching throb of life"

Letter No. 1 34th SAMA/Dt. 16.03.2023

PRAYER

Sweet Mother,

Pranams at Thy Lotus Feet,

The Sri Aurobindo Medical Association is going to observe its 34th All Orissa Conference on the Theme "The New Childhood"-

The two day conference will be held at Matrubhaban, Cuttack on 9th and 10th September 2023

Pray Mother for Thy Grace, Blessings, Guidance and constant Presence to steer the event forward -

Offering all at Thy Lotus Feet

Thy children

Members of Sri Aurobindo Medical Association







Manoj Das Gupta Sri Aurobindo Ashram Trust Sri Aurobindo Ashram Pondicherry

Dear Shyama,

Your letter regarding the 34th Annual Conference of the Sri Aurobindo Medical Association of Orissa has been placed in Mother's Room for Her Blessings and Guidance for the Conference.

We understand that the theme of the conference is "The New Childhood" and that a souvenir will be released on the occasion. We have no objection to your including excerpts from the Writings of Sri Aurobindo and the Mother in the souvenir. A few photographs of the Mother and Sri Aurobindo may also be printed in it. Kindly ensure that no photograph is printed on the cover- they may be printed inside the souvenir. Proper reference notes must be given for the excerpts used and due acknowledgement made to the Sri Aurobindo Ashram Trust for the above permission.

We convey our best wishes for the success of the conference.

In Her Love,

Manoj Das Gupta Managing Trustee, Sri Aurobindo Ashram

Sri Aurobindo Medical Association extends its gratitude to the Managing Trustee of Sri Aurobindo Ashram, Pondicherry for giving us permission to print the photograph of The Mother and Sri Aurobindo and their writings in this Souvenir.

Souvenir 2023 THE NEW CHILDHOOD





Prof. Ganeshi Lal Governor, Odisha



RAJBHAVAN BHUBANESWAR-751008

August 25, 2023

Message

I am glad to know that Sri Aurobindo Medical Association, a Project of Sri Aurobindo Srikshetra, Dalijoda, Cuttack is organising its 34th Annual Conference on September 09-10, 2023 at Matrubhaban, Cuttack. A Souvenir is also being brought out to mark the occasion.

The theme of the conference is "The New Childhood" dealing with a holistic approach to new born, infancy and under five population. A child is born with immense possibilities. It is for parents and medical professionals to ensure their growth in every respect from physical, emotional, mental health to spiritual health and contribute to a healthy Nation. It is heartening that all these will be discussed during the conference. Further, experts from State, National and International level would be deliberating extensively on a wide range of issues. I am sure the conference would be enlightening and stimulating for the delegates.

I wish the conference and publication all success.

(Ganeshi Lal)







Shalini Pandit, IAS
Commissioner-cum-Secretary to
Government
Health & F.W. Department
Government of Odisha

Loka Seva Bhawan Bhubaneswar-751001 Tel: +91-674-2536632 Email: orhealth@nic.in

Message

I am delighted to know that a Conference is being organized by the Sri Aurobindo Medical Association, on a very pertinent issue concerning the Perinatal, Infancy and Under-five population which faces great challenges in health and well being in our State. We have development goals to achieve in this area. I congratulate the organisers for dealing with the issue in such a comprehensive manner by bringing in International, National and State level resource persons for imparting knowledge and capability to a wide range of providers not only including Pediatric and Obstetric Faculty and Postgraduate students of the different Medical Colleges of the State but also Specialists from FRUs. I also understand that BeMONC, CeMONC, AYUSH doctors, Nurses and Midwives have been invited as participants.

The awareness thus created hopefully will go a long way in giving a positive thrust to the already ongoing programs of the State.

The holistic approach, I am sure, will also bring about an attitudinal change in the right direction.

I wish the conference a grand success.

(Shalini Pandit)









Directorate of Medical Education & Training, Odisha Heads of Department Building, Bhubaneswar - 751001

Message

The Sri Aurobindo Medical Association is holding its 34th Annual Conference on the theme "THE NEW CHILDHOOD", in which international, national, and state-level resource persons are taking a holistic approach to enlighten our faculty and postgraduate students in the departments of paediatrics and obstetrics and gynaecology of all the medical colleges of the state, in addition to the specialists and BeMONC, CeMONC, and AYUSH doctors of the peripheral health care set up. This will go a long way towards upgrading the knowledge and attitude of the providers and ultimately reducing mortality and morbidity in this vulnerable group.

I congratulate the organisers for this unique venture and wish the event a grand success.

Prof.(Dr.) S.N. Mohanty





Dr. Bijaya Kumar Panigrahy,
MD (Paediatrics)
Director of Family Welfare

Directorate of Family Welfare Heads of Department Building 3rd Floor, Bhubaneswar Odisha-751001

Message

Children are the best gift that divine has bestowed upon earth. Being the evolving souls, our children carry enormous possibilities for the future. Hence, we must make all possible efforts to take care of our children and nurture them in an enabling environment. Health and wellbeing of newborn, infant and under five children is of prime importance for the year. They need a holistic and specialized approach not only by specialist doctors but also by all health care providers.

I congratulate the organisers of the 34th Annual Conference of Sri Aurobindo Medical Association in roping in International, Natinal and State level resource persons to increase the knowledge and change in attitude of the Doctors and all health care providers. I hope this will augment the implementation of multiple strategies already adopted by the Government to meet the targets set before us.

I wish conference a grand success.

(Dr. Bijaya Kumar Panigrahy)







Sri Aurobindo Ashram - Delhi Branch Trust Society Sri Aurobindo Marg, New Delhi - 110 016

Message for 34th All Orissa Conference of Sri Aurobindo Medical Association (Theme: A New Childhood) - from Tara Jauhar (Chairperson, Sri Aurobindo Ashram Delhi Branch Trust Society)

Tara Jauhar

Message

Dear Friends,

I would like to take this opportunity, where so many seekers and practitioners from all over the world have gathered to deliberate on "The New Childhood", to share a few words of The Mother and Sri Aurobindo on this topic.

"When one is normal, that is to say, unspoilt by bad teaching and bad example, when one is born and lives in a healthy and relatively balanced and normal environment, the body, spontaneously, without any need for one to intervene mentally or even vitally, has the certitude that even if something goes wrong it will be cured.

The body carries within itself the certitude of cure, the certitude that the illness or disorder is sure to disappear. It is only through the false education from the environment that gradually the body is taught that there are incurable diseases, irreparable accidents, and that it can grow old, and all these stories which destroy its faith and trust. But normally, the body of a normal child—the body, I am not speaking of the thought—the body itself feels when something goes wrong that it will certainly be all right again. And if it is not like that, this means that it has already been perverted. It seems normal for it to be in good health, it seems quite abnormal to it if something goes wrong and it falls ill; and in its instinct, its spontaneous instinct, it is sure that everything will be all right." - The Mother

Tara Jauhar (Chairperson)

Sri Aurobindo Ashram - Delhi Branch Trust Society Sri Aurobindo Marg, New Delhi - 110016

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Prof. Shashi N. Vani

Message

Organizing Message for the Souvenir

It is heartening to note that a full event has been arranged to discuss about the different angles of "The New Childhood, A unique amalgamation of Science and Spirituality in the field of Perinatology, Infancy and early Childhood". during the forthcoming 34th All Orissa Conference of Sri Aurobindo Medical Association at Matrubhaban, Cuttack. It reflects the great concern of the organizing group about the nurture and well being of our precious children of today who are going to be our proud citizens of tomorrow.

Today's childhood is suffering from many easily avoidable diseases, deficiencies, disabilities, and much more important, a life of deprivation of love and good guidance. In the current life style, the baby is unnecessarily often separated from the loving mother /parents soon after birth in the hospitals, starting life with the stress and strains, reared in nuclear families where both parents are often working due to economic pressures and have no quality time for the child in his/her golden period of nurture and holistic development, mostly deprived of the love and care of grandparents, studying in schools (if they are lucky!) under the guidance of overworked, often unsatisfied teachers and not the real gurus, and in an atmosphere of mounting competition and mental pressure. The threat of growing up with the menace of over exposure to mobile phones and T V screens with the impending threat of lifestyle diseases is always lurking. Drugs and addictions are major threats which lead to greater calamities.

In such a background, it is really appreciable that some efforts are put in not only to improve the physical health but also to improve the mental, moral and spiritual health of the child, combining evidence based scientific innovations with the value based spiritual threads. I heartily congratulate the members of Sri Aurobindo Medical Association for their sustained efforts for past so many years in this field and picking up this timely theme for further discussions to plan for future actions.

I wish all the best for the valuable deliberations during this unique conference with the theme of the new childhood. I am sure many doable points will emerge and benefit the society at large.

Prof. Shashi N. Vani, M.D., D. Ped., FIAP, FNNF Emeritus Professor of Paediatrics including Neonatology, Gujarat President and Managing Trustee of Kangaroo Mother Care Foundation, India President of National Neonatology Forum, India (1999-2000)

Souvenir 2023 THE NEW CHILDHOOD



Editorial...

How the future world will take shape depends on the children of TODAY- It is ONLY when the children today are begot in ideal physical, emotional, psychic, spiritual manner and are reared up consciously holistically that we can hope to see a wonderful New World order devoid of violent, maladjusted, insecured, depraved, chaotic, selfish, wicked, greedy, in disciplined, insensitive, negative minded, poorly evolved generation. This danger is real unless we pay heed NOW.

This 34th Annual Conference of Sri Aurobindo Medical Association is dedicated to this objective. We have to deal with the neonatal, infant and under five periods safely as well as consciously. Several experts of International and National repute have come under one banner to share their experience, thoughts and beliefs in this domain. These have been included in this Souvenir to throw light on the issue and sensitizing the caregivers of the mother and children to inculcate a holistic approach in the matter which is so urgent for the world and its future.

Praying that real action at State and National level follows in a systematic manner to produce palpable result in the up coming times

Dr. Shyama Kanungo

NB: The Editor does not take any responsibility of the views expressed by the contributors.



Words of The Mother & Sri Aurobindo on Education

The true basis of education is the study of the human mind, infant, adolescent and adult Any system of education founded on theories of academic perfection, which ignores the instrument of study, is more likely to hamper and impair intellectual growth than to produce a perfect and perfectly equipped mind. For the educationist has to do, not with dead material like the artist or sculpture, but with an infinitely subtle and sensitive organism. He cannot shape an educational masterpiece out of human wood or stone; he has to work in the elusive substance of mind and respect the limits imposed by the fragile human body.

X X X

The first principle of true teaching is that nothing can be taught.

... The second principle is that the mind has to be consulted in its own growth. ... The third principle of education is to work from the near to the far,

X X X

A very young child cannot, indeed, apply himself; but a very young child is unfit for school teaching of any kind. A child of seven or eight, and that is the earliest permissible age for the commencement of any regular kind of study, is capable of a good deal of concentration if he is interested.

... The mothertongue is the proper medium of education and therefore the first energies of the child should be directed to the thorough mastering of the medium. Almost every child has an imagination, an instinct for words, a dramatic faculty, a wealth of idea and fancy.

X X X

The observation and, comparison of flowers, leaves, plants, trees will lay the foundations of botanical knowledge without loading the mind with names and that dry set acquisition of informations which is the beginning of cramming and detested by the healthy human mind when it is fresh from nature and un-spoiled by unnatural habits. In the same way by the observation of the stars, astronomy, by the observation of earth, stones, etc., geology, by the observation of insects and animals, entomology and zoology may be founded. A little later chemistry may be started by interesting observation of experiments without any formal teaching or heaping on the mind of formulas and book-knowledge. There is no scientific subject the perfect and natural mastery of which cannot be prepared in early childhood by this training of the faculties to observe, compare, remember and judge various classes of objects. It can be done easily and attended with a supreme and absorbing interest in the mind of the student. Once the taste is created, the boy can be trusted to follow it up with all the enthusiasm of youth in his leisure hours. This will prevent the necessity at a later age of teaching him everything in class.

X X X

The education of a human being should begin at his very birth and continue throughout his life.

Indeed, if the education is to have its maximum result, it must begin even before birth: it is the mother herself who proceeds with this education by means of a twofold action, first, upon herself for her own improvement, and



secondly, upon the child which she is forming within her physically. For it is certain that the nature of the child about to be born will depend very much upon the mother who forms it, upon her aspiration and will as much as upon the material surroundings in which she lives. The part of education which the mother has to go through is to see that her thoughts are always beautiful and pure, her feelings always noble and fine, her material surroundings as harmonious as possible and full of a great simplicity. And if in addition she has a conscious and definite will to form the child according to the highest ideal she can conceive, then the very best conditions are provided for the child to come into the world with the maximum of possibilities. How many difficult efforts and useless complications are avoided thereby!

... With very few exceptions, parents do not take into account the disastrous influence their defects, impulses, weaknesses, want of selfcontrol have on their children. If you wish to be respected by your child, have respect for yourself and be at every moment worthy of respect. Never be arbitrary, despotic, impatient, illtempered. When your child asks you a question, do not answer him by a stupidity or a foolishness, under the pretext that he cannot understand you. You can always make yourself understood if you take sullicient pains for it, and in spite of the popular saying that it is not always good to tell the truth, I alarm that it is always good to tell the truth, only the art consists in telling it in such a way as to make it accessible to the brain of the hearer. In early life, till he is twelve or fourteen, the child's mind is hardly accessible to abstract notions and general ideas. And yet you can train it to understand these things by using concrete images or symbols or parables.

... You should not allow any fear to slip in between you and your child; fear is a disastrous way to education: invariably it gives birth to dissimulation and falsehood. Only an affection that is discerning, firm yet gentle and a sufficient practical knowledge will create bonds of trust that are indispensable for you to make the education of your child effective. And never forget that you have to surmount yourself always and constantly so as to be at the height of your task and truly fulfil the duty which you owe your child by the mere fact of your having brought him into existence.

ххх

Physical Education

All education of the body should begin at the very birth and continue throughout life: it is never too soon to begin nor too late to continue.

The education of the body has three principal aspects: (1) control and discipline of functions, (2) a total, methodical and harmonious development of all the parts and movements of the body and (3) rectification of defects and deformities, if there are any.

It may be said that from the very first days, almost even from the first hours, of his life the child should undergo the first part of the programme in the matter of food, sleep, evacuation, etc. If the child, from the very beginning of his existence, takes to good habits, that will save him a good deal of trouble and inconvenience all the rest of his life. And also those who have the charge to "atch over him during his first years will find their task very much easier.

... From one's very childhood, one should know that one eats in order to give to the body strength and health, and not to enjoy the pleasures of the palate. The child should be given the food that suits his temperament, prepared with all care for hygiene and cleanliness, pleasant to the taste and yet very simple; and this food should be chosen and measured out according to the age of the child and his regular activities; it must contain all the



chemical and dynamic elements that are necessary for the development and the balanced growth of all the parts of the body.

... Another thing should be taught to a child from his early years: the taste for cleanliness and hygienic habits. But if you wish to form in the child this taste for cleanliness and respect for the rules of hygiene, you must take great care not to instil into him the fear of illness.

... it would be good for the child, as soon as he is able to make use of his limbs, to devote some time daily to developing methodically and normally all the parts of his body. Every day some twenty or thirty minutes, preferably on waking if possible, will suffice to assure the good functioning and balanced growth of his muscles,

... But in any case, a child, whatever may be his activities, should have a suScient number of hours for sleep. This number will vary with age. In the cradle, the baby should sleep longer than it remains awake. The number of hours for sleep will diminish as the child grows. But till the adult age the number should not be less than eight hours and that in a quiet and wellventilated place. The child should never be made to.stay up uselessly. The hours before midnight are the best for resting the nerves. Even during the waking hours, relaxation is an indispensable thing for everyone who wishes to maintain the nervous balance. To know how to relax the muscles and the nerves is an art which should be taught to children even when very young. There are many parents who, on the contrary, force their children to constant activity. When the child remains quiet, they imagine he is ill. There are even parents who have the bad habit of making their child do household work at the expense of his rest and relaxation.

... I said that even from a young age children should be taught respect for physical

health, strength and balance. The great importance of beauty must also be insisted upon. A young child should aspire for beauty, not for the sake of pleasing others or gaining fame, but for the love of beauty itself:

Vital

... it is of prime importance that the education of the child's vital should begin as early as possible, indeed, as soon as he is able to use his senses. In that way, many bad habits will be avoided and harmful influences eliminated.

The education of the vital has two principal aspects, very different as to the goal and the process, but both are equally important. The first is to develop and utilise the sense organs, the second is to become conscious and gradually master of one's character and in the end to achieve its transformation.

... when along with the growth of the power of observation there grows also the will towards progress and perfection. This will is to be instilled into the child as soon as he is capable of having one, that is to say, at a much younger age than is usually believed.

Mental

... It cannot be gainsaid that what most impedes mental progress in the child is the constant dispersion of his thoughts. His thought sqautters hither and thither like a butterfly and a great effort is required on his part to fix it. Yet the capacity is latent in him for when you succeed in making him interested, he is capable of a good deal of attention. It is therefore the skill of the educator that will gradually make the child capable of a sustained effort of attention and a faculty of more and more complete absorption in the work while it is being done. All means . are good that can develop this faculty of attention; they can all be utilised according to need and circumstances, from games up to rewards. But it is the psychological



action that is most important and the sovereign means is to rouse in the child interest in the thing that one wishes to teach, the taste for work, the will to progress. To love to learn is the most precious gift that one can make to a child: to love to learn always and everywhere. Let all circumstances, all happenings in life be occasions, constantly renewed, for learning more and ever more.

Psychic

Every human being carries hidden within him the possibility of a greater consciousness beyond the frame of his normal life through which he can participate in a higher and vaster life. Indeed, in all exceptional beings it is always this consciousness that governs their life, and organises both the circumstances of their life and their individual reaction to these circumstances. What the human mind does not know and cannot do, this consciousness knows and does. It is like a light that shines at the

centre of the being radiating through the thick coverings of the external consciousness. Some have a vague perception of its presence; a good many children are under its influence which shows itself very distinctly at times in their spontaneous actions and even in their words. Unfortunately parents most often do not know what it is and do not understand what is happening in their children; therefore their reaction with regard to these phenomena is not happy and all their education consists in making the child as unconscious as possible in this domain to concentrate all its attention upon external things, thus forming the habit of looking upon those alone as important.

Ref: Sri Aurobindo - On Education page.19, 20, 21, 33, 34.

The Mother - On Education page.45, 46, 96, 98, 99, 100, 101, 102, 103, 104, 105, 109, 112, 115, 116.



And for some, like X for example, it is very conscious. She had an accident in the knee long ago and this leg is a little weaker than the other one—there was a possibility of an upsetting. She noticed that so long as she had the correct attitude she felt nothing, there was nothing, it seemed to have gone altogether. As soon as she fell back into the ordinary consciousness, the illness returned.... And she has had innumerable experiences. I found it very interesting.

(11/208) - The Mother



ଶିକ୍ଷା ସମ୍ପର୍କରେ ଶ୍ରୀମା ଓ ଶ୍ରୀଅର୍ବିନ୍ଦଙ୍କ ବାଣୀ

ଶିକ୍ଷାର ଯଥାର୍ଥ ଭିଭି ହେଉଛି ଶୈଶବ, କୈଶୋର ଓ ପ୍ରୌଢ଼ାବସ୍ଥାର ମାନବ-ମନର ଅନୁଶୀଳନ । ଜ୍ଞାନ-କୈନ୍ଦ୍ରିକ ପୂର୍ଣ୍ଣତାର ସିଦ୍ଧାନ୍ତ ଉପରେ ପ୍ରତିଷ୍ଠିତ ଶିକ୍ଷାବ୍ୟବସ୍ଥା ଯାହା ଅଧ୍ୟୟନର ଉପକରଣକୁ ଉପେକ୍ଷା କରେ ତାହା ପୂର୍ଣ୍ଣାଙ୍ଗ ଓ ସୁଷମ ମନର ଗଠନ ନ କରି ବୁଦ୍ଧିଗତ ଉତ୍କର୍ଷକୁ ଅଧିକଭାବେ ବାଧାଦେବାର ଓ କ୍ଷତିଗ୍ରୟ କରିବାର ସୟାବନା ଥାଏ । କାରଣ ଶିକ୍ଷାବିତ୍ କଳାକାର ବା ସ୍ଥପତି ସଦୃଶ ନିର୍ଜୀବ ଉପକରଣକୁ ନେଇ ନୁହେଁ, କିନ୍ତ ଅସୀମ ଭାବେ ସୂକ୍ଷ୍ମ ଓ ସୟେଦନଶୀଳ ଜୀବନକୁ ନେଇ କାର୍ଯ୍ୟ କରିବାକୁ ହୁଏ । ସେ କାଷ ବା ପ୍ରୟର ସଦୃଶ କୌଣସି ମାନବକୁ ଶିକ୍ଷାକ୍ଷେତ୍ରର ଶ୍ରେଷ ଅବଦାନରେ ରୂପାୟିତ କରିପାରିବ ନାହିଁ, ଯେଉଁ ମନକୁ ବୁଝିବା ଦୁରୂହ ତାହାର ଉପାଦାନକୁ ନେଇ ତାକୁ କାର୍ଯ୍ୟ କରିବାକୁ ହେବ ଏବଂ ଭଙ୍ଗୁର ମାନବ-ଶରୀର ଦ୍ୱାରା ସେହି ମନ ଉପରେ ଆରୋପିତ ସୀମିତ ଅବସ୍ଥା ଉପରେ ତାକୁ ବିବେଚନା କରିବାକୁ ହେବ ।

... ଯଥାର୍ଥ ଶିକ୍ଷାଦାନର ପ୍ରଥମ ନୀତି ଏହି ଯେ କିଛି ବି ଶିକ୍ଷା ଦିଆଯାଇ ପାରିବ ନାହିଁ ।

... ଦ୍ୱିତୀୟ ନୀତି ହେଲା ଉତ୍କର୍ଷ ସାଧନ ନିମନ୍ତେ ମନକୁ ନିଜର ପରାମର୍ଶ ଗ୍ରହଣ କରିବାକୁ ହେବ ।

... ଶିକ୍ଷାଦାନର ତୃତୀୟ ନୀତି ହେଉଛି ନିକଟସ୍ଥ ପାରପାର୍ଶ୍ୱିକ ଅବସ୍ଥାରୁ ଆରୟ କରି ଦୂର-ଦୂରାନ୍ତ ପର୍ଯ୍ୟନ୍ତ, ବର୍ତ୍ତମାନ ଯାହା ଉପସ୍ଥିତ ତହିଁରୁ ଆରୟ କରି ଭବିଷ୍ୟତ୍ରେ ଯାହା ହୋଇଉଠିବ ସେଥି ନିମିଉ କାର୍ଯ୍ୟ କରିବା।

ଏକଥା ଠିକ୍ ଯେ ଏକ ଅତି ଛୋଟ ଶିଶୁ ବାୟବରେ ନିଜକୁ କୌଣସି ବିଷୟରେ ଦୀର୍ଘ ସମୟ ସକାଶେ ନିବିଷ୍ଟ କରି ପାରିବ ନାହିଁ, କିନ୍ତୁ ଏକଥା ମଧ୍ୟ ବୁଝିବାକୁ ହେବ ଯେ କୌଣସି ଅତି ଛୋଟ ଶିଶୁ କୌଣସି ପ୍ରକାର ବିଦ୍ୟାଳୟ ଶିକ୍ଷାଦାନ ନିମିଉ ଅନୁପଯୁକ୍ତ । କୌଣସି ପ୍ରକାର ବିଧ୍ବଦ୍ଧ ଅଧ୍ୟୟନ ନିମିଉ

ଶିଶୁମାନଙ୍କର ବୟସ ଅନ୍ତତଃ ସାତ ବା ଆଠ ବର୍ଷ ହେବା ଉଚିତ । ଏବଂ ଏହି ବୟସରେ ଶିଶୁର ଯଦି ବିଶେଷ ଆଗ୍ରହ ଥାଏ ତେବେ ସେ ଯଥେଷ୍ଟ ମାତ୍ରାରେ ଏକାଗ୍ର ହେବାକୁ ସମର୍ଥ ହେବ ।

... ମାତୃଭାଷାହିଁ ଶିକ୍ଷାର ଉପଯୁକ୍ତ ମାଧ୍ୟମ ଏବଂ ସେହି ସକାଶେ ଏହି ମାଧ୍ୟମକୁ ବିଶେଷଭାବେ ଆୟଭାଧୀନ କରିବାପାଇଁ ଶିଶୁର ପ୍ରଥମ ଶକ୍ତିକୁ ନିୟନ୍ତିତ କରାଯିବା ଉଚିତ । ପ୍ରାୟ ପ୍ରତ୍ୟେକ ଶିଶୁର ରହିଛି କଳ୍ପନା ଶକ୍ତି, କିଛି କହିବାର ପ୍ରବୃତ୍ତି, ଅଭିନୟ-କ୍ଷମତା, ଭାବ ଓ ଅଭିରୃଚିର ଏକ ସମ୍ପଦ ।

... ମନକୁ ଭାରାକ୍ରାନ୍ତ ନ କରି ପୁଷ, ପତ୍ର, ଗୁଳୁ ଓ ବୃକ୍ଷରାଜିର ପର୍ଯ୍ୟବେକ୍ଷଣ ଓ ତୁଳନା ଦ୍ୱାରା ଉଦ୍ଭିଦବିଦ୍ୟା ସୟଦ୍ଧୀୟ ଜ୍ଞାନର ପର୍ଯ୍ୟବେକ୍ଷଣ କରି ଜ୍ୟୋତିର୍ବିଜ୍ଞାନ; ମୃତ୍ତିକା, ପଞ୍ଚର ଇତ୍ୟାଦିର ପର୍ଯ୍ୟବେକ୍ଷଣ ଦ୍ୱାରା ଭୂବିଦ୍ୟାର; କୀଟପତଙ୍ଗ ଓ ପଶୁପକ୍ଷୀମାନଙ୍କର ପର୍ଯ୍ୟବେକ୍ଷଣ ଦ୍ୱାରା କୀଟତତ୍ତ୍ୱ ଓ ପ୍ରାଣୀତତ୍ତ୍ୱର ଭିଭିସ୍ଥାପନ କରାଯାଇପାରେ । ଅଳ୍ପ କିଛିକାଳ ପରେ, କୌଣସି ଧରାବନ୍ଧା ଶିକ୍ଷାଦାନ ବ୍ୟତୀତ କିୟା ମନ ମଧ୍ୟରେ କୌଣସି ସୂତ୍ ବା ପୁଞ୍ଚକଗତ ଜ୍ଞାନକୁ ଠୁଳ ନ କରି ପରୀକ୍ଷାନିରୀକ୍ଷାର ଆନନ୍ଦଦାୟକ ପର୍ଯ୍ୟବେକ୍ଷଣ ଦ୍ୱାରା ରସାୟନ ବିଦ୍ୟାର ଅଧ୍ୟୟନ ଆରୟ କରାଯାଇପାରେ । ଏପରି କୌଣସି ବିଜ୍ଞାନଗତ ବିଷୟ ନାହିଁ ଯାହାକୁ ବିଭିନ୍ନ ଶେଶୀର ବସ୍ତୁର ପର୍ଯ୍ୟବେକ୍ଷଣ, ତୁଳନା, ସୁରଣ ଏବଂ ବିଚାର କରିବା ସକାଶେ ବିଭିନ୍ନ ବୃତ୍ତିକୁ ତାଲିମ କରିବା ଦ୍ୱାରା ପୃଣ୍ଡିତଃ ପାକୃତିକ ପନ୍ଲାରେ ପାଥମିକ ଶିଶୁ ଅବସ୍ଥାରେ ଆୟତ୍ତ କରାଯାଇ ନ ପାରେ । ଏହା ସହଜରେ ଏବଂ ଛାତ୍ର ମନରେ ଚରମ ଗ୍ହଣଶୀଳ ଆଗ୍ହ ସହ ସମ୍ପାଦନ କରାଯାଇପାରେ । ଯଦି ଥରେ ଏହି ଅଭିରୃଚି ସୃଷ୍ଟି କରାଯାଇପାରେ, ତେବେ ଛାତ୍ ତାହାର ଅବସର ସମୟରେ ତରୁଣସ୍କୁଲଭ ଉତ୍ସାହ ସହିତ ଏହାକୁ ଅନୁସରଣ କରିବ ବୋଲି ଆସ୍ଥା ରଖାଯାଇପାରେ I ପରବର୍ତ୍ତୀ କାଳରେ ତାହାକୁ ଶ୍ରେଣୀଗୃହ ମଧ୍ୟରେ ସବୁକିଛି ଶିକ୍ଷା ଦେବାର ଆବଶ୍ୟକତାକୁ ଏହା ଦୂର କରିପାରେ I



ଶିକ୍ଷା

ମନୁଷ୍ୟର ଶିକ୍ଷା ଏକେବାରେ ତାହାର ଜନ୍ମଠାରୁ ଆରୟ ହୋଇ ସମୟ ଜୀବନବ୍ୟାପୀ ଚାଲିବା ଉଚିତ।

ବସ୍ତୁତଃ ଶିକ୍ଷାର ପରିପୂର୍ଣ୍ଣ ଫଳ ପାଇବାକୁ ହେଲେ ଜନୁର ଆଗରୁ ତାହାର ଆରୟ ହେବା ଆବଶ୍ୟକ। ଏହି ଶିକ୍ଷା ମା'ର ମଧ୍ୟରେ ଆରୟ ହୁଏ ଦ୍ୱିବିଧ କ୍ରିୟା ମଧ୍ୟରେ -ପଥମେ ସେ ନିଜେ ନିଜର ଉନ୍ତି କରିବ; ଦୃତୀୟରେ ସେ ଯେଉଁ ଶିଶୁକୁ ଅବୟବ ଦାନ କରୁଛି ତାହା ପତି ମଧ୍ୟ ସଯତ୍ତ ଦୃଷ୍ଟି ଦେବାକୁ ହେବ । ଏକଥା ଧବସତ୍ୟ ସେ ଯେଉଁ ଶିଶୁଟି ଜନ୍ମଗହଣ କରିବାକୁ ଯାଉଛି, ତାହାର ପ୍ରକୃତି ବହୁତ ପରିମାଣରେ ନିର୍ଭର କରିବ ତାକୁ ର୍ପଦାନ କରୁଛି ଯେଉଁ ଜନନୀ ତାହା ଉପରେ, ମା'ର ଆକାଙ୍କା ଓ ସଙ୍କଳ୍ପ ତଥା ଯେଉଁ ଜାଗତିକ ପରିବେଶ ମଧ୍ୟରେ ସେ ବାସ କରେ ତାହା ଉପରେ । ମା'ର ଯେଉଁ ଶିକ୍ଷା ଦରକାର ତାହା ହେଲା: ତାହାର ସମୟ ଭାବନା ହୁଏ ଯେପରି ସର୍ବଦା ସୁନ୍ଦର ଏବଂ ନିର୍ମଳ; ସମୟ ଅନୁଭବ ହୁଏ ଯେପରି ଉତ୍ତମ ଓ ମହତ୍, ଆଉ ଚାରିପାଖରେ ବାହ୍ୟ ପରିବେଶ ଯଥାସୟବ ସୁସମଞ୍ଜସ ଓ ଏକ ମହାନ୍ ସରଳତାରେ ପରିପୂର୍ଣ୍ଣ । ଏସବୁ ସଙ୍ଗରେ ଯଦି ସେ ନିଜର ସର୍ବୋତ୍ତମ ଆଦର୍ଶ ଅନୁସାରେ ଭାବୀ ଶିଶୁଟିକୁ ତିଆରି କରିବା ସକାଶେ ସଚେତନ ଓ ସୁନିର୍ଦ୍ଦିଷ୍ଟ ସମ୍ପର୍କ ରଖିପାରେ, ତାହା ହେଲେ ଶେଷତମ ସୟାବନା ସହ ଶିଶୁଟିର ପୃଥିବୀକୁ ଆସିବା ନିମନ୍ତେ ସର୍ବାପେକ୍ଷା ଅନୁକୂଳ ଅବସ୍ଥା ସୃଷ୍ଟି ହେବ। ଏହାଦ୍ୱାରା କେତେ କଠିନ ପ୍ରେଷ୍ଟା ଓ ନିରର୍ଥକ ଜଟିଳତାର ଅବସାନ ନ ହୁଏ!

... ଅଳ୍ପସଂଖ୍ୟକ ପିତାମାତାଙ୍କୁ ବାଦ୍ ଦେଲେ ଅଧିକାଂଶ ପିତାମାତା ଜାଣନ୍ତି ନାହିଁ ଯେ ସେମାନଙ୍କ ଡୁଟି, ବିଚ୍ୟୁତି, ଚଞ୍ଚଳତା, ଦୁର୍ବଳତା, ଆମ୍ସଂଯମର ଅଭାବ, ସନ୍ତାନମାନଙ୍କ ଉପରେ କିପରି ମାରାମ୍ବ ପ୍ରଭାବ ବିୟାର କରେ । ଯଦି ତୁମେ ତୁମ ସନ୍ତାନମାନଙ୍କଠାରୁ ସନ୍ନାନ ପାଇବାକୁ ଚାହଁ, ତେବେ ନିଜକୁ ସନ୍ନାନୟଦ କରିବାକୁ ଶିଖ, ପ୍ରତି ମୁହୂର୍ତ୍ତରେ ସନ୍ନାନର ଯୋଗ୍ୟ ହୁଅ । କେବେହେଲେ କର୍ତ୍ତ୍ୱପ୍ରୟାସୀ, ସେଚ୍ଛାଚାରୀ, ଅଧୀର, କ୍ରୋଧସଭାବର ହେବ ନାହିଁ । ତୁମର ସନ୍ତାନ ଯେବେ କୌଣସି ପ୍ରଶ୍ନ କରେ ତେବେ ସେ ବୁଝିପାରେ ନାହିଁ ବୋଲି ଏହି ବାହାନାରେ ତାକୁ ନିର୍ବୋଧ ବା ଅର୍ଥହୀନ ଉତ୍ତର ଦେବ ନାହିଁ । ଯଦି ପର୍ଯ୍ୟାପ୍ତ ଶ୍ରମ ଓ କଷ୍ଟ ସୀକାର କରିପାର ତେବେ କୌଣସି ବିଷୟ ବୁଝାଇଦେବା

ଅସୟବ ନୁହେଁ। ସବୁ ସମୟରେ ସତ୍ୟ କହିବା ଉଚିତ ନୁହେଁ ବୋଲି ପ୍ରଚଳିତ ଏକ ଧାରଣାଥିବା ସତ୍ତ୍ୱେ ମୁଁ ଏହା ଦୃଢ଼ତାର ସହ କହିବାକୁ ଚାହେଁ ଯେ ସର୍ବଦା ସତ୍ୟ କହିବା ଉଚିତ । ତେବେ ଏପରି ଭାବରେ କହିବା ନୈର୍ବସ୍ତୁକ ଚିନ୍ତାଧାରା ଏବଂ ବ୍ୟାପକ ସତ୍ୟକୁ ବୁଝିପାରେ ନାହିଁ। ତେବେ ନିର୍ଦ୍ଦିଷ୍ଟ ଉପମା, ପ୍ରତୀକ ଅଥବା ରୂପକ ଆଦିର ସାହାଯ୍ୟ ନେଇ ଯେଉଁ ଭାବରେ ସେ ଏହା ବୁଝିପାରେ ସେହି ଭାବରେ ତାକୁ ଶିକ୍ଷା ଦିଆଯାଇପାରେ ।

... କିନ୍ତୁ କେବେବି ତିରୟାର କର ନାହିଁ, ଦୋଷ ସୀକାର କଲେ କ୍ଷମା କରିବାକୁହିଁ ହେବ । ତୁମେ ଆଉ ତୁମ ସନ୍ତାନର ମଧ୍ୟରେ ଯେପରି ଭୟ ଆସି ପ୍ରବେଶ ନ କରେ । ଭୟର ସାହାଯ୍ୟରେ ଶିକ୍ଷାଦାନ ସର୍ବନାଶ କରେ; ତାହାର ଅନିବାର୍ଯ୍ୟ ଫଳ କପଟ ଆଚରଣ ଓ ମିଥ୍ୟାଚାର । ତୁମ ପିଲାର ଶିକ୍ଷାକୁ ଫଳପ୍ରଦ କରିବାକୁ ହେଲେ ପିଲା ଓ ତୁମ ମଧ୍ୟରେ ଆସ୍ଥା ଓ ବିଶ୍ୱାସର ଏକ ନିବିଡ଼ ସୟନ୍ଧ ରହିବା ନିତାନ୍ତ ଆବଶ୍ୟକ ଏବଂ ଏହି ସୟନ୍ଧ ଗଢ଼ିଉଠେ ଏକ ୟଷ୍ଟଦର୍ଶୀ, ଦୃଢ଼ ଅଥଚ କୋମଳ ଏବଂ ମଧୂର ସ୍ନେହ ଦ୍ୱାରା ତଥା ଯଥାଯଥ ବ୍ୟାବହାରିକ ଜ୍ଞାନ ଦ୍ୱାରା । ଏକଥା କେବେ ବି ଭୁଲି ଯାଅ ନାହିଁ ଯେ ଯେଉଁ ସନ୍ତାନକୁ ପୃଥ୍ବୀକୁ ଆଣିଅଛ, ତାହା ପ୍ରତି ତୁୟର ଯେଉଁ ଦାୟିତ୍ୱ ଓ କର୍ତ୍ତବ୍ୟ ଅଛି ତାହା ପୂର୍ଣ୍ଣ ରୂପେ ଏବଂ ଯଥାର୍ଥ ଭାବରେ ସମ୍ପୂର୍ଣ୍ଣ କରିବା ସକାଶେ ପ୍ରତି ମୁହୂର୍ତ୍ତରେ ନିଜେ ନିଜକୁ ଅତିକ୍ରମ କରିବାକୁ ହେବ ।

(ବୁଲେଟିନ୍, ଫେବୃୟାରୀ ୧୯୫୧)

ଶାରୀରିକ ଶିକ୍ଷା

ସମୟ ଶାରୀରିକ ଶିକ୍ଷା ଆରୟ ହେବା ଉଚିତ ଜନ୍ମର ସଙ୍ଗେ ସଙ୍ଗେ ଏବଂ ତାହା ସମଗ୍ର ଜୀବନବ୍ୟାପୀ ଚାଲିବା ଉଚିତ । ଆରୟ କରିବାକୁ ସମୟ ହୋଇ ନାହିଁ ବୋଲି ବା ଶିକ୍ଷା କରିବାର ସମୟ ଅତୀତ ହୋଇଛି ବୋଲି ଭାବିବା ଉଚିତ ନୁହେଁ। ଶାରୀରିକ ଶିକ୍ଷାର ତିନୋଟି ପଧାନ ଦିଗ ଅଛି:

- ୧. ଶରୀରର ପ୍ରତ୍ୟେକ କ୍ରିୟା ଉପରେ କର୍ତ୍ୱତ୍ୱ ସ୍ଥାପନ ଏବଂ ତାହାର ସୁନିୟନ୍ତ୍ରିତ ଶୃଙ୍ଖଳା।
- ୨. ଶରୀରର ପ୍ରତ୍ୟେକ ଅଂଶର ଏବଂ ସେସବୂର ଗତିବିଧିର ଏକ ସାମଗ୍ରିକ, ପ୍ରଣାଳୀବଦ୍ଧ ଏବଂ ସାମଞ୍ଜସ୍ୟପୂର୍ଣ୍ଣ ପୃଷ୍ଟିସାଧନ।



୩. ଶରୀରରେ କୌଣସି ତୁଟି, ଖୁଣ ବା ବିକୃତି ଥିଲେ ତାହାର ସଂଶୋଧନ l

କୁହାଯାଇ ପାରେ ଯେ ଜନ୍ମର ପ୍ରଥମ କେତେ ଦିନରେ, ଏପରିକି କେତେ ଘଣ୍ଟା ମଧ୍ୟରେ ଶିଶୁ ଶିକ୍ଷାର ପ୍ରଥମ କାର୍ଯ୍ୟସୂଚୀ, ତାହାର ଆହାର, ନିଦ୍ରା, ମଳମୂତ୍ରାଦି ତ୍ୟାଗ ଇତ୍ୟାଦିର ଶିକ୍ଷା ଆରୟ ହେବା ଉଚିତ । ଏକେବାରେ ଆରୟରୁହିଁ ଶିଶୁ ଯଦି ଭଲ ଅଭ୍ୟାସଗୁଡ଼ିକୁ ଆୟଭ କରିନେଇ ପାରେ ତେବେ ସମୟ ଜୀବନରେ ନାନା ଅସୁବିଧା ଏବଂ ବିପଭିର ହାତରୁ ସେ ମୁକ୍ତି ପାଇବ । ଯେଉଁମାନେ ତାହାର ଶୈଶବ ଅବସ୍ଥାରୁ ଏହି ଯତ୍ନ ନେବେ ସେମାନେ ମଧ୍ୟ ଦେଖିବେ ଯେ ପରେ ସେମାନଙ୍କର କାର୍ଯ୍ୟ ଅନେକ ସହଜ ହୋଇଯାଇଛି ।

... ଶୈଶବରୁ ଜାଣିବା ଉଚିତ ଯେ ଆହାର ଗ୍ରହଣ କରାହୁଏ ଶରୀରକୁ ଶକ୍ତି ଏବଂ ସାସ୍ଥ୍ୟ ଦେବା ସକାଶେ, ରସନା-ପରିତୃପ୍ତି ସକାଶେ ନୁହେଁ। ତାହାକୁ ଏପରି ଖାଦ୍ୟ ଦେବାକୁ ହେବ ଯାହା ତାହାର ପ୍ରକୃତିର ଅନୁକୂଳ ଏବଂ ତାହା ଯେପରି ସର୍ବଦା ପରିଷ୍ଟୃତ, ପରିଚ୍ଛନ୍ନ ଓ ସାସ୍ଥ୍ୟରକ୍ଷାର ନିୟମରେ ତିଆରି ହୁଏ, ସୁସାଦୂ ଅଥଚ ଖୁବ୍ ସାଧାସିଧା। ଖାଦ୍ୟର ପ୍ରକାର ଏବଂ ପରିମାଣ ନିର୍ଦ୍ଧାରଣ କରିବାକୁ ହେବ ତାହାର ବୟସ ଏବଂ ଦୈନନ୍ଦିନ କର୍ମ ଅନୁସାରେ, ଏବଂ ଏଥିରେ ଯେପରି ଶରୀରର ସକଳ ଅଙ୍ଗର ପୁଷ୍ଟି ଓ ସାବଲୀଳବୃଦ୍ଧି ସକାଶେ ପ୍ରୟୋଜନୀୟ ରାସାୟନିକ ପଦାର୍ଥ ଏବଂ ସକ୍ରିୟ ଉପାଦାନସବୁ ରହେ ସେଥିପ୍ରତି ଦୃଷ୍ଟି ଦେବାକୁ ହେବ।

... ଆଉ ଗୋଟିଏ ବିଷୟ ଶିଶୁକୁ ପ୍ରଥମରୁ ଶିଖାଇବା ଭଲ: ପରିଷାର-ପରିଚ୍ଛନ୍ନତା ଓ ସାସ୍ଥ୍ୟକର ଅଭ୍ୟାସ ପ୍ରତି ଅନୁରାଗ । କିନ୍ତୁ ତୁମେ ଯଦି ଶିଶୁ ଭିତରେ ପରିଷାର-ପରିଚ୍ଛନ୍ନତା ପ୍ରତି ଏହି ରୁଚି ଜନ୍ନାଇବାକୁ ଏବଂ ସାସ୍ଥ୍ୟରକ୍ଷାର ନିୟମାବଳିପ୍ରତି ଅନୁରାଗ ସୃଷ୍ଟି କରିବାକୁ ଚାହଁ ତେବେ ତାହା କରିବ ଖୁବ୍ ସାବଧାନତାର ସହିତ ଯେ ତା' ଭିତରକୁ ରୋଗଭୟ ଯେପରି ପ୍ରବେଶ ନକରେ ।

... ଅଙ୍ଗପ୍ରତ୍ୟଙ୍ଗ ବ୍ୟବହାର କରିବାକୁ ଶିଖିବା ସଙ୍ଗେ ସଙ୍ଗେ ଶିଶୁ ପକ୍ଷରେ ନିତ୍ୟନିୟମିତ ଭାବରେ ସେଗୂଡ଼ିକୁ ସାଭାବିକ ସଞ୍ଚାଳନ ଦ୍ୱାରା ଗଢ଼ିବା ସକାଶେ କିଛି ସମୟ ଦେବା ଖୁବ୍ ଭଲ । ପ୍ରତିଦିନ ୨୦ ବା ୩୦ ମିନିଟ୍, ନିଦରୁ ଉଠିବା ପରେ ହେଲେ ଭଲ, ଏହିପରି ଭାବରେ ଅଭ୍ୟାସ କଲେ ତାହାର ପେଶୀସକଳର ସାମଞ୍ଜସ୍ୟପୂର୍ଣ୍ଣ ପୁଷ୍ଟି ହୁଏ;...

... ଦୈନନ୍ଦିନ କାର୍ଯ୍ୟ ଯାହା ହେଲେ ମଧ୍ୟ ଶିଶୁର ଯଥେଷ୍ଟ ନିଦ୍। ନିମନ୍ତେ ଆବଶ୍ୟକ ସମୟ ରହିବା ଉଚିତ । କିନ୍ତୁ ବୟସ ଅନୁସାରେ ଏହି ସମୟର ପରିମାଣ କମ୍ ବେଶୀ ହେବ । ଦୁଗ୍ଧପୋଷ୍ୟ ଶିଶୁର ଜାଗୁତ ରହିବା ସମୟଠାରୁ, ନିଦ୍ରାର ସମୟ ଦୀର୍ଘତର ହେବା ଦରକାର। ବୟସର ବୃଦ୍ଧି ସଙ୍ଗେ ସଙ୍ଗେ ଏହି ସମୟ କ୍ରମଶଃ କମ୍ ହେବ । ଯୌବନ ଅବସ୍ଥା ପ୍ରାପ୍ତ ନ ହେବା ପର୍ଯ୍ୟନ୍ତ ନିଦ୍ରାର ସମୟ ଯେପରି ଆଠଘଣ୍ଟାରୁ କମ୍ ନ ହୁଏ । ନିଦ୍ରାର ସ୍ଥାନ ନୀରବ ହେବା ଦରକାର ଏବଂ ସେଠାରେ ମୁକ୍ତ ବାୟୁ ଯାତାୟତ କରିବାର ଉତ୍ତମ ବ୍ୟବସ୍ଥା ରହିବା ଉଚିତ । ଶିଶୁର ରାତ୍ରିର ପ୍ରଥମ ପ୍ରହର ନିଦ୍ରା ଯେପରି ଅକାରଣରେ ବ୍ୟାହତ ନ ହୁଏ । ସ୍ନାୟୁତନ୍ତ୍ରିରସକଳକୁ ବିଶ୍ରାମ ଦେବା ପାଇଁ ମଧ୍ୟରାତ୍ରର ପୂର୍ବ ସମୟ ସବୁଠାରୁ ଉପଯୁକ୍ତ । ଯେଉଁମାନେ ସ୍ନାୟବିକ ସମତା ଏବଂ ସ୍ଥିରତା ଚାହାନ୍ତି ସେମାନଙ୍କୁ ଜାଗ୍ରତ ଅବସ୍ଥାରେ ବି ଦେହକୁ କିପରି ଶିଥିଳ କରିଦେଇ ବିଶ୍ରାମ ନେବାକୁ ହୁଏ ତାହା ଶିଖିବା ଅପରିହାର୍ଯ୍ୟରୂପେ ପ୍ରୟୋଜନ । ପେଶୀ ଏବଂ ସ୍ନାୟୁସକଳକୁ ଢ଼ିଲା ବା ଶିଥିଳ କରିବାକୁ ଜାଣିବା ଏକ କଳାବିଶେଷ । ଅଳ୍ପ ବୟସରୁ ଏହା ଶିଶୁମାନଙ୍କୁ ଶିଖାଇଲେ ଭଲ ହୁଏ । କିନ୍ତୁ ଏପରି ପିତାମାତା ବି ଅଛନ୍ତି ଯେଉଁମାନେ ପିଲାମାନଙ୍କୁ ନିରନ୍ତର ସକ୍ରିୟ ରଖନ୍ତି, ଯେତେବେଳେ ସେମାନେ ଶାନ୍ତ ଭାବରେ ଥାଆନ୍ତି, ସେତେବେଳେ ସେମାନେ ମନେକରନ୍ତି ଯେ ପିଲା ଅସୁସୁ ହୋଇଛି । ଆଉ ଏପରି ପିତାମାତା ବି ଅଛନ୍ତି, ଯେଉଁମାନେ ସନ୍ତାନମାନଙ୍କର ବିଶାମ ଓ ଢ଼ିଲା ଭାବରେ ଆରାମ କରିବା ସମୟକୁ ନଷ୍ଟ କରି ସେମାନଙ୍କ ଦ୍ୱାରା ଘରର କାମ କରାନ୍ତି ।

... ମୁଁ କହୁଛି ଯେ ଅକ୍ସ ବୟସରୁ ସାସ୍ତ୍ୟୁ, ସାମର୍ଥ୍ୟ ଓ ସୁସଙ୍ଗତି ପ୍ରତି ଶିଶୁମାନଙ୍କର ଶ୍ରଦ୍ଧା ଜାଗ୍ରତ୍ କରିଦେବା ଉଚିତ । ସୌନ୍ଦର୍ଯ୍ୟ ଉପରେ ଅଧିକ ଗୁରୁତ୍ୱ ଦିଆଯିବା ଉଚିତ ।

ପ୍ରାଣିକ ଶିକ୍ଷା

... ଶିଶୁର ପ୍ରାଣ-ୟରର ଶିକ୍ଷା ଯଥାସୟବ ଶୀଘ୍ର ଆରୟ କରିବା ପ୍ରୟୋଜନ; ବୟୁତଃ ଯେବେ ସେ ଇନ୍ଦ୍ରିୟ ପରିଚାଳନା କରିବାକୁ ଶିଖୁଥାଏ ସେହି ସଙ୍ଗେ ସଙ୍ଗେ ସେହି ଶିକ୍ଷା ଆରୟ ହେବା ଉଚିତ । ଏହାଫଳରେ ସେ ବହୁତ କୁଅଭ୍ୟାସରୁ ରକ୍ଷା ପାଇବ, ବହୁତ କ୍ଷତିକର ପ୍ରଭାବ ବର୍ଜନ କରିପାରିବ ।

ପ୍ରାଣିକ ଶିକ୍ଷାର ଦୁଇଟି ପ୍ରଧାନ ଦିଗ ଅଛି। ଦୁଇଟିର ପଦ୍ଧତି ଏବଂ ଲକ୍ଷ୍ୟରେ ବହୁତ ପାର୍ଥକ୍ୟ ଅଛି, କିନ୍ତୁ ଉଭୟହିଁ



ସମାନ ମୂଲ୍ୟବାନ୍ । ପ୍ରଥମଟି ହେଲା ଇନ୍ଦ୍ରିୟଗୂଡ଼ିକର ପୁଷ୍ଟିସାଧନ ଏବଂ ବ୍ୟବହାର; ଦ୍ୱିତୀୟଟି ହେଲା ନିଜର ପ୍ରକୃତି ସମ୍ବନ୍ଧରେ ଜ୍ଞାନ ଏବଂ କ୍ରମଶଃ ତାହା ଉପରେ କର୍ତ୍ତୃତ୍ୱ ଅର୍ଜନ, ଶେଷରେ ତାହାର ରୂପାନ୍ତର-ସାଧନ।

...ଯେତେବେଳେ ପର୍ଯ୍ୟବେକ୍ଷଣ-ଶକ୍ତିର ବୃଦ୍ଧି ସଙ୍ଗେ ସାସିବ କୁମୋନ୍ନତି ଏବଂ ପରିପୂର୍ଣ୍ଣତାଲାଭର ଦୃଢ଼ସଙ୍କଳ୍ପ । ଯେତେବେଳେ ଶିଶୁର ଉପଯୁକ୍ତ ବୟସ ହୋଇଛି ତାକୁ ଏହି ସଙ୍କଳ୍ପ ଶିଖାଇବାକୁ ହେବ । ସାଧାରଣତଃ ଯେଉଁ ବୟସକୁ ଏଥି ନିମନ୍ତେ ଉପଯୁକ୍ତ ବୋଲି ବିଚାର କରାଯାଇଥାଏ ତାହାର ଅନେକ ଆଗରୁ ଅର୍ଥାତ୍ ଖୁବ୍ କମ୍ ବୟସରୁ ଶିଶୁକୁ ଏହି ଶିକ୍ଷା ଦେବାକୁ ହେବ ।

ମାନସିକ ଶିକ୍ଷା

ଏକଥା ଅସୀକାର କରିହେବ ନାହିଁ ଯେ ଶିଶୁର ମାନସିକ ଉନ୍ନତିର ସବୁଠାରୁ ପ୍ରଧାନ ବାଧା ହେଲା, ତାହାର ଚିଡା ନିରନ୍ତର ବିକ୍ଷିପ୍ତ ହେବା । ତାହାର ବିଚାର ପ୍ରକାପତି ପରି ଏଠି ସେଠି ଉଡିବୁଲେ, ତାକୁ ଏକାଗ୍ର କରିବାକୁ ହେଲେ ବିପୁଳ ପ୍ରୟାସର ପ୍ରୟୋଜନ । ... ଏହି ମନୋଯୋଗ ବଢ଼ାଇବାର କ୍ଷମତାକୁ ବିକଶିତ କରୁଥିବା ସମୟ ପଦ୍ଧତିହାଁ ଉପାଦେୟ ।... କିନ୍ତୁ ସବୁଠାରୁ ଗରୁତ୍ୱପୂର୍ଣ୍ଣ ହେଉଛି ମନୟାଭ୍ୱିକ ପଦ୍ଧତି, ସର୍ବୋଉମ ଉପାୟ ହେଉଛି ଯେଉଁ ଜିନିଷଟି ଶିକ୍ଷାଦେବାକୁ ହେବ ସେଥିରେ ଶିଶୁର ରୁଚି ଜାଗ୍ରତ କରାଇବା, ଯେଉଁଥିରେ ଆସେ କାର୍ଯ୍ୟପ୍ରତି ଆକର୍ଷଣ ଓ ଉନ୍ନତି ସକାଶେ ଦୃଢ଼ ସଙ୍କଳ୍ପ । ଶିକ୍ଷା ପ୍ରତି ଅନୁରାଗ ଯଦି ଶିଶୁକୁ ଦେଇପାର, ତେବେ ତାହାହିଁ ହେଲା ଶ୍ରେଷ ଦାନ । ସେ ଯେପରି ସର୍ବଦା ଆଉ ସର୍ବତ୍ର ଶିକ୍ଷାପ୍ରାପ୍ତ ହେବାକୁ ଅନୁରାଗ ରଖେ । ଜୀବନର ସକଳ ଅବସ୍ଥା, ସକଳ ଘଟଣା ଯେପରି ନିରନ୍ତର ହୁଏ ଅଧିକରୁ ଅଧିକତର ଶିକ୍ଷାଲାଭ କରିବାର ସୁଯୋଗ ।

ଚୈତ୍ୟ ଓ ଆଧାମିକ ଶିକ୍ଷା

ପ୍ରତ୍ୟେକ ମନୁଷ୍ୟ ତା' ନିଜ ମଧ୍ୟରେ ତା'ର ସାଧାରଣ ଚେତନାର ଉର୍ଦ୍ଧ୍ୱରେ ଏକ ବହଉର ଚେତନାର ସୟାବନାକୁ ଧାରଣ କରି ଚାଲୁଛି ଏବଂ ଏହି ଚେତନାର ମାଧ୍ୟମରେ ସେ ଏକ ବିଶାଳତର ମହଉର ଜୀବନରେ ପହଞ୍ଚୂପାରେ । ବସ୍ତୁତଃ, ପ୍ରତ୍ୟେକ ଅସାଧାରଣ ବ୍ୟକ୍ତିଙ୍କ ମଧ୍ୟରେ ଏହି ଚେତନା ସବୁ ସମୟରେ ତାଙ୍କ ଜୀବନର ସକଳ ପାରିପାର୍ଶ୍ୱିକ ଘଟଣା ଏବଂ ବ୍ୟକ୍ତିଗତ ପକ୍ରିୟାଗୁଡ଼ିକୁ ନିୟମନ କରେ ଏବଂ ସଙ୍ଗଠିତ କରେ। ମନୁଷ୍ୟର ମାନସ ଚେତନା ଯାହା ଜାଣେ ନାହିଁ ଏବଂ କରିପାରେ ନାହିଁ, ଏହି ଚେତନା ତାହା ଜାଣେ ଏବଂ କରେ । ଏହା ଏକ ଆଲୋକ ତୃଲ୍ୟ ଯାହା ସଭାର କେନ୍ଦ୍ରସ୍କରେ ଜଳୁଛି ଏବଂ ବାହ୍ୟ ଚେତନାର ଘନ ଆବରଣକୁ ଭେଦ କରି ପ୍ରକାଶିତ ହୁଏ । ଏହାର ଅଞ୍ଚିତ୍ୱ ସମ୍ଭନ୍ଧରେ କାହାରି କାହାରି ଗୋଟାଏ ଅସ୍କଷ୍ଟ ଧାରଣା ଅଛି । ବହୁ ଶିଶୁ ଏହାର ପୂଭାବରେ ପରିଚାଳିତ ହୁଅନ୍ତି ଏବଂ ଅନେକ ସମୟରେ ସେମାନଙ୍କର ସତଃଷ୍ଟର୍ଭ ପ୍ରତିକ୍ରିୟାରେ ଏବଂ ଏପରିକି ସେମାନଙ୍କ କଥାବାର୍ତ୍ତାରେ ଏହା ଅତି ସଷ୍ଟରୂପେ ପ୍ରକାଶିତ ହେବାର ଦେଖାଯାଏ। ଦୁଃଖର ବିଷୟ ଅଧିକାଂଶ ପିତାମାତା ଏହି ବିଷୟରେ ସମ୍ପର୍ଣ୍ଣ ଅଜ୍ଞ ଏବଂ ସେମାନଙ୍କ ସନ୍ତାନ ମଧ୍ୟରେ କ'ଶ ଘଟୁଛି କିଛି ବି ବୁଝି ପାରନ୍ତି ନାହିଁ । ସେଥି ପାଇଁ ସେମାନେ ଏହିସବୁ ଘଟଣା ଦେଖି ବିଶେଷ ଖୁସି ହୁଅନ୍ତି ନାହିଁ ଆଉ ସେମାନେ ଯେଉଁ ଶିକ୍ଷା ଶିଶୁକୁ ଦିଅନ୍ତି, ସେଥିରେ ଏ ବିଷୟରେ ଶିଶୁକୁ ଯଥାସୟବ ଅଜ୍ଞ ରଖନ୍ତି: ଶିଶୁର ସମୟ ଦୃଷ୍ଟିକୁ ବାହ୍ୟ ବସ୍ତୁ ଉପରେ ନିବଦ୍ଧ କରାନ୍ତି ଯଦ୍ୱାରା ଶିଶୁ ଭାବେ ଯେ ଏହି ବାହ୍ୟ ବସ୍ତୁହିଁ ସବୁଠାରୁ ମହଭୃପୂର୍ଣ୍ତ ।



Victory is good health. Each and every ailment, each and every illness is a falsehood.

(11/272)

- The Mother





Living Within

Dr. A.S. Dalal Sri Aurobindo Ashram, Pondicherry

I have been asked to make a presentation on "Living Within", which is the title of one of my compilations. My aim is to explain what is meant in our yoga by living within, and indicate some practical ways of converting a mental understanding of living within into a living part of one's inner consciousness.

The meaning of living within can be better understood by first understanding the meaning of its opposite, that is, living outwardly, which is the state in which most people live most of the time., and is therefore easier to understand.

The Mother explains living outwardly in these words: "People are occupied with outward things. That means that the consciousness is turned towards external things-that is, all the things of life which one sees, knows, doesinstead of being turned inwards in order to find the deeper truth, the divine Presence.... You are busy with all that you do, with the people around you, the things you use; and then with life: sleeping, eating, talking, working a little, having a little fun also; and then beginning over again: sleeping, eating, etc., etc., and then it begins again. And then what this one has said, what that one has done, what one ought to do, the lesson one ought to learn, the exercise one ought to prepare; and then again whether one is keeping well, whether one is feeling fit, etc.

"This is what one usually thinks about."

To live in such a way, occupied with outer things, is to live on the surface of one's being. "Almost totally", she says, "everybody lives on the surface, all the time, all the time on

the surface. And for them it's even the only thing which exists-the surface. And when something compels them to draw back from the surface, some people feel that they are falling into a hole. There are people who, if they are drawn back from the surface, suddenly feel that they are crumbling down into an abyss, so unconscious they are!

"They are conscious only of a kind of small thin crust which is all that they know of themselves and things and the world, and it is so thin a crust!"

The Mother says something quite striking about this living on the surface of one's being. She says: "One throws oneself out all the time; all the time one lives, as it were, outside oneself, in such a superficial sensation that it is almost as though one were outside oneself. As soon as one wants even to observe oneself a little, control oneself a little, simply know what is happening, one is always obliged to draw back or pull towards oneself, to pull inwards something which is constantly like that, on the surface. And it is this surface thing which meets all external contacts, puts you in touch with similar vibrations coming from others. That happens almost outside you."

The striking thing that the Mother says here is that to live on the surface of one's being is to live outside oneself. Therefore, to live within oneself involves a complete reversal of consciousness. As she says, " ... to live the spiritual life is to open to another world within oneself. It is to reverse one's consciousness, as it were. The ordinary human consciousness,



even in the most developed, even in men of great talent and great realisation, is a movement turned outwards-all the energies are directed outwards, the whole consciousness is spread outwards; and if anything is turned inwards, it is very little, very rare, very fragmentary, it happens only under the pressure of very special circumstances, violent shocks, the shocks life gives precisely with the intention of slightly reversing this movement of exteriorisation of the consc10usness.

"But all who have lived a spiritual life have had the same experience: all of a sudden something in their being has been reversed, so to speak, has been turned suddenly and sometimes completely inwards."

In order to bring about consciously this reversal of consciousness in oneself, the Mother says, " ... the first movement-and it is not so easy-is to make all that [that is, the total occupation with outward things] pass to the background, and let one thing come inside and in front of the consciousness as the important thing: the discovery of the very purpose of existence and life, to learn what one is, why one lives, and what there is behind all this. This is the first step: to be interested more in the cause and goal than in the manifestation. That is, the first movement is a withdrawal of the consciousness from this total identification with outward and apparent things, and a kind of inward concentration on what one wants to discover, the Truth one wants to discover."

The key-words in the passage are "inward concentration". In order to highlight the keywords, I will repeat some of her words. She says, "the first movement is a withdrawal of the consciousness from this total identification with outward and apparent things, and a kind of inward concentration on what one wants to discover".

It is difficult to explain this state of "inward concentration" spoken of by the Mother because it is something to be felt or experienced in order to be understood.

There are, however three characteristics of inward concentration by which it may be inwardly recognised. The first characteristic of inward concentration is that it is a calm state, unlike the ordinary state which is continually more or less restless, because it is governed mostly by the insatiable vital being or desire nature.

The second characteristic of the inward concentration is that it is an ingathered and quiet state, unlike the ordinary state of the mind, which is dispersed and easily distracted when it is not occupied with a particular task requiring concentration.

The third characteristic of inward concentration is that it is a state of living in the present moment. To put it simply, living in the present moment is doing one thing at a time with full attention. Expressed more profoundly in the Mother's words, it is "to live to the utmost of one's capacities at every minute, without planning or wanting, waiting or preparing for the next."

Regarding the almost universal tendency of being always eager to go on to the next thing, the Mother remarks: "We-I mean men-live harassed lives. It is a kind of half- awareness of the shortness of their lives; they do not think of it, but they feel it half- consciously. And so they are always wanting-quick, quick, quick-to rush from one thing to another, to do one thing quickly and move on to the next one, instead of letting each thing live in its own eternity. They are always wanting: forward, forward, forward And the work is spoilt.

"That is why some people have preached: the only moment that matters is the



present moment. In practice it is not true, but from the psychological point of view it ought to be true. That is to say, to live to the utmost of one's capacities at every minute, without planning or wanting, waiting or preparing for the next. Because you are always hurrying, hurrying, hurrying.... And nothing you do is good. You are in a state of inner tension which is completely false-completely false." This kind of "hurry sickness", as it can be called, has been regarded as one of the significant factors in heart disease and high blood pressure.

To sum up, the three characteristics of inward concentration just described are calmness of the vital being, quietude of the mind, and living in the present moment. The Mother says that it is more important to remain in this state of inward concentration throughout the day than to have fixed hours of meditation.

The practice of continual inward concentration leads progressively to a separation between the outer and the inner beings. In the ordinary consciousness, the inner being is identified and at one with the outer being, which consists of the body, the vital being and the mind. So the inner being feels and acts as if it were nothing but the body, the vital being and the mind. As a result of the separation which subsequently takes place in one's consciousness, one is able to distinguish among the different sources of one's movements.

One knows which movements come from the body-consciousness, which come from the vital, and which come from the mind. A kind of division between the outer and the inner beings, a duplication of oneself, so to say, begins to take place. This process of separation between the outer and inner beings can be aided by the practice of standing back. Sri Aurobindo explains that "To stand back means to become a witness of one's own mind and speech, to see them as something separate from oneself and not identify

oneself with them. Watching them as a witness, separate from them, one gets to know what they are, how they act and then put a control over them, reject what one does not approve and think and speak only what one feels to be true. This cannot, of course, be done all at once. It takes time to establish this attitude of separateness, still more time to establish the control. But it can be done by practice and persistence."

By standing back, one becomes detached from one's outer being instead of being identified with it. One feels as if one is living in two separate worlds, the outer and the inner. As one goes more inward, one lives more and more inwardly, unlike the initial state of living outwardly. Thus there is a reversal of consciousness.

The final stage is a fusion of the outer and the inner beings into one, the outer becoming an instrument of the inner. The entire process which starts with an identification of the inner being with the outer, going next through a separation between the two beings, and culminating in a fusion of the two beings into one, is described by Sri Aurobindo in these words: "A time must come for every seeker of complete self-knowledge when he is thus aware of living in two worlds, two consciousnesses at the same time, two parts of the same existence. At present he lives in the outer self, but he will go more and more inward, till the position is reversed and he lives within in this new inner consciousness, inner self and feels the outer as something on the surface formed as an instrumental personality for the inner's selfexpression in the material world. Then from within a Power works on the outer to make it a conscious plastic instrument so that finally the inner and the outer may become fused into one."

I will now read out a passage in which Sri Aurobindo writes about living within in the



context of the entire process of sadhana in which, beginning with the state of Ignorance, eventuates in the attainment of the supramental Truth-Consciousness.

Sri Aurobindo writes:

"Man lives mostly in his surface mind, life and body but there is an inner being within him with greater possibilities to which he has to awake-for it is only a very restricted influence from it that he receives now and that pushes him to a constant pursuit of a greater beauty, harmony, power and knowledge. The first process of Yoga is therefore to open the ranges of this inner being and to live from there outward, governing his outward life by an inner light and force. In doing so he discovers in himself his true soul which is not this outer mixture of mental, vital and physical elements but something of the Reality behind them, a spark from the one Divine Fire. He has to learn to live in his soul and purify and orientate by its drive towards the Truth the rest of the nature. There can follow afterwards an opening upward and descent of a higher principle of the Being. But even then it is not at once the full supramental Light and Force. For there are several ranges of consciousness between the ordinary human mind and the supramental Truth-consciousness. These intervening ranges have to be opened up and their power brought down into the mind, life and body. Only afterwards can the full power of the Truth-consciousness work in the nature. The process of this self-discipline or sadhana is therefore long and difficult, but even a little of it is so much gained because it makes the ultimate release and perfection more possible."

I will conclude with three recommendations: The first recommendation is for reading or listening to the teachings

repeatedly over a period of time. The teachings of the Integral Yoga are very profound and require repeated reflection in order to be progressively better understood and assimilated. For this to happen a stretch of time is needed.

The second recommendation has been given by the Mother. It is about putting into practice the little that one has already learnt instead of accumulating more theoretical knowledge. She says: "To put into practice the little you know is the best way to learn more; it is the most powerful means of advancing on the way."

It is practice that transforms the mental understanding into a living and dynam ic part of one's consciousness capable of bringing about a change in one's thought, feeling, and action.

In a passage quoted earlier, Sri Aurobindo has stated that the self-discipline of sadhana is long and difficult. Therefore, the third recommendation I would like to make is to arm oneself with certain indispensable attitudes and qualities in practising sadhana. The most important quality is an indomitable will to follow the path to the very end without giving up the effort despite all difficulties, setbacks and disappointments on the way. When faced with a failure one should remember the Mother's exhortation and say to oneself her words, "It's all right. Good, I shall begin again as often as necessary; a thousand times, ten thousand times, a hundred thousand times if necessary, I shall begin again-but I shall go to the end and nothing will have the power to stop me on the way."

One needs to take courage from the words of the Mother who has reassuringly said, "if the will is in you, it is absolutely certain that now or later you will succeed."





Womb of the future

Dr. Alok Pandey

The new children are coming we were told... The new children are coming we can see...

These children do not carry with them the burden of the past. They are, so to say, free from many prejudices that we, as humans suckled with our mother's milk. These are not only prejudices of race and colour and caste and system, or prejudices of custom and tradition and our religious and secular beliefs but also the prejudices of what can be and what cannot be, what should be and what should not be! Not only are they free from many physical barriers to which mankind was accustomed but also social, moral and psychological boundaries that defined human being, at least a reasonable human being.

This breaking of boundaries has, on the one side, led to a collapse of the whole neat and orderly fabric of human life. So there is a chaos everywhere. On the other side, in this very chaos, if one looks deep into its heart with a steady gaze untroubled by appearances, one can see the first stirrings of a new life, a life so completely different from our 'sense of the human' that one may well be tempted to say that a new species is arising in our midst, — at least a new being with a new mind and heart and even a new life-force even though physically human in appearance. We can sense it in the 'wideness' of the heart and the 'subtlety' of thought that these children bring with them. They are spontaneously endowed with an intuition of the universal and in many ways even the impersonal. They are open to new things and are in sync with the sense of unity and freedom.

They do not for example cut life into two bits, — the spiritual and the material but unite them beautifully, often almost effortlessly. They do not need to go to the temples and churches, those old, now crumbling institutions that man had constructed to keep a place for God in his life. These places whose original purpose was to keep alive the memory of the seeking of something Beyond all that we know of or sense and feel; to get into relation with it; to subordinate the smaller, the lesser, the narrower in us to That which is vaster, higher, larger. That too we see happening, in degrees though. These children live naturally in large inner psychological spaces. They cry for freedom, they are in sync with the sense of a global unity, but they also carry the respect for each other's difference.

In other words, they are non-conformists. The old world was built of a certain fixed patterns and fixed types and a fixed social order, the new type in more fluid than fixed. Least of all would they conform to an external rule or law. They follow their own inner subjective sense of what should not be done. This may seem, and in certain ways can be dangerous, yet it is an inevitable passage to the greater, the vaster, the richer law of Self. Many may, in this process fall into the trap of the lower vital self, become a prey to its animal the lower impulse for the divine impulsion, the spontaneity of the animal for the spontaneity of the spiritual intuitive. But those who will pass through, — and this is a test of readiness as well, are those who will emerge much stranger, freer, vaster than any



that one knew in the past. The rest were possibly not ready!

The new type is not a fixed type. It is a consciousness that is not only vaster but also freer and flexible that reconciles what was so far regarded as opposites. The past type was moulded in a fixed groove with limited possibilities. Of course, one could arrive at the highest quality of this limited possibility, — if one wished and laboured. One was either a man of wisdom, or a man of courage and valour; or one who engaged himself deftly in world commerce, or one with great practical skills and power of detailed observation and patient labour in the field of outer life. Each was true but also fixed to his type. Even the roles were fixed to a point of rigidity. And since all rigidity is counterevolutionary, Nature had to break it and so has it done, 34 broken the mould of the past to facilitate the emergence of the future.

The highest type of mould of the past was the rational man who thought and planned things gathering as much data and information through his senses and of the objective world around him. His concern was primarily to gain knowledge about his objective world, ¾ his body and other bodies. This knowledge led to the development of the various sciences. It is only now that man is seriously trying to probe the subjective side of his life, which he yet considers secondary and subordinate to the other. One could almost say, half-humorously but true that the subject's subject to the object and the object is the object of the subject?!

Be it as it may, the future type will surpass reason as completely as man today surpasses the animal instincts. The phenomenon of genius and child prodigies, a multi-tasking intelligence, a such more flexible and internally regulated social sense are the first glimmers. Also there is now the increasing natural possession of

Inspiration and intuition which will become more and more perfect with time. The neat world of a rational order that had drawn lines of symmetry by shutting out the free Infinite is collapsing. And on its rubbles and ruin a New World is building itself up, in and through these children of the future.

Another thing we see developing is the subtle sense and the subjective side of life. Less than a century ago, the sense of "I" was derived largely from the family, customs, group-life etc. In other words this "I" was determined and shaped largely by the forces outside us, ¾ my parents, my culture, my society, my language, my lineage, at most my country or my religion.

One was identified with that, one spontaneously accepted and introjected that and formed a sense of "I" based on these forces. This "I" was the result of a blind conformism. In other words, we were still like little animals, part of a pack or a herd. My "I" had no separate existence no other will but to follow the rest of "my kind". Even now many are like that. But a sizeable proportion, and in increasing numbers is beginning to come out of this "collective swoon" or the "mass mentality" and beginning to see, feel, think, decide, choose for themselves, even if (and often it does) it contradicts the norms and thoughts of the group. This "independent, individual type" regarded as the black sheep and the rebel is now becoming more and more common, a 'norm' rather than an anomaly. True, this new-found individuality looks dangerous to the old world yet this is a necessary passage for the evolutionary Force striving to create a new type.

This new subjective "I" won after such a long and patient labour of Nature means that after much effort Nature has been able to individualise and crystallise the universal states



of consciousness. We are no more just a collective convention or a group-mind, no more just a cell that is part of the group-body. That is part of our secondary and extended identity. Our true identity is intrinsic and we have a mind of our own. I decide for myself, not someone else. This crystallisation, some may say is an illusion for every movement of Nature is universal, the sense of uniqueness comes only by the degree and intensity, by the relative stress of one over another, by the varying combinations. This may or may not be true. There may have formed, very likely has developed, through the process of a difficult and complicated evolution, mould of an inner being that may determine rather than be determined by outer events, forces and circumstances. Many of today's children seem to be born with these moulds that they try to express in life and action.

But most are still only partially conscious of this inner being that itself is many-layered, many-hued and many-sided. But before we return to this, let us see what are the advantages of this. By separating the individual mould from the group, Nature has created the possibility of a rapid evolution. For the individual, now free of the chains and shackles of the collective, can spearhead the evolutionary journey and move faster. He can, with a greater ease, break free from the limits set for the human type by Nature herself, 34 the limits of thought, the limits of feelings, the limits of will and endeavour 'normal' and 'proper' to man. The individual is less hypnotized by the collective past experience and habits that chain us and restrain from venturing into fresh and new grounds. Of course these fresh and new grounds may not always be the beautiful territories. The human consciousness moves within certain limits fixed by Nature and except for the 'freak', the 'supernormal' or the 'abnormal' these limits keep us safe. It keeps us at a safe distance from the eye of the cosmic

forces and powers and beings, ¾ the titans and the gods. The outer consciousness restricts and limits us. But the inner being can more easily open the flood-gates to this greater influx. As a result we are more likely to witness on the one side an increase in the number of child prodigies and born-geniuses. On the other side, we may well see an increase in the number of madness, a free play of the orgies of forbidden pleasures. There are of course deeper reasons for this as well, but to these we can turn later.

An individual being fronting a vast, unknown world with all its forces and energies, this is the figure of the new child that Nature is intending to create. He is an individual type, unique unto himself, not a byproduct of society and its stereotype. The new type will have a very different sense of the personality. To begin with as we have said it will not be one of the fixed stereotype moulds in which one could slot the old humanity, \% the knowledge oriented, the knights and warriors, the pioneer of industry and commerce, the man of the soil and the labourer. These were like little classrooms for the human soul to grow in a nursery as it were. But the new consciousness can not be this cabined inn a small and limited fortress. It is seeking children who have already graduated through the long complex schooling of Nature in sojourn through many a lives. Such children embody a much more complex and wider thought and cannot be satisfied with narrow moulds and fixed stereotypes. They have, no doubt, a much more difficult task to achieve given their complexity, but the synthesis they would arrive at is far more richer and complete. They conscious simultaneously on the material, vital, sensational, emotional and intellectual and the spiritual domains and feel the great urge to integrate them. It is no easy task and that is why some of them appear as drifters or suffer



from lack of motivations or simply revolt. All these are the various reactions of their consciousness to find the 'right place', ¾ a task by no means easy since society and all its institutions are still built on the old pattern. This creates a great friction and unease and calls for a double and difficult adjustment, within and without. Some simply refuse the work and not caring for the world around, cut themselves off from it, like the wandering sadhus of old and become lone drifters of life. Others still do not find anything in the old patterns of the existing social institutions and structures of life to attract and involve them. So they become easily demotivated. lose interest and sometimes end up with drugs in a wrongly.

* * *

The problem becomes still more complex when we understand that in addition to the existing five foundations of human life, viz., 34 the physical vital, mental, psychic and spiritual, ¾ a new element, the supramental is introduced in the earth atmosphere and the very fact that we live in this age we breathe this new element, this new power of consciousness. In a way, this has upset the old balance, if even there was. For man, by his very nature is a being of transition who could never completely find the perfect 'inner or outer balance'. He has in the course of development increasingly isolated himself more and more, from the large majority of animal life, and later even from his own types breaking into further groups and subgroups, till at last he could achieve the final isolation, 34 the maximum possible separation, of the lonely individual cut off from the rest. He has also cut himself off from a natural and spontaneous harmony with universal nature and seeks to recreate his own private environment. All this points towards something, 34 that man has the possibility and capacity to follow an individual pace that can go faster than universal nature

and seeks to create his own private environment. All this points towards something, ¾ that man has the possibility and the capacity to follow an individual pace that can go faster than universal nature. But this itself creates a new difficulty for man that he becomes maladjusted within his own type.

In fact the majority of humanity is yet to reach even the proper development of the mind. Most are unaware of the psychic and the spiritual though they are time and again prompted by it. Now all this mass of humanity, individually and collectively has to adapt to this 'new element', this 'new consciousness'. The whole stress of education must therefore change and change fast, to allow for the readiness of the different layers of humanity to open and integrate with this New Evolutionary current that is actively at work with an increasing force.

* * *

The stress of education has to change in the direction of the evolutionary pressure. So far the stress has been to equip human beings with the knowledge base so that they can:

- (i). Improve their chances of survival.
- (ii). Maximize the efflorescence of their human capacities, albeit within the limits of our human possibilities.

But the New Thought brings a new word and tells us that evolution, not mere survival is the real key; growth and progress, not mere pleasure and comfort is the real need; that the human limits are merely habits of nature and that the possibilities of enhancing the quality and scope of our consciousness is potentially unlimited. And all that we do, our job, our relationships, our experiences with others in work and in play, in studies and in silence are a means towards that great end intended by Nature. Thus seen, not only the scope and field but the very nature and means of education will



change. To begin with, it would mean that the whole of life, from the conception in the womb to the restful sleep in the tomb becomes an unending education.

Second, the whole world around us, the world we inhabit and the worlds we create become a subject of this universal education. The most important subject of this study will be man himself. The object will be not to perpetuate man as he is at present, a creature often no better than an intelligent animal, but that which man can become, - the man divine. Finally, the method of this education will be to use all events, circumstances and experience as a means to become more conscious, to expand the horizons of thought and feeling, to grow and progress in every sphere but most of all inwardly and spiritually. For this is the root from which all else derives.

Naturally, from the realistic point of view not all are ready for this kind of education. Therefore there can be a three-tiered education program. One, for the general mass of humanity where the seed of a future humanity must be sown as an idea and the nature of man prepared for this distant possibility. Next there should be transition schools for children in whom the impulse to evolve has been quickened if not conscious. These children are increasing by the day and are characterized by certain clear elements in their nature, - the rejection or revolt against authority, the intolerance towards hypocrisy, unconventional in outlook, freer in thought and non-conformist but not necessarily

licentious, large-hearted, large-spirited, but choose their 'family' for themselves from the larger global world, have an acute sense of justice and truth and react against falsehood, care and respect for authenticity and excellence but not for authority, among other things. These can be picked up for transition schools. Finally, for those in whom the impulse to evolve has become conscious enough, the whole concept of school, classroom etc must be replaced by a free learning and a free progress based on freedom of choices, subjects and teachers. Such children are pioneers and adventurers and must find their way through the present confusion just as in far back times humanity found its way through the dark and dangerous swamps and wilds. That it is a tough task is true but then this is the path od evolutionary challenge. The greater truth is that the evolutionary impulse has at its core a deep wisdom, a profound Love, an unparalleled power and will assist those who are ready for the adventure and the great plunge, - our human success and human failure notwithstanding. It is the hour to be heroic and those who are willing and ready the human animal in themselves will surely find the divine humanity.

This is the promise of the Future to those who are strong to bear evolutionary pressure and endure the rigors of the way. For He who guides it none else but the great charioteer who is ever engaged in carrying the marc of civilization forward, ever forward; higher, even higher. He does not fail.



Souvenir 2023 THE NEW CHILDHOOD



Nurturing Divine Beings: Consciousness Approach to Parenting

Dr. Yogesh Mohan

Introduction

Parenting is a sacred ourney that shapes not only the lives of our children but also our own. We may aspire to bring up our children in a conscious manner, however the key question that shapes all our behaviour is- To whom does your child truly belong? This query delves into the very core of our beliefs and attitudes towards parenting. In this article, we will explore the transformative power of shifting our perspective, acknowledging that our children do not belong to us, but are divine beings with their own unique paths and purpose. We will realise that embracing consciousness in the way we raise our children not only enriches their lives but also brings unparalleled happiness and satisfaction to our own as parents.

The Paradigm Shift

Picture this: one day - you suddenly realise that your children don't just belong to you; they are Divine Beings on a unique journey, entrusted to your care. This simple yet profound shift in perspective sets the stage for a parenting experience like no other. It's a shift from seeing your children as extensions of yourself to recognising their individuality, purpose, and their connection to the greater universe. This takes you into a realm of conscious parenting, where every interaction and decision is guided by the understanding that you are nurturing a soul's growth.

The Journey of Conscious Parenting Unconditional Love and Acceptance:

When you perceive your children as Divine Beings, your love transcends the boundaries of attachment and expectation. You love them for who they are, not for who you want them to become. This unconditional love becomes a nurturing force that fosters self-esteem and a

sense of security, empowering them to embrace their uniqueness.

Trusting and Allowing Growth

When you acknowledge that your children belong to the Divine, you inherently trust their journey. The need to possess or control them diminishes, paving the way for them to flourish authentically. Your role transitions from a director to a facilitator, creating an environment that encourages their natural growth. You create space for them to explore and embrace their individuality.

Freedom to dream and explore:

Conscious parenting involves allowing your children the freedom to explore their interests, dreams, and beliefs. You understand that their paths are distinct from yours, and their journey is one of self-discovery. By providing an environment where they can explore without fear of judgment or reprimand, you empower them to make choices that resonate with their true selves.

Guiding, Not Imposing:

Instead of imposing your beliefs onto your children, you become a guiding light. You encourage them to question, explore, and form their own perspectives. This not only enhances their critical thinking skills but also nurtures their capacity to make informed decisions in the future.

Patience and trust:

Recognising your children's connection to the Divine fosters immense patience. You understand that growth is a gradual process, and you're content with being a steady presence in their lives. This patience extends to your interactions, allowing for deeper connections and meaningful conversations.



Protection and Nurturing:

The conscious approach to parenting encourages creating a nurturing environment that safeguards your children's well-being - not just physically, but emotionally and spiritually as well. You actively shield them from negativity and provide a sanctuary in which their souls can thrive.

Nurturing Holistic Development

As conscious parents, you are dedicated to nurturing their holistic development. This extends beyond intellectual growth to encompass emotional, spiritual, and physical well-being. You seek experiences that enrich their minds, bodies, and souls, recognising that their development goes beyond the academic realm.

Harmony and Connection:

Conscious parenting places emphasis on cultivating a harmonious relationship with your children. Open communication, active listening, and mutual respect become the foundation of your interactions. This creates a strong sense of connection, fostering an environment where your children feel valued and understood.

Cultivating Inner Strength

Conscious parenting encourages the cultivation of inner strength. You empower your children to face challenges, make decisions, and embrace their uniqueness. The foundation of trust and support you provide fosters a resilient mindset, enabling them to navigate the complexities of life with grace and determination.

Offering Nutritional Nourishment

Just as you strive to provide a nurturing environment, nourishing your children's bodies becomes an extension of your conscious approach. Understanding their divine essence, you offer them the best and purest nutrition, recognising the importance of a healthy body as a vessel for their spiritual and intellectual growth. Living by Example:

As a conscious parent, you recognise that

your actions and choices serve as a model for your children. You lead by example, demonstrating the values you wish to instil in them. This authenticity nurtures their integrity and sense of responsibility.

Embracing Imperfection:

Conscious parenting acknowledges that both you and your children are on a continuous journey of growth. Mistakes are viewed as learning opportunities, and the emphasis shifts from perfection to progress.

Finding Joy in Every Moment:

When your children are perceived as Divine Beings, every moment becomes a source of joy. From their first steps to their achievements, each experience is cherished with the awareness that you are witnessing a unique soul's evolution.

Conclusion

The realisation that your children belong to the Divine elevates your role from mere caretaker to a facilitator of their spiritual growth. The journey becomes a sacred dance of nurturing and guiding, where your own growth is intertwined with theirs.

Parenting ceases to be a burden, a struggle, or a checklist of duties. Instead, it transforms into a journey of co-creation, where you witness your children unfolding as Divine Beings with unique purposes. This realisation infuses every moment with purpose, and happiness becomes an inherent quality of your parenting experience.

The conscious approach does not mean a life free of challenges or uncertainties, but it offers something even more valuable: a sense of fulfilment that goes beyond fleeting happiness. As you raise your children with consciousness, you nurture not only their potential but also your own. In the end, the journey becomes a harmonious symphony of growth, love, and shared purpose - a journey that you embark upon together as Divine Beings connected by the threads of life.



Souvenir 2023 THE NEW CHILDHOOD



Kangaroo Mother Care: What, Why, When, How?

Prof. Shashi N. Vani KMC Foundation, India

WHAT IS KMC?

* What is Kangaroo Mother Care (KMC)?

Kangaroo Mother Care (KMC) is a humane, natural, evidence based, low -cost method of care of newborns with high impact in terms of reducing neonatal morbidities and mortality rate, with special benefits to low birth weight infants (LBWI) including preterm (PT).

Kangaroo Mother Care (KMC) is a very simple method of holding the newborn on mother's chest in such a way that baby's chest and abdomen are in direct skin to skin contact on mother's chest without any layers of clothing in between.

World Health Organization definition:

KMC is to hold the baby in direct skin to skin contact on mother's chest in between her breasts as early as possible, as frequently as possible, and as long as possible and combined with breast milk feeding, early discharge and scheduled regular follow up in a supportive environment, both in facilities and in home (when KMC is continued at home)

"A very loving hug between mother and her baby."

• What is the origin of Kangaroo Mother Care?

The two neonatologists, Dr Edgar Ray Sanabria and Dr Hector Martinez introduced this method of care for the first time in the large hospital of mother and children, in the city of Bogota, in the country of Columbia in South America around the year 1978. In their hospital, they had almost 33,000 deliveries per year and a very high incidence of low birthweight

newborns including premature babies. A very large number of babies required admission in the NICU. There were inadequate number of incubators and equipment and shortage of nursing staff leading to overcrowding, problems of breastfeeding, mother baby separation, increased incidence of infections and high neonatal mortality. Those babies who could not be admitted in the NICU due to overcrowding and shortage of incubators, suffered because of hypothermia and complications leading to high mortality. Under these circumstances, to prevent chances of hypothermia in the babies, (modifying the local tradition of keeping the mother and baby together,) the method of care with direct skin to skin contact was introduced and the babies were kept directly on skin to skin contact on mother's chest, without any layers of clothing in between the baby's chest and abdomen and the mother's chest. These babies continued to grow well and had better quality of breastmilk feeding, less incidence of severe hospital acquired infections and less mortality. The first study paper of this simple method of care named as Kangaroo Mother Care was published in the year 1979 and subsequently it was confirmed by many other experts from UK and other places and gradually started spreading to other countries.

• Why is it called Kangaroo Mother Care?

Simulates the care given by animal kangaroo by keeping her young joey (baby) in abdominal pouch.

Baby gets warmth, exclusive breast feeding, zero separation of baby and the mother and loving, stress free care similar to the care



given by the animal Kangaroo found in Australia. Hence it was called Kangaroo Mother Care.

Breastmilk feeding is an important integrated component of Kangaroo Care and only mothers can give breast milk. To signify the importance of exclusive breast milk feeding included in this method of care, it is conventionally accepted to call it as Kangaroo Mother Care. It does not mean that the care has to be given only by the mother. When other/alternate persons or surrogates provide this method of care with direct skin to skin contact to baby on their chest, still it is called kangaroo Mother Care. (For eg, we can say father KMC or Grand mother KMC and so on and not Kangaroo Father Care, kangaroo grandmother care etc.)

WHY KMC?

Why promotion of KMC is important?

Almost 40% to 50% of Neonatal Mortality, particularly in the high risk groups of low birth weight and preterm babies at much lower cost and efforts . Helps for increased survival, better nurture and well thriving of the neonates and helps to lay a strong foundation for early childhood development.

KMC is a core intervention in Every Newborn Action Plan (ENAP) and in Sustainable Developmental Goals (SDG 3.2)

In developing countries like India, with high rates of birth, neonatal mortality rates and relatively inadequate facilities in terms of well trained staff, good infrastructure and adequate equipment, KMC is very useful.

· What are the important benefits of KMC?

- Benefits for Baby
- * KMC has several benefits apart from prevention of hypothermia.
- * Reduced morbidities including infections and mortality (almost 40% in LBWI)

- Prevents hypothermia and chances of hypoglycaemia
- * Improves quality of breastfeeding, growth, good quality of sleep and neurodevelopment
- * Improves mother baby bonding and satisfies all the five senses, touch, taste, smell, vision and hearing
- * Baby is stress free. Sleeps well. Cries much less.
- * Requirement of oxygen is much less, Apnoeic attack are less, better stabilization of vitals like heart rate, respirations, body temp. etc. Less days of hospitalization.
- Benefits of mother
- * Better quality of breastfeeding, early bonding
- * Improved self-esteem, confidence, competence and compliance for the care of small and sick newborns
- * Less postpartum mood disorders and depression
- Benefits to hospitals
- Less cost for the care of small and sick high-risk babies
 (Less use of oxygen, medications, nursing

care, days of hospitalization etc.)

- Benefits to community and nation
- * Improved survival rates of otherwise vulnerable small and sick newborns
- * Less harmful traditional practices of newborn care.
- * Better nurture, thriving and quality of survival of the babies
- What are the main components of KMC?

KMC has three important components.

a) Kangaroo Position (KP)- prolonged skin to skin contact between mother and her baby on mother's chest



(KP and KMC are often used interchangeably)

- b) Kangaroo Nutrition (KN)- exclusive breast milk feeding as much as possible (either as direct breastfeeding or expressed breast milk feeding with cup, paladai, spoon or tube feeding
- c) Kangaroo Discharge and Follow up (KD&F/up)- Planned early discharge and regular scheduled follow up including the neuro development

Provided in a supportive family like environment in hospital as well as at home for continued KMC at home and later.

During follow up, routine follow up including physical growth, breastfeeding, immunizations etc. need to be checked and also neurodevelopment and sensory system including screening for ROP, Hearing need to be checked and if need be appropriate early intervention to be started.

WHEN KMC?

Which babies are eligible for KMC?

All newborns including term and preterm are eligible for KMC. Small and sick newborns need KMC for a prolonged time and have more benefits.

Early recommendations for initiating KMC was only in stable low birth weight babies, particularly those less than 2000 g wt. As the experience increased, babies who have been stabilised following IV fluids, Oxygen therapy, Tube feeding also were given KMC. Recent guidelines recommend Immediate KMC soon after birth for even sick and small babies on CPAP, Mechanical ventilation, adopting the principle of Zero separation of baby from his/her mother as much as possible even in NICUs. Mothers are to be provided facilities to stay within the NICU itself and continue KMC during

as many procedures and therapeutic interventions as possible. (MNICU)

Recent WHO position paper released on 17th Nov. 2022 has also recommended the same.

KMC can be given soon after birth, even in caesarean delivered babies, during intramural and extramural transport of the neonate, during painful procedures for the management of sick and small newborns, continued at home following planned early discharge from the hospitals and home based KMC even in remote rural /tribal areas and urban slums (Resource Restricted Regions in the community) including home delivered babies with the help of trained community health workers.

Term babies may accept KMC for a very short term of two or three days soon after birth including the direct skin to skin contact soon after birth, continued for at least one to two hours minimum. Even that is very helpful in providing early stabilization of physiological parameters like heart rate and respirations, preventing hypothermia and related complications, early bonding and stimulating early breast milk secretion, breast crawl and subsequent successful exclusive breastfeeding. Baby is stress free, cries less and gets good sleep, all leading to lay a strong foundation for early child development even for a term baby.

HOW KMC?

Preparations before starting KMC

* Counselling

Mother must be counselled along with family members on multiple occasions before initiating Kangaroo Care. (Antenatal period, Just before the delivery, Just before initiating KMC, during continued KMC, just before discharge from



the hospital and during postnatal follow up. All the principles of good counselling must be followed. Mother must be reassured and feel convinced and confident to offer good quality prolonged KMC as long as the baby requires and accepts comfortably.

*Preparing Baby:

All the clothes of the baby are removed except the diaper, cap on the head and socks and if required, mittens during clod season. A front open zabla or baby frock may be used. If available, a KMC bag/wrap may be used. This provides additional safety.

*Preparing mother

She can wear any light, clean front open, garment that is culturally suitable and acceptable to her. It can be traditional saree and blouse, gown, shirt, Kurti etc.

Mother should remove neck jewellery, bangles, rings etc. Her nails should have been properly cut, hair tied up and all the precautions of infection prevention including proper handwashing should be done.

Mother sits or lies down in a semi reclined position with proper backrest and foot rest.

Then baby is kept on her chest directly without any garment in between in such a way that baby's chest and abdomen are in direct contact with mother's chest in between her two breasts and baby's head is turned to one side and is in a slightly extended position so that baby's airway remains straight and clear and mother and baby have eye contact.

Once she is settled with her baby in kangaroo position, she should be instructed about support of baby's neck from behind to safeguard against sudden flexion or extension of the neck and support bottom to prevent baby slipping down and have accidental fall. She should be trained for proper techniques of breast feeding, monitoring and early detection of

danger signs and suitable immediate action. She can even keep a note of duration of KMC during each session. If possible, an alternate KMC provider from the family can be prepared and allowed to help with KMC whenever mother needs help.

What is the correct method of holding the baby in Kangaroo Position?

- * The chest and abdomen of the newborn should be in direct skin to skin contact on mother's chest in between her breasts without any layers of clothing in between
- * As much vertical position as possible, baby's neck should be in a sniffing position with slightly extended neck backwards.
- * Mother and baby to have eye contact. Baby's nose should not be pressed.
- * Baby is placed on mother's chest in such a way that upper limbs are above the breast and the lower limbs are below the breast in a folded froglike position.
- * Baby's neck and bottom should be supported from behind by mother's hands.
- * If possible, a support garment/wrap/bag can be used

* What should be the duration of KP/KMC per session?

In one sitting, for not less than 60 minutes. so that the baby can have a complete cycle of deep quiet sleep which helps for better nurture and brain development. It can be as much prolonged as mother can comfortably can. Other willing family members can alternate with mother for giving KMC.

What parameters should be monitored during KMC?

- * Temperature
- * Airway/Activity
- * Breathing



- * Colour
- * Feeding
- * Growth
- * Any danger signals
- What special attention should be given for the nutrition of the baby during KMC?

Special attention required for maintaining adequate supply of expressed breast milk, which will be required for the small newborns during KMC.

General guidelines of IYCF to be followed.

- What special attention should be given to promote enough expressed breast milk?
- * Antenatal counselling, education and other support to mother.
- * Early direct skin to skin contacts of mother and her baby for at least two hours to begin with and later as much as possible in 24hours of a day.
- * Early expression of milk within a few hours of life even when baby is not ready for oral feeds
- * Frequent expression including during nights
- * Mothers should be taught the correct techniques of expression, collection, storage and administration of EBM
- * What support is needed for mother to successfully feed breast milk to preterm and LBWI?

Friendly, family like environment with facilities for basic needs of mother's stay in hospital.

• When should the baby in KMC should be discharged from hospital?

Each unit can decide own policy. Generally

- When baby is able to maintain body temp in KMC without any external aids
- * Able to take oral feeds either as direct breast feeding or as Expressed Breast Milk (EBM)

- * Steady weight gain of at least 15 g per Kg for at least three consecutive days
- * No other morbidities
- Mother confident and capable of taking care of small baby at home
- * Supportive family members
- When should KMC be stopped?

Babies provide the clue to stop KMC. Around 40 weeks of gestation /2500 g of weight babies start wriggling /fussing every time KMC is tried. The babies may even start crying. That is the indication to stop KMC.

 What is the recommended schedule for follow up of the KMC babies?

Facility based follow up visits:

- * Once a week for first two weeks and later once in a fortnight for two months and then once in a month
- More visits if needed
 When hospital visits are not possible, home
 visits through trained local ASHA or
 Community Health Care workers (6 or 7
 home visits as per schedule)
- What parameters are included in follow up visits?

Routine

- * Technique and adequacy of breast(milk) feeding
- * Growth
- * Immunizations
- * Any other concerns of mother

Special follow up

- * Neurodevelopment
- * ROP check -up before one month of age
- * Hearing check around 42 days of life
- What is the scope for KMC in our country?
- * For all stable LBWI including preterm
- * For full term babies in the first few hours /days after birth



- * For sick and small newborns in NICU/SNCU as I KMC /early immediate KMC soon after birth
- * During transport of the newborns (Intramural and extramural babies)
- * As a pain-relieving measure in cases of mild to moderately painful conditions including procedures in NICU
- * Home based KMC
- * Caesarean delivered babies
- What are the important barriers for KMC in our country?
- Lack of awareness, adequate knowledge and apathy of the consultants and medical and nursing fraternity
- * Not a monetarily lucrative mode of newborn care
- * No "glamour" of intensive/special newborn care (Incubators/ warmers/less use of qxygen therapy/less IV and fluids, medications etc.)
- Lack of facilities for mothers for prolonged stay in the hospitals
- * Lack of awareness and demand generation from general public.
- How can we overcome the barriers for KMC promotion?
- Proper orientation of policy makers
- * Improving training of doctors and nurses
- * Providing more facilities for mothers in hospitals
- * More counselling sessions
- What are the latest recommendations to improve the quality of KMC practice?
- * Proper training of all the KMC providers including doctors, nurses and others
- * Proper, adequate staff, equipment and infrastructure.

- * Training material in local languages.
- * Allow mothers to stay in NICU (MNICU) and SNCU (MNCU)to provide continuous KMC and follow zero separation policy as much as possible, and introduce Immediate KMC (iKMC) in all the facilities of newborn care at all levels of care.
- * Family like empathetic behaviour of the staff
- * Appreciation and awards for those who help in promoting KMC
- * Awareness creation activities for parents, media and general public
- · Carry home messages
- * KMC is a comprehensive method of care of newborns particularly small and sick ones
- * Can reduce neonatal mortality significantly provided practiced universally with good quality.
- * Use incubators/warmers only when KMC is not possible.
- * Do not separate mother from her baby as far as possible.

Our Mission:

Mother's chest is the best place for newborn care including sick and small newborns.

Mother's milk is the best nutrition for the newborn

Zero separation of baby from mother

Our Vision:

KMC including early skin to skin contact soon after birth, should be practiced as a part of routine care for all the newborns and particularly for the preterm and low birth weight babies. It should not be considered something special or different.

No baby less than 2500g birthweight should be left out without KMC.





ଦେବଶିଶ୍ଧ

ଡାକ୍ତର ନିତ୍ୟାନନ୍ଦ ସ୍ୱାଇଁ

ଜଲାଲୁଦ୍ଦିନ୍ ରୁମି ଥିଲେ ଜଣେ ପ୍ରସିଦ୍ଧ ସୁଫି କବି। ତାଙ୍କ ଯୁବା ବୟସରେ ସେ ଉର୍ଦ୍ଧ୍ୱକୁ ଚାହିଁ ପ୍ରାର୍ଥନା କରିଥିଲେ, ହେ ଖୁଦା, ଦୁନିଆକୁ ବଦଳେଇ ଦେବାପାଇଁ ମୋତେ ଶକ୍ତି ଦିଅ। ଉପରୁ ଏହାର କୌଣସି ଜବାବ ମିଳିଲାନି। ବାହାସାହା ହୋଇ ପିଲାପିଲି ହୋଇଗଲାପରେ ସେ ପୁନର୍ବାର ପ୍ରାର୍ଥନା କରିଥିଲେ, 'ହେ ଖୁଦା, ମୋ ପିଲାମାନଙ୍କୁ ବଦଳେଇବାପାଇଁ ମୋତେ ଶକ୍ତି ଦିଆ।' ଏଥରକ ମଧ୍ୟ କୌଣସି ଜବାବ ମିଳଲାନି ଉପରୁ। ରୁମି ଧୀରେ ଧୀରେ ବୁଢ଼ା ହୋଇ ଆସିଲେ। ଦିନେ ସେ ପୁଣି ଥରେ ପ୍ରାର୍ଥନା କଲେ, 'ହେ ଖୁଦା, ନିଜକୁ ବଦଳେଇବାପାଇଁ ମୋତେ ଶକ୍ତି ଦିଆ।'

ଏଥରକ ଉର୍ଦ୍ଧ୍ୱରୁ ଜବାବ ମିଳିଲା । ଖୁଦା ଜବାବ ଦେଲେ, 'ଆରେ ରୁମି, ତୁ' ଯଦି ଏଇ କଥାଟିକୁ ଯୌବନରେ ମାଗିଥାନ୍ତୁ, କେତେ ଭଲ ହୋଇ ନଥାନ୍ତା । ତୁ' ନିଜେ ବଦଳିଯାଇପାରିଥିଲେ ତ ଦୁନିଆ ଓ ତୋ' ସନ୍ତାନ, ସବୁକିଛି ବହୁ ଆଗରୁ ବଦଳି ଭଲ ହୋଇପାରିଥାନ୍ତେ । ତୋର ମଧ୍ୟ ଅଶେଷ ଉପକାର ହୋଇପାରିଥାନ୍ତା ।'

ଜୀବନର ବଡ଼ ସମସ୍ୟା ହେଲା- ପଡି ପନ୍ 1କୂ ବଦଳେଇବା ପାଇଁ ଚାହେଁ, ପତ୍ନୀ ଚାହେଁ ପଡିକୁ ବଦଳେଇବାପାଇଁ । ବାପାମାଆ ସନ୍ତାନମାନଙ୍କୁ ବଦଳେଇବାପାଇଁ ଚାହିଁଥାନ୍ତି ଏବଂ ଆମେ ସମଞ୍ଜେ ଚାହିଁଛୁ ଆମ ଚାରିପଟେ ଆତଯାତ ହେଉଥିବା ସବୁ ଲୋକଙ୍କୁ ବଦଳେଇବାପାଇଁ ହେଲେ, କେହି ନିଜକୁ ବଦଳେଇବାପାଇଁ ନ ଚାହିଁବା ହିଁ ସବୁଠାରୁ ବଡ଼ ବିଡ଼ୟନା ।

ସୁତରାଂ, ପିଲାମାନଙ୍କୁ ନୂଆ ପ୍ରକାରରେ ଗଢ଼ିବାପାଇଁ ଚାହୁଁଥିଲେ, ସବା ପ୍ରଥମେ ନିଜକୁ ନୂଆ ପ୍ରକାରରେ ଗଢ଼ିବା ହେଉଛି ଅପରିହାର୍ଯ୍ୟ। ପିତାମାତାଙ୍କୁ ପରାମର୍ଶ ଦେଇ କହ୍ଲିଲ୍ ଗିବ୍ରାନ୍ ଲେଖିଛନ୍ତି-

"ତୁମର ସନ୍ତାନ ତୁମର ସନ୍ତାନ ନୁହଁନ୍ତି । ସେମାନେ ଆଜି ସିନା ତୁମ ପାଖରେ ରହିଛନ୍ତି । କିନ୍ତୁ ସେମାନେ ଭବିଷ୍ୟତର ସନ୍ତାନ । ତୁମେ ସେମାନଙ୍କୁ ନିଜର ସ୍ନେହ, ଶ୍ରଦ୍ଧା ଦେଇପାର । କିନ୍ତୁ ସେମାନଙ୍କୁ ନିଜର ଚିନ୍ତା ଭାବନା ଦିଅନି । କାରଣ ସେମାନଙ୍କର ରହିଛି ନିଜସ ଚିନ୍ତା, ଭାବନା ।

ତୁମର ସପ୍ନକୁ ସାକାର କରିବାପାଇଁ କୁହନି ସେମାନଙ୍କୁ । ସେମାନେ ତୁମର ସପ୍ନକୁ ସାକାର କରିବେ କାହିଁକି ? ସେମାନଙ୍କର ତ ରହିଛି ନିଜର ସପ୍ନ ।

ତୁମେ ସେମାନଙ୍କ ଶରୀରର ଯତ୍ନ ନେଇପାର । ହେଲେ, ସେମାନଙ୍କ ଆତ୍ମାକୁ ଛୁଇଁବାର ଅପପ୍ରଚେଷ୍ଟା କରନାହିଁ । କାରଣ, ସେମାନଙ୍କର ଆତ୍ମା ବାସ କରିଥାଏ ଭବିଷ୍ୟତରେ, ଯେଉଁଠି ତୁମେ ଯେତେ ଚେଷ୍ଟା କଲେ ମଧ୍ୟ ପହଞ୍ଚୁପାରିବନି ।

ନିଜକୁ ସେମାନଙ୍କ ପରି ଗଢ଼ିବା ନିମନ୍ତେ ଚେଷ୍ଟା କର । ମାତ୍ର, ସେମାନଙ୍କୁ ତୁମପରି ଗଢ଼ିବା ନିମନ୍ତେ ଚେଷ୍ଟା କରନି । କାରଣ ଜୀବନ ଗତ କାଲିରେ ଅଟକି ରହି ନଥାଏ କି ପଛୁଆ ଫେରି ପାରି ନ ଥାଏ।"

ଗିବ୍ରାନ୍ଙ୍କ କହିବା ତାତ୍ପର୍ଯ୍ୟ ହେଉଛି, ପିଲାମାନେ ହେଉଛନ୍ତି ଏକ ସତନ୍ତ୍ର ଗୋଷ୍ଠୀ ଓ ସେମାନଙ୍କର ରହିଛି ସତନ୍ତ୍ର ଆବଶ୍ୟକତା।

ଶିଶୁମାନେ ପ୍ରାପ୍ତ ହେବେ ଏକ 'ନୂତନ ଶୈଶବ'। କିନ୍ତୁ ନୂତନ ଚରିତ୍ରଧାରୀ ପିତାମାତାଙ୍କ ବ୍ୟତିରେକ ନୂତନ ଚରିତ୍ରଧାରୀ ସନ୍ତାନଙ୍କ ବିକାଶ କ'ଣ ସୟବ? କୁହାଯାଇଛି ଯେ ଈଶ୍ୱର ସବୁ ସମୟରେ ସବୁ ସ୍ଥାନରେ ପହଞ୍ଚପାରିବେନି ବୋଲି ତାଙ୍କର ପ୍ରତିନିଧିଭାବେ ମାଆମାନଙ୍କୁ ସୃଷ୍ଟି କରିଛନ୍ତି। ଏହି ପରିପ୍ରେକ୍ଷୀରେ ଦେଖିଲେ ମାଆମାନେ ହେଉଛନ୍ତି ଈଶ୍ୱରଙ୍କର ଚଳନ୍ତି ପ୍ରତିମା। ମହିଳାମାନଙ୍କୁ ସ୍ୟୋଧନ କରି ଶ୍ରୀମା କହିଛନ୍ତି, "ତୁମର ବୃଦ୍ଧି ଖୁବ୍ ତୀଷ୍ଟ୍ର। ତୁମର ରହିଛି ଗଭୀର ଅନ୍ତର୍ଦ୍ୱୃଷ୍ଟି। ତେଣୁ ତୁ୍ୟେମାନେ ନିଷ୍ଟୟ ପାରିବ। ମନେରଖ, ତୁମରି ଗର୍ଭରୁ ହିଁ ଜନ୍ମନେବ ଭବିଷ୍ୟତର ଦେବଶିଶ୍ର।"

ସୂତରାଂ, ଈଶ୍ୱରଙ୍କ ଚଳନ୍ତି ପ୍ରତିମାଠାରୁ ଜନ୍ମନେଲେ ସନ୍ତାନ ଦେବଶିଶୁ ନ ହେବ ଅବା କିପରି ? ଏଣୁ ଏହା ସୁୟଷ୍ଟ



ଯେ ଦେବଶିଶୁଙ୍କୁ ଜନ୍ମଦେବା ଓ ସନ୍ତାନକୁ ଦେବଶିଶୁରୂପେ ବିକାଶ କରେଇବାର ସମୟ ସାମର୍ଥ୍ୟ ରହିଛି ମାଆମାନଙ୍କର । ଏହି ମହାନ୍ ଲକ୍ଷ୍ୟର ପୂର୍ତ୍ତିରେ ବାପାମାନେ ହେଉଛନ୍ତି ମାଆମାନଙ୍କର ଘନିଷ ସହଯୋଗୀ । ଅର୍ଥାତ୍, ଶୈଶବକୁ ଏକ ନୂତନ ରୂପଦେଇ ସାର୍ଥକ କରିବାରେ ପତିପତ୍ନୀ ଉଭୟଙ୍କର ରହିଛି ସମ୍ମିଳିତ ଦାୟିତ୍ୱ । ଜାଣି ରଖିବା ଦରକାର ଯେ ଶିଶୁମାନଙ୍କର ଶାରୀରିକ ଓ ମାନସିକ ବିକାଶର ଭିଭି ସ୍ଥାପିତ ହୋଇଥାଏ ସେମାନେ ମାଆଗର୍ଭରେ ଅବସ୍ଥାନ କରିଥିବା ବେଳେ ।

ମାତ୍ର ପ୍ରଶ୍ନ ଉଠେ, ଆମ ଶିଶୁମାନେ କ'ଶ ଅନେକ ଦୃଷ୍ଟିରୁ ଏତେ ଅସମର୍ଥ ଯେ ଆମେ ସେମାନଙ୍କ ପାଇଁ ଲୋଡୁଛୁ ଏକ ଅଭିନବ ଶୈଶବ ? ସାମ୍ପ୍ରତିକ ଅବସ୍ଥାରୁ ପରିବର୍ତ୍ତିତ ହୋଇ ନୂତନତ୍ୱ ପ୍ରାପ୍ତି ?

ବ୍ରାୟାନ୍ ଆଲ୍ଡସ୍ କହିଥିଲେ, "କନ୍ନ ସମୟରେ ଶିଶୁମାନଙ୍କୁ ଘେରି ରହିଥାଏ ସର୍ଗରାଜ୍ୟ । କିନ୍ତୁ ଶୈଶବଟି ମରିଗଲେ ସେମାନଙ୍କୁ ଘେରିଯାଏ ନରକ ।" ଶିଶୁମାନଙ୍କ ପରିଶତି କଥା ବିଚାରି ଉଇଲିୟମ୍ ଆଲ୍ଲିଙ୍ଗାନ ବ୍ୟଥାତୁର କଣ୍ତରେ କହି ପକେଇଲେ, "କାହିଁଯା'ନ୍ତି ଶିଶୁ ଯେତେ ସୁକୁମାର ମତି ? ଏଇ ମୁଡ଼ ନରନାରୀ ତାଙ୍କ ପରିଶତି ବା "Where do all the children go to? All the stupids all they grow to."

ଏହାସବୁ ସତ୍ତ୍ୱେ, ବିଶ୍ୱକବି ରବୀନ୍ଦ୍ରନାଥ ଟ୍ୟାଗୋର ଶୁଣେଇଛନ୍ତି ଏକ ଆଶାର ବାଣୀ । ପ୍ରକାଶ କରିଛନ୍ତି ଶିଶୁମାନଙ୍କ ଭବିଷ୍ୟତ ସମ୍ପର୍କରେ ଏକ ସକାରାତ୍ମକ ଦୃଷ୍ଟିକୋଣ । କହିଛନ୍ତି, "ଶିଶୁମାନଙ୍କ ଉପରେ ଈଶ୍ୱରଙ୍କର ରହିଛି ଗଭୀର ଆସ୍ଥା । ତାହା ହୋଇ ନ ଥିଲେ, ସେ ଶିଶୁମାନଙ୍କୁ ବାରୟାର ଏ ସଂସାରକୁ ପଠାଉ ନ ଥାନ୍ତେ।"

ରଷିଆର ଜଣେ ଶିକ୍ଷକ ବଡ଼ ଦୃଢ଼ତାର ସହ ଦାବି କରିଥିଲେ 'ମୋ' ପାଖରେ ଶିଶୁମାନଙ୍କୁ ସାତବର୍ଷ ପାଇଁ ଛାଡ଼ିଦିଅ । ମୁଁ ସେମାନଙ୍କୁ ଏପରି ଭାବରେ ସର୍ବଗୁଣସମ୍ପନ୍ନ କରି ଗଢ଼ିଦେଇଥିବି ଯେ ସନ୍ଧଂ ଈଶ୍ୱର ଚାହିଁଲେ ବି ସେମାନଙ୍କୁ ପରିବର୍ତ୍ତନ କରିପାରିବେନି ।" ସେଥିପାଇଁ ଯଥାର୍ଥରେ କୁହାଯାଇଛି, ଶିଶୁମାନେ ହେଉଛନ୍ତି କାଦୁଅ ପିଣ୍ଡୁଳା ସଦୃଶ । ଆମେ ଚାହିଁଲେ, ସେମାନଙ୍କୁ ଯେପରି ଇଚ୍ଛା, ସେପରି ଗଢ଼ି ଦେଇପାରିବା ।

ମଣିଷ ଶିଶୁର ପ୍ରଥମ ଚାରିବର୍ଷ ହେଉଛି ସନ୍ଧିକାଳ। ଏହି

କାଳ ଅବଧିରେ ସେ ଯାହା ସବୁ ଦେଖେ ଯାହା ସବୁ ଶୁଣେ ଏବଂ ଯାହାସବୁ ଅନୁଭବ କରେ ତା'ର ପରବର୍ତ୍ତୀ ଜୀବନରେ ତାହାରି ପଭାବ ହିଁ ଅପରିବର୍ତ୍ତିତ ରହିଥାଏ। ଏହି ହେତୃ ଶିଶୁମାନେ ଭଲକଥାମାନ ଦେଖିବା ଉଚିତ, ଭଲକଥାମାନ ଶୁଣିବା ଉଚିତ ଓ ଯାହାସବୁ ଭଲ, ତାହା ଅନୁଭବ କରିବା ଉଚିତ । ଆଉ, ଶିଶୁମାନଙ୍କୁ ଏହିଭଲ ସବୁ ଦେଖେଇବା, ଭଲ ସବୁ ଶୁଣେଇବା ଓ ଭଲସବୁ ଅନୁଭବ କରେଇବା ମୁଖ୍ୟତଃ ପିତାମାତା, ପରିବାରର ଅନ୍ୟ ସଦସ୍ୟ ଓ ଶିକ୍ଷକ ଶିକ୍ଷିକାମାନଙ୍କର ପଧାନ ଦାୟିତ୍ୱ ଏବଂ ନୈତିକ କର୍ତ୍ତବ୍ୟ ମଧ୍ୟ । ସେଥିପାଇଁ କୁହାଯାଇଆସୁଛି ଯେ ପରିବାର ହେଉଛି ଶିଶୁମାନଙ୍କର ପଥମ ବିଦ୍ୟାଳୟ ଏବଂ ବିଦ୍ୟାଳୟ ହେଉଛି ସେମାନଙ୍କର ଦ୍ୱିତୀୟ ପରିବାର । ପରିବାରରେ ଆଦର୍ଶ ବିଦ୍ୟାଳୟର ପରିବେଶ ଓ ବିଦ୍ୟାଳୟରେ ଆଦର୍ଶ ପରିବାରର ପରିବେଶ ରହିପାରିଲେ, ସେମାନେ ପରିବାର ଓ ବିଦ୍ୟାଳୟ ପାର୍ଥକ୍ୟ ବାରିପାରିବେନି ଏବଂ ସୁଗୁଣ ହୋଇପାରିବ ସେମାନଙ୍କର ପୂର୍ଣ୍ଣାଙ୍ଗ ସନ୍ତୋଷଜନକ ବିକାଶ । ଶିଶୁକୁ ବିରାଟ ବ୍ୟକ୍ତିଭାବରେ ବିକଶିତ କରିବାପାଇଁ ଆଗେ ତାକୁ ବିରାଟ ସନ୍ତାନ ତଥା ବିରାଟ ଶିକ୍ଷାର୍ଥୀ ଭାବରେ ଗଠନ କରିବା ନିମିତ୍ତ ଯପରୋନାୟି ଉଦ୍ୟମ ଅବ୍ୟାହତ ରଖିବା ଉଚିତ। ଏହି କାରଣରୁ କୁହାଯାଇଛି ଯେ ପରିବାର ଓ ବିଦ୍ୟାଳୟ ହେଉଛି ମଣିଷ ତିଆରି କାରଖାନା ଏଙ ପିତାମାତା ଓ ଶିକ୍ଷକଶିକ୍ଷିକା ହେଉଛନ୍ତି ମଣିଷ ତିଆରି କାରିଗର ।

ବଡ଼ ଆଶ୍ୱାସନାର କଥା ଯେ ଶିଶୁମାନଙ୍କୁ ନୂତନ ପ୍ରକାରରେ ଗଠନ କରିବା ବେଶ୍ ସହଳ । ମାତ୍ର ଏଥିପାଇଁ ଲୋଡ଼ା ଆନ୍ତରିକତା ଏବଂ ଆମ୍ବୋହର୍ଗ । କାରଣ ସେମାନେ ସମଞ ପ୍ରକାରର ଅନୁକୂଳ ସାମର୍ଥ୍ୟ ନେଇ ଭୂମିଷ ହୋଇଥାନ୍ତି । ସେମାନେ ଜନ୍ମରୁ ବୃଦ୍ଧିମାନ, ଜିଜ୍ଞାସୁ, ଅନୁସନ୍ଧିୟୁ ଏବଂ କୌତୂହଳୀ । ସେମାନଙ୍କଠାରେ ରାଗରୋଷ, ଚିହ୍ନାଅଚିହ୍ନା, ଘୃଣା, ଈର୍ଷା, ହିଂସା ଇତ୍ୟାତି ସଭାବ ନ ଥାଏ । ସେଥିପାଇଁ ସଂସାରରେ ଖରାପପିଲା ବୋଲି କେହି ନଥାନ୍ତି । ଶ୍ରୀଅରବିନ୍ଦ କହିଛନ୍ତି, "ଶିଶୁଠାରେ ରହିଥାଏ ଏକ ସତନ୍ତ୍ର ଚରିତ୍ର ଏବଂ ସତନ୍ତ୍ର ସାମର୍ଥ୍ୟ । ତେଶୁ ତା'ର ଆବେଶିକ, ବୌଦ୍ଧକ ଏବଂ ଆଧ୍ୟାତ୍ମିକ ସଭାର ପୂର୍ଣ୍ଣାଙ୍ଗ ବିକାଶ ହିଁ କାମ୍ୟ ।" ଶିଶୁର ଚରିତ୍ର ଅତି ସଚ୍ଛ ହୋଇଥିବାରୁ ସେମାନେ ସବୁଠାରୁ ବେଶୀ ହସିଥାନ୍ତି । ଅଢ଼େଇ ମାସ ବୟସର ହୋଇଗଲେ ଶିଶୁ ହସିବା ଆରୟ କରିଦିଏ । ୪ମାସର ଶିଶୁ ଘଣ୍ଟାକୁ ଥରେ ଲେଖାଏଁ ହସୁଥିବାବେଳେ ୪ବର୍ଷ ବୟସରେ



ପହଞ୍ଚଗଲେ, ସେ ହସିଥାଏ ପ୍ରତି ୪ମିନିଟ୍ରେ ଥରେ ବା ଦିନକୁ ୩୦୦ ଥରରୁ ବେଶୀ। ଅଥଚ, ଜଣେ ବୟୟ ବ୍ୟକ୍ତି ଦିନକୁ ଜମା ୧୫ଥର ପାଖାପାଖି ହସିଥାଏ। ଶିଶୁର ମନ ସଚ୍ଛ ତଥା ନିର୍ମଳ ଥିବାରୁ ସେ ଅତି ସହଜରେ ହସିପାରେ ସିନା, କିନ୍ତୁ ବୟୟ ବ୍ୟକ୍ତିର ମନ ମଳିନ ଏବଂ ଅସଚ୍ଛ ହୋଇ ମନରେ ଚିକ୍ତାର ସର୍ବଦା ଗହଳଚହଳ ଲାଗିରହିଥିବାରୁ ତା' ଓଠରୁ ହସ ବାହାରି ପାରେ ନାହାଁ ଶିଶୁମାନଙ୍କର ସର୍ବପ୍ରଥମ ଚିହ୍ନା ପୃଥିବୀଟି ହେଉଛି ମାତୃଗର୍ଭ । ମାତୃଗର୍ଭରୁ ବାହାରି ଆସିବାପରେ ମାଆ ଶରୀରର ଗନ୍ଧ ଓ ମାଆର କୋଳ ହୋଇଯାଏ ସେମାନଙ୍କର ଅତି ଆପଣାର ଭୂପୃଷ୍ଟସ୍ଥିତ ସେମାନଙ୍କର ପ୍ରଥମ ଚିହ୍ନା ପୃଥିବୀ । ଏହି ପୃଥିବୀକୁ ସେମାନେ ସବୁଠାରୁ ନିରାପଦ ବୋଲି ବିଚାରୁଥିଲେ ମଧ୍ୟ ବୟସ ବଡ଼ିବା ସଙ୍ଗେ ସଙ୍ଗେ ଏହି ପୃଥିବୀର ପରିଧି ନବଢିଲେ ଜାତ ହୋଇପତେ ସମସ୍ୟା।

ମାତ୍ର ପ୍ରଶ୍ନ ଉଠେ, ମାତୃଗର୍ଭ କଅଣ ମାମୁଲି ଏକ ଜୈବିକ ଆଧାର ? ଗର୍ଭଟିର କେବଳ ଶାରୀରିକ ଆବଶ୍ୟକତା ପୂରଣ କରିବାରେ କଅଣ ଏହାର ଦାୟିତ୍ୱ ସୀମିତ ?

ରାମାୟଣରେ ଅଛି, ଅଷ୍ଟବକ୍ର ମୁନି ମାତୃଗର୍ଭରେ ଥିବାବେଳେ କୁଆଡ଼େ ବେଦଜ୍ଞାନ ପ୍ରାପ୍ତ ହୋଇଥିଲେ । ମହାଭାରତରେ ଅଛି, ଅଭିମନ୍ୟୁ ମାତୃଗର୍ଭରେ ଅବସ୍ଥାନ କରିଥିବା ସମୟରେ ଅବଗତ ହୋଇଥିଲେ ଚକ୍ରବ୍ୟୁହ ଭିତରକୁ ପ୍ରବେଶ କରିବାର ସମର କୌଶଳ । ବନାରସ ହିନ୍ଦୁ ବିଶ୍ୱବିଦ୍ୟାଳୟସ୍ଥିତ ସାର ସୁନ୍ଦରଲାଲ ହସ୍ପିଟାଲ୍ର ଆୟୁର୍ବେଦ ବିଭାଗରେ ଆରୟ ହୋଇଛି 'ଗର୍ଭସଂୟାର' ଥେରାପି । ମାତୃଗର୍ଭରେ ରହିଥିବା କାଳରେ ଭୁଣ ତଥା ଗର୍ଭଠାରେ ମୂଲ୍ୟବୋଧର ସଂଚାର କରେଇବା ଏହି ଥେରାପୀ ପ୍ରୟୋଗର ଉଦ୍ଦେଶ୍ୟ । ଏହି ପ୍ରକଳ୍ପରେ ମାଆ ମାଧ୍ୟମରେ ଗର୍ଭସ୍ଥ ଶିଶୁକୁ ଶୁଣେଇଦିଆଯିବ ଗୀତାର ଶ୍ଳୋକ, ରାମାୟଣର କାହାଣୀ ଇତ୍ୟାଦି ଆଧ୍ୟାମିକ ବିଷ୍ୟ ।

ଏବେ ବିଚାର କରନ୍ତୁତ, ସନ୍ତାନର ଲାଳନ ପାଳନ ଆରୟ ହୁଏ କେବେଠାରୁ? ପିତାମାତାଙ୍କର ସାଧାରଣ ଧାରଣା ଯେ, ସନ୍ତାନର ଦାୟିତ୍ୱ ଆରୟ ହୋଇଥାଏ ସନ୍ତାନଟି ଭୂମିଷ ହେବାପରେ । ତେଣୁ ସେମାନେ ଗର୍ଭାବସ୍ଥାରେ ମାଆର କେବଳ ଶାରୀରିକ ସୁସୁତା ପ୍ରତି ଗୁରୁତ୍ୱ ଦେଇଥାନ୍ତି । ଗର୍ଭବତୀ ମାଆଟିର ଆବେଗିକ ଏବଂ ମନୟାତ୍ୱିକ ଅବସ୍ଥା ଓ ଶିଶୁର ଚେତନା ଉପରେ

ଗର୍ଭକାଳର ପ୍ରଭାବ ପ୍ରତି କେହି କୌଣସି ଧ୍ୟାନ ଦେଇନଥାନ୍ତି । ମାତ୍ର ଏହା ଜାଣି ରଖିବା ଆବଶ୍ୟକ ଯେ ଶିଶୁର ସୃଷ୍ଟି ବଡ଼ ରହସ୍ୟମୟ । ତା'ରି ମାଧ୍ୟମରେ ଆତ୍ମାଟିଏ ନେଇଥାଏ ଶରୀରର ରୂପ । ଶିଶୁର ଚେତନାର ୟରକୁ ରୂପ ଦେବାରେ ତା'ର ଗର୍ଭାଶୟସ୍ଥିତ ଅବସ୍ଥାନ ହେଉଛି ଅତ୍ୟନ୍ତ ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ । ତେବେ ଗର୍ଭସଞ୍ଚାର ସମୟର ଓ ଶିଶୁ ପ୍ରସବ ସମୟର ପିତାମାତାଙ୍କ ଚେତନାହିଁ ଶିଶୁର ଚେତନା ଓ ଚରିତ୍ରକୁ ବହୁଳ ଭାବରେ ପ୍ରଭାବିତ କରିଥାଏ ।

ଶ୍ରୀଅରବିନ୍ଦ କହିଛନ୍ତି, "ଶିଶୁର ସର୍ବାଙ୍ଗୀଣ ବିକାଶ ତଥା ତା'ର ଅନ୍ତର୍ନିହିତ ସାମର୍ଥ୍ୟର ପୂର୍ଣ୍ଣ ପରିପ୍ରକାଶରେ ନାରୀର ଭୂମିକା ସର୍ବାଧିକ । ସନ୍ତାନକୁ କେବଳ ଉନ୍ନତ କରି ଗଢ଼ିବା ନୁହେଁ, ନିଜକୁ ମଧ୍ୟ ଏଥିପାଇଁ ସମର୍ଥ କରିବା ନିମନ୍ତେ ନାରୀ ତା'ର ଅଭୀପ୍ରସା ଅବ୍ୟାହତ ରଖିବା ବାଞ୍ଚନୀୟ।"

କଥାବାର୍ତ୍ତ। ମାଧ୍ୟମରେ, ନିରବତ। ମାଧ୍ୟମରେ, ମନୋଯୋଗ ସହକାରେ, ପ୍ରାର୍ଥନା କରି, ସ୍ନେହଶ୍ରଦ୍ଧାର ସନ୍ଦନ ପ୍ରେଶ କରି, କୃତଜ୍ୱତା ପ୍ରକାଶ କରି, ଶାନ୍ତ ରହି ଗର୍ଭବତୀ ମହିଳାଟି ତା' ଗର୍ଭସ୍ଥ ସନ୍ତାନଟିର ଶରୀର, ମନ ଓ ଆବେଗତାରେ ସଙ୍ଗତି ସଞ୍ଚାରଣ କରିପାରେ । ଗର୍ଭାଶୟଭିତରେ ବିକଶିତ ହେଉଥିବା ଗର୍ଭକୁ ପ୍ରତ୍ୟକ୍ଷଭାବରେ ପ୍ରଭାବିତ କରିଥାଏ ମାଆର ମନୟାତ୍ସିକ ଅବସ୍ଥା ତଥା ତା'ର ବାହ୍ୟ ଓ ଅନ୍ତଃ ପରିବେଶ ।

ପ୍ରସବପୂର୍ବ ଅବସ୍ଥାରେ ମାଆ ନିଜର ଶରୀର, ମନ, ଭାବନା ଓ ଆବେଗକୁ ଯେଉଁ ପ୍ରକାରେ ବିକଶିତ କରିଥାଏ ଓ ଯେଉଁ ପ୍ରକାରର ପରିବେଶରେ ଅବସ୍ଥାନ କରିଥାଏ, ତାହା ଶିଶୁର ପୂର୍ଣ୍ଣାଙ୍ଗ ବିକାଶକୁ ସେହି ପ୍ରକାରରେ ପ୍ରଭାବିତ କରିଥାଏ । ଗର୍ଭଠାରେ ଆସ୍ଥାର ବିକାଶ କରି ମାଆ ସହ ତା'ର ବନ୍ଧନକୁ ସୁଦୃଢ଼ କରିବାରେ ଏହି ସମୟ ଅତ୍ୟନ୍ତ ମୂଲ୍ୟବାନ । ତେଣୁ ଏହି ଗର୍ଭାବସ୍ଥାରେ ମାଆ ସର୍ବଦା ସକାରାତ୍ମକ ମନୋଭାବ ପୋଷଣ କରିବା ଅପରିହାର୍ଯ୍ୟ । ଏକ ଉଚ୍ଚତର ଚେତନାରେ ଅବସ୍ଥାନ କରି ଗର୍ଭବତୀ ମହିଳାଟି ଯଦି ଈଶ୍ୱରଙ୍କ ପ୍ରତି ସମର୍ପିତ ମନୋଭାବ ପୋଷଣ କରିପାରିବେ, ତେବେ ଗର୍ଭସ୍ଥ ସନ୍ତାନଟି ପାଇଁ ତାହା ସୃଷ୍ଟି କରିପାରିବ ଅନୁକୃଳତମ ଅବସ୍ଥା ।

ମାତୃତ୍ୱ ହେଉଛି ଶିଶୁର ଜୀବନର ଅଭିଭାବକତ୍ୱ। ସଚେତନ ସନ୍ତାନ ସୃଷ୍ଟିପାଇଁ ପ୍ରାକ୍ପସବ ସମୟଟି ହେଉଛି ଖୁବ୍



ପ୍ରଭାବଶାଳୀ। ଗର୍ଭବତୀ ମହିଳାଟି ତା'ର ଗର୍ଭାବସ୍ଥାରେ ଯେଉଁ ଆନନ୍ଦ, ଅନୁଭବ, ତୃପ୍ତି, ଉକ୍ଷା, ଉଦ୍ବେଗ ଓ ଚାପର ସନ୍ଦନ ଅନୁଭବ କରିଥାଏ, ସେହିସବୁ ମଧ୍ୟ ସ୍ପର୍ଶ କରିଥାଏ ଗର୍ଭସୁ ସନ୍ତାନକୁ।

ଶ୍ରୀମାଶ୍ରୀଅରବିନ୍ଦଙ୍କ ଦୃଷ୍ଟିରେ ମାଆର ଚେତନା ହେଉଛି ସର୍ବପ୍ରଥମ ଆଧାର, ଯେଉଁ ଆଧାରଟି ଭିତରେ ବିକଶିତ ହୋଇଥାଏ ଗର୍ଭସ୍ଥ ଶିଶୁର ଚେତନା । ତେଣୁ ଗର୍ଭାବସ୍ଥାରେ ମାଆଟି ପରମାନନ୍ଦର ପରିବେଶରେ ବାସ କରି ସର୍ବଦା ସତର୍କ ରହିବା ଆବଶ୍ୟକ ।

ଏ ବିଷୟରେ ପିତାମାତା ଅବଗତ ରହିଥିବା ଆବଶ୍ୟକ ଯେ ସେମାନଙ୍କ ଚେତନାର ୟର ଗର୍ଭସ୍ଥ ଶିଶୁଠାରେ ଚେତନାର ଆଦ୍ୟ ରୂପକାର । ଯେଉଁ ସମୟରେ ପତିପତ୍ନୀ ମିଳିତ ହୋଇ ଗର୍ଭସଂଚାର ସମ୍ଭବ ହୋଇଥାଏ, ସେହି ସମୟରେ ଉଭୟଙ୍କ ଚେତନା ଏ ଦୃଷ୍ଟିରୁ ବେଶୀ ମହତ୍ତ୍ୱପୂର୍ଣ୍ଣ । ଯୌନ ମିଳନ ସମୟରେ ସେମାନଙ୍କ ଚେତନା ଅବଚେତନ ଶକ୍ତିର ପ୍ରଭାବରେ ଅବଦମିତ ହୋଇପଡ଼େ । ମାତ୍ ଦୈହିକ ମିଳନ ସମୟର ସେହି ଅବଚେତନ କ୍ରିୟାକୁ ଆଧାତ୍ମିକ ମିଳନରେ ତଥା ଏକ ଚେତନାଦୀପ୍ତ କ୍ରିୟାରେ ପରିଶତ କରାଇ ପାରିବା ସୟବ। ସୟବ ସଚେତନ ଭାବରେ ଭ୍ରଣ ସୃଷ୍ଟି । ତୀବ୍ ଅଭୀପ୍ସା ଦ୍ୱାରା ଦିବ୍ୟ ଚେତନାକୁ ଆବାହନ କରି ଓ ଦିବ୍ୟଶକ୍ତି ନିକଟରେ ସକ୍ୱିୟ ସମର୍ପଣ କରି ଶାରୀରିକ ମିଳନ କ୍ୟାକୁ ଏକ ସଚେତନ ପବିତ୍ କ୍ୟାଭାବେ ରୂପାନ୍ତରିତ କରିବାପାଇଁ ପଡ଼ିବ । ଦମ୍ପତ୍ତିଙ୍କ ମଧ୍ୟରେ ଦୈହିକ ମିଳନକୁ ଉଭୟଙ୍କ ମଧ୍ୟରେ ଚୈତ୍ୟସତ୍ତାର ମିଳନଭାବେ କାର୍ଯ୍ୟକାରୀ କରାଇବା ହିଁ କାମ୍ୟ । ମାତ୍ତ୍ୱଲାଭକୁ ଏକ ଦୈହିକ ବ୍ୟାପାରରେ ସୀମିତି ନ ରଖି ଏକ ତୀବ୍ର ଆଧ୍ୟାତ୍ମିକ ସାଧନା ଭାବରେ ରୂପାନ୍ତରିତ କରେଇ ପାରିଲେ ଗର୍ଭସ୍ଥ ସନ୍ତାନଟି ଉପରେ ଏହାର ସୁଫଳ ହୋଇପାରିବ ସୁଦ୍ରପ୍ରସାରୀ। ଗର୍ଭବତୀ ମହିଳାଟିର ଚିନ୍ତା ହେବା ଦରକାର ଶୁଦ୍ଧ ଏବଂ ସୁନ୍ଦର, ଅନୁଭବ ହେବା ଦରକାର ମହତ୍ ଏବଂ ଉତ୍ତମ ଏବଂ ମନୋଭାବ ହେବା ଦରକାର ସକାରାମ୍କ । କୁହାଗଲାଣି ଯେ ମାଆ ଚାହିଁଲେ ସେ ସଚେତନ ଭାବରେ ତଥା ନିଜ ଭାବନା ମାଧ୍ୟମରେ ଗର୍ଭସ୍ଥ ସନ୍ତାନ ନିକଟକୁ ଭାବ ପ୍ରେରଣ କରିପାରିବ, ମନେ ମନେ, ପ୍ରେମରେ ତାକୁ ଆଲିଙ୍ଗନ କରପାରିବ ମଧ୍ୟ । ଏପରି କରିପାରିଲେ ମାଆ ଓ ଗର୍ଭସ୍ଥ ସନ୍ତାନ ମଧ୍ୟରେ ବେଶୀ ସୁଦୃଢ଼ ହୋଇପାରିବ ଆବେଗିକ ଓ ଚୈତ୍ୟ ସମ୍ପର୍କର ବନ୍ଧନ I

ଏହି ଗର୍ଭକାଳରେ ମାଆ ନିଜର ଚିନ୍ତା, କାର୍ଯ୍ୟ ଓ କଥାରେ ସର୍ବାଧିକ ମନୋନିବେଶ କରି ଗର୍ଭକାଳକୁ ସର୍ବାଧିକ ଆନନ୍ଦର ମୁହୂର୍ତ୍ତରେ ପରିଶତ କରେଇ ପାରିଲେ, ତାହା ମାଆ ଓ ଶିଶୂ ଉଭୟଙ୍କ ପାଇଁ ଶୁଉଙ୍କର ସାବ୍ୟୟ ହୋଇଥାଏ । ମାଆ ନିଜଠାରେ ଅଭୀପ୍ସାର ଶିଖାକୁ ପ୍ରକ୍ସଳିତ କରି ରଖିପାରିଲେ ତାହା ଶିଶୁପାଇଁ ସୃଷ୍ଟି କରିଥାଏ ଏକ ଅନୁକୂଳ ପରିବେଶ । ଏହି ସମୟରେ ସକାରାତ୍ମକ ମନୋଭାବ ଓ ସକାରାତ୍ମକ କାର୍ଯ୍ୟର ରହିଛି ଅତ୍ୟନ୍ତ ମହତ୍ତ୍ୱପୂର୍ଣ୍ଣ ପ୍ରଭାବ । ଏପରି କରିପାରିଲେ, ଶିଶୁଟିଠାରେ କୌଣସି ନକାରାତ୍ମକ ଆବେଗ ମୁଣ୍ଡଟେକିବାର ଆଶଙ୍କା ରହେନାହିଁ । ବଙ୍ ସେ ଅନୁଭବ କରେ ଏକ ଶାନ୍ତ, ଅବିଚଳିତ ପରିବେଶ ।

ଗର୍ଭାବସ୍ଥାରେ ମାଆ ଭକ୍ତିସଙ୍ଗୀତ ଶୁଣିଲେ, ଧାନ କଲେ, ଜପକଲେ, ଆଧାତ୍ୟିକ ପୁଞ୍ଚକ ପାଠକଲେ, କୌଣସି କଳହ କି ଯୁକ୍ତି ତର୍କରେ ଜଡ଼ିତ ନହେଲେ ଏବଂ ନକାରାତ୍ୟକ ଆବେଗ ଇତ୍ୟାଦିଠାରୁ ଦୂରେଇ ରହିଲେ, ତାହା ଗର୍ଭସ୍ଥ ଶିଶୁଟି ପାଇଁ ସର୍ବଦା ଅନୁକୂଳ ସାବ୍ୟଞ୍ଚ ହୋଇଥାଏ । ପୁନଷ୍ଟ, ଏହା ଗର୍ଭସ୍ଥ ଶିଶୁଟିଠାରେ ଏକ ଉନ୍ନତ ଚେତନାର ବିକାଶରେ ଖୁବ୍ ସହାୟକ ହୋଇଥାଏ ମଧ୍ୟ । ମାଆଠାରେ ଦିବ୍ୟ ସର୍ମପଣର ଭାବ ଅତ୍ୟନ୍ତ ସୁଫଳଦାୟୀ । ସେ ନିଜ ଶରୀର, ମନ ଓ ପ୍ରାଣରେ ସୁସମନ୍ୱୟ ସ୍ଥାପନ କରିପାରିଲେ, ତାହା ନିକ ଓ ଗର୍ଭସ୍ଥ ଶିଶୁ ମଧ୍ୟରେ ସଙ୍ଗତି ସ୍ଥାପନକୁ ସୁଗମ କରିଦିଏ । ଏହି ପରିପ୍ରେକ୍ଷୀରେ ଦେଖିଲେ, ଶିଶୁକୁ ଏକ ନୂତନ ଶୈଶବ ଉପହାର ଦେଇ ତାକୁ ଦିବ୍ୟଶିଶୁରୂପେ ଗଢ଼ି ତୋଳିବାରେ ଭାବୀ ପିତାମାତାଙ୍କ ଦ୍ୱାରା ଗର୍ଭସ୍ଥ ଶିଶୁର ପ୍ରତିପାଳନର ଅନୁକୂଳ ଭୂମିକା ଅତ୍ୟନ୍ତ ସୁଦ୍ରପ୍ସାରୀ ।

ଭୂମିଷ ହୋଇପଡ଼ିବାପରେ ଶିଶୁଟି ଯେଉଁ ପରିବେଶରେ ବୃଦ୍ଧି ଓ ବିକାଶ ଲାଭ କରିଥାଏ, ସେହି ପରିବେଶ ଖୁବ୍ ଗଭୀର ପୂଭାବ ପକାଇଥାଏ, ତା'ର ଭବିଷ୍ୟତ ବ୍ୟକ୍ତିତ୍ୱ ଉପରେ।

ଏହାଛଡ଼ା, ତା'ର ପିତାମାତା, ଭାଇଭଉଣୀ, ପରିବାରର ଅନ୍ୟାନ୍ୟ ସଦସ୍ୟ, ଶିକ୍ଷକ ଶିକ୍ଷିକା ଏବଂ ସାଙ୍ଗସାଥୀ ମଧ୍ୟ ତା'ର ଚରିତ୍ରକୁ ପ୍ରଭାବିତ କରିଥାନ୍ତି । ପ୍ରଭାବିତ କରିଥାନ୍ତି ତା'ର ଚାଲିଚଳଣ ଓ ଆଚାର ବ୍ୟବହାରକୁ । ତେବେ ତା'ର ଜୀବନରେ ସବୁଠାରୁ ଗୁରୁତ୍ୱପୂର୍ଣ୍ଣ ହେଉଛନ୍ତି ତା'ର ପିତାମାତା । କାରଣ ପିତାମାତା ତା'ର ସର୍ବପ୍ରଥମ ଶିକ୍ଷକ ଓ ତା'ଭବିଷ୍ୟତ ଗଠନର ଅନ୍ୟତମ ମୁଖ୍ୟ ରୂପକାର । ତା'ର ବିବିଧ ଆବେଶିକ ଓ



ମନୟାଭ୍ୱିକ ଆବଶ୍ୟକତା ତଥା ତା'ଠାରେ ସ୍ନେହପ୍ରେମର ବିକାଶ ପାଇଁ ଏକ ମୁଖ୍ୟ ପରିବାର ଅପରିହାର୍ଯ୍ୟ । ସାର୍ ଜନ ବ୍ରାଉନିଂ କହିଥିଲେ, "ସୁଖୀ ପରିବାର ହେଉଛି ଆଦ୍ୟ ବୈକୁଷ । ଭକ କବି ମଧ୍ୟ କହିଛନ୍ତି, "ବୈକୁଷ ସମାନ ଆହା ଅଟେ ସେହି ଘର, ପରସ୍କର ସ୍ନେହ ଯହିଁ ଥାଏ ନିରନ୍ତର ।" ଡବ୍ଲିଉ. ଆଇକ୍ମ୍ୟାନ୍ କହିଥିଲେ, "ପିଲାମାନଙ୍କୁ ଭଲ ମଣିଷ କରି ଗଢ଼ିବାପାଇଁ ପ୍ରଭୂ ପରିବାର ସୃଷ୍ଟି କରିଛନ୍ତି । ବଟଂ ମନ୍ଦିର ତିଆରି କରିବାର କଳ୍ପନା ମଣିଷ ମୁଷରେ ଉଙ୍କି ମାରିବା ପୂର୍ବରୁ ସେ ତୋଳିଥିଲା 'ପରିବାର' ବୋଲି କୁହାଯାଉଥିବା ମନ୍ଦିରଟିଏ।"

ସେହିପରି, ଶିଶୁମାନଙ୍କ ଶୈଶବକୁ ସାକାରକରି ସେମାନଙ୍କୁ ଭଲ ମଣିଷ କରି ଗଠନ କରିବାରେ ଶିକ୍ଷକଶିକ୍ଷିକାମାନଙ୍କ ଅବଦାନ ଅତୁଳନୀୟ । ଶିକ୍ଷାର୍ଥୀମାନଙ୍କ ବିବିଧ ସମସ୍ୟାକୁ ଚିହ୍ନଟ କରି ଏହାର ପ୍ରତିକାର ବ୍ୟବସ୍ଥା କରିବାର ଗୁରୁଦାୟିତ୍ୱ ଶିକ୍ଷକ ଶିକ୍ଷିକାମାନଙ୍କ ଉପରେ ନ୍ୟଞ୍ଜ ।

ତେବେ ଶିଶୁମାନଙ୍କୁ କରିବାପାଇଁ ପଡ଼ିବ ସମ୍ପୂର୍ଣ୍ଣ ଅକପଟ, କ୍ରୋଧରହିତ, ସତ୍ୟନିଷ, ଧୈର୍ଯ୍ୟଶୀଳ, ସହିଷ୍ଟୁ, ଅଧ୍ୟବସାୟୀ, ସମଭାବାପନ୍ନ, ସାହସୀ, ସଦାପ୍ରଫୁଲ୍ଲ, ବିନମ୍ର, ଉଦାର, ନିରପେକ୍ଷ ଓ ନିୟମନିଷ୍ଟ।

ସେ ଯାହାହେଉ, ଶୈଶବକୁ ଏକ ନୂତନ ରୂପ ଦେବାର ସମୟ କାର୍ଯ୍ୟକ୍ରମ ହେବ ନମନୀୟ, ପରିବର୍ତ୍ତନଶୀଳ ଓ ଗବେଷଣାଧର୍ମୀ । ପ୍ରତ୍ୟେକଟି କାର୍ଯ୍ୟକ୍ରମରେ ଅଗ୍ରାଧ୍କାର ପାଇବ ଆଧ୍ୟାମିକତା ଓ ନୈତିକତା । ଶୈଶବକୁ ସର୍ଚ୍ଚନଶୀଳ, ଓ ସୁଫଳଦାୟୀ କରିବାପାଇଁ ଚାହିଁଲେ, ଏ ସମ୍ପର୍କିତ ଯାବତୀୟ କାର୍ଯ୍ୟାନୁଷ୍ଠାନ ଆରୟ କରିବାପାଇଁ ପଡ଼ିବ ମାଆଠାରେ ଗର୍ଭସଞ୍ଚାର ହେବା ମୁହୂର୍ତ୍ତରୁ । ଏହା ସୟବ ହୋଇପାରିଲେ, ଶିଶୁମାନେ ହୋଇପାରିବେ ଏକ ନୂତନ ଶୈଶବର ସୌଭାଗ୍ୟଶାଳୀ ଉପଭୋକ୍ତା । ଜଣେ ଜଣେ ଯଥାର୍ଥ ଦେବଶିଶୁ ।

> ଅଭୀସ୍ଥା, ସେକ୍ର-୬, ପୁଟ ନଂ-୧୧୩୧ ଅଭିନବ ବିଡାନାସୀ, କଟକ-୭୫୩୦୧୪



ଏକ ବିପୁଳ ଆସ୍କୃହା ମଧ୍ୟରେ ବାସ କରିବା, ଅନ୍ତରରେ ସ୍ଥିର ରହିବା ନିମନ୍ତେ ସାବଧାନ ହେବା ଏବଂ ଯେତେଦୂର ସୟବ ଏହି ଅବସ୍ଥାକୁ ବଜାୟ ରଖିବା, ନିଜର ସକଳ କାର୍ଯ୍ୟକଳାପରେ ଏକ ପୂର୍ଣ୍ଣ ଆନ୍ତରିକତାର ବିକାଶ କରିବା- ଏସବୁ ହେଲା ଚୈତ୍ୟପୁରୁଷଙ୍କ ଅଭିବୃଦ୍ଧି ନିମନ୍ତେ ଆବଶ୍ୟକୀୟ ସର୍ତ୍ତ ।

−ଶ୍ରୀମା



Conscious Child Rearing in the Neonatal, Infancy and Under-five period The Mother's way of rearing from birth of the child to early childhood

Ms. Anuradha Agarwal

What is the parent's first preoccupation once a child is born? For most, it is to ensure the physical comfort, physical needs, physical safety of the child.

To create an atmosphere of care and love. Most parents try to do this initially, to the extent their circumstances allow. It also comes naturally to them due to the bond of love – and hence, it is spontaneous and often unconscious; certain aspects are even mechanical. As the child grows and physical dependence diminishes, the parents' emphasis on discipline starts increasing. Once the child starts school, the concerns turn towards doing well at school, while ensuring basic health and emotional well-being.

It simply becomes a routine and firefighting as and when challenges are presented by variations in the child's behaviour.

How can this interaction be made conscious on the part of the parent? What does the parent need to be conscious of? And, how is that consciousness to be put into practice – towards what results?

The Mother has spoken and written a lot on this subject. The chapters on Integral Education are path-breaking guidelines not just for teachers but for parents as well. To begin with, let us dwell on a few statements by The Mother that can serve as mantras to put into our daily practice..

1. Be an Example: Children are keen observers and they observe the adults mercilessly, without bias. Any deviation between what we say and what we do is vividly clear to

them. This creates conflict in their understanding. As is true for all of us, we emulate more easily what we see others doing, rather than what is asked of us or what we are told to do. Hence, the first step is to work on ourselves and become an example that the child can follow.

The Mother writes, "...the first thing to do, in order to be able to educate a child, is to educate oneself, to become conscious and master of oneself so that one never sets a bad example to one's child. For it is above all through example that education becomes effective. To speak good words and to give wise advice to a child has very little effect if one does not oneself give him an example of what one teaches."

2. Be Worthy of Respect: We often take the young child's respect for granted. As the child grows up and the mind develops, there may come a time when the unquestioning respect is replaced by criticism and rebellion.

The Mother writes: "If you wish to be respected by a child, have respect for yourself and be worthy of respect at every moment. Never be authoritarian, despotic, impatient or ill-tempered. Quite naturally a child has respect and admiration for his parents; unless they are quite unworthy, they will always appear to their child as demigods whom he will try to imitate as best he can." How do we practice this?

If the first point is taken care of, all else follows – because, as we become more and more conscious of our own actions and motivations, we become more authentic and genuine. Love may be spontaneous, respect has to be earned.



3. Tell the Truth: A common tendency is to baby-talk with young children. Children ask very straightforward questions. We may think that our explanation will be beyond them and find it difficult to do justice to their curiosity. The Mother advises otherwise. She writes: "When your child asks you a question, do not give him a stupid or silly answer under the pretext that he cannot understand you. You can always make yourself understood if you take enough trouble; and in spite of the popular saying that it is not always good to tell the truth, I affirm that it is always good to tell the truth, but that the art consists in telling it in such a way as to make it accessible to the mind of the hearer."

Okay, but how can I make it accessible? The Mother goes on: "Up to quite an advanced age ... a narrative, a story, a tale well told teach much more than any number of theoretical explanations." Stories, which young children love in any case, are a wonderful means to communicate the deepest, even philosophical truths to a young child. Use stories consciously.

4. Do not Scold: This is perhaps the most difficult. As adults responsible for the child's safety and of those around the child, we often step in with a big NO or a scolding. It takes a lot of patience and presence of mind to use positive methods to divert the child's attention or refine the desire or tone down the action.

However, The Mother writes: "...do not scold your child without good reason and only when it is quite indispensable. A child who is too often scolded gets hardened to rebuke and no longer attaches much importance to words or severity of tone. And above all, take good care never to scold him for a fault which you yourself commit. Children are very keen and clear-sighted observers; they soon find out your weaknesses and note them without pity. When a child has done something wrong, see that he confesses it to you spontaneously and frankly;

and when he has confessed, with kindness and affection make him understand what was wrong in his movement so that he will not repeat it, but never scold him; a fault confessed must always be forgiven."

5. Do not use Fear as a Tool: Another tool we easily employ is Fear. Instead of scolding, we may try to control the child's behaviour or undesirable action by positing an outcome or a condition that will evoke fear in the child - for e.g. so and so will scold you or beat you or you will not be given your favourite thing or tiger will come and so on. Generally, something that actually has no direct connection and is not an actual consequence of the child's action. This is very harmful. The Mother writes: "You should not allow any fear to come between you and your child; fear is a pernicious means of education: it invariably gives birth to deceit and lying." Fear results in the child hiding its mistakes. It also creates various blocks in the child's psychology that last even when it has grown up.

6. Develop Trust: Instead of fear, one has to develop trust. Love, respect and trust – these three will go a long way in establishing an ease of communication between the child and yourself for years to come. As you may know, The Mother has given a lot of importance to discipline – but this discipline is not through fear or scolding or punishment. It is through a firmness based on kindness and love.

She writes: "Only a discerning affection that is firm yet gentle and an adequate practical knowledge will create the bonds of trust that are indispensable for you to be able to educate your child effectively."

So, one needs to be Conscious of Oneself and one needs to observe in oneself the absence or existence of the traits spoken of. Ask yourself:

 What example did I set today for the child or children?



- Were my actions worthy of respect?
- Was I honest and truthful with the child
 did I honestly and clearly satisfy the child's curiosity?
- Was I able to be firm when required, without using scolding or fear?
 - Did I evoke trust in the child or children?
- What can I change, what can I do better in order to be more Conscious in my interaction with the child or children?

Conscious Child Rearing is a daily practice. The Mother says, "...do not forget that you have to control yourself constantly in order to be equal to your task and truly fulfil the duty which you owe your child by the mere fact of having brought him into the world."

Conscious Child Rearing is primarily about Conscious Parent or Conscious Teacher Rearing.

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Souvenir 2023 THE NEW CHILDHOOD



Prenatal Factors for an Integrally Conscious Newborn

Giselle E Whitwell

Austin, Texas, July 24th, 2023

The beginning of life whether it is a tree, an animal or a human being depends on the many circumstances around which its development takes place during this vulnerable time of growth. How crucial this is in our life time as we are living in a world of great transitions and where it is vital that we learn to birth children that are whole from the moment they are conceived as they hold the key to our human evolution as fully conscious and aware spiritual beings.

We have separated the nature of who we are as human beings into matter and spirit, we are both matter and spirit, one dependent on the other as both are integrally woven together into one harmonious whole. This sense of harmony and wholeness is the state a mother needs to live in particularly when she conceives and becomes pregnant.

Women hold the key in the process of bearing children into this world and hence the quality of our humanity. Who they are as human beings in their totality is conveyed to the fetus developing in their womb imparting the physical, emotional, mental and spiritual aspects. Women need to be honored, protected, given support and need to become aware of the power they have to bring children into the world that have an awakened divine nature that is fully present. In order to achieve this aim they need to cultivate practices that will enlighten and support their lives.

Uppermost is the quality of the inner life of the expectant mother because it becomes a living reality for the fetus. The fetus in the womb will form their personality, sense of relationship with others, view of the world into which they will enter either as one of welcome and joy or one of violence and strife accordingly.

The practices during pregnancy should include aspects and activities for physical wellbeing, time in nature, work that is compatible with

the state of pregnancy, pre-natal yoga, nutritious food, etc.

Emotionally her environment should be one of as little stress as possible, activities that bring her joy and creativity, the arts are ideal to support her during this time especially music in the form of singing, toning and humming. Her voice is a primal and powerful force to instill growth in all aspects of development from the physical to the spiritual. Singing will enhance bonding and transmit acceptance and loving qualities depending on the songs chosen. The resonance and vibration felt through these deeper qualities of singing can impart bliss and joy to the fetus.

Mental guidelines should consider staying away from technological participation in general, keeping a distance from world news, politics, and focus on the ideals and virtues of great masters and teachers through their writings.

Most important and basic are the spiritual practices carried out on a regular basis, including chanting of mantras, sacred prayers, meditation, and devotion to the divine Mother.

The pregnant mother is the first teacher of her child both conscious and unconsciously. Conception, the period of pregnancy during the ten lunar months and the circumstances around birth are the three stages that form a foundation from which the child will emerge and grow into adulthood. With the above mentioned practices, she can offer a blueprint for the child that offers a positive potential for life. She plants the seeds of who this child will become as an adult. We need to reawaken in mothers the gifts they have inherently in their own divine consciousness and give them all the support needed, in order that they can usher in an awakened spiritual humanity that will bring peace and harmony to all life on earth.







How Far

Prof. (Mrs) S. N. Tripathy

Science conducts us step by step through the whole range of creation, until we arrive at length, at God.

Marguerite of Valois, 1594.

In the forthcoming 34th All Orissa Conference of Sri Aurobindo Medical Association, the theme being 'The New childhood', Dr. Shyama Kanungo has chosen two very important panel discussions, one is on 'Prenatal factors for optimal outcome of newborn before delivery' and the other being 'prenatal factors for an integrally conscious new born'.

Mother and Sri Aurobindo had put great stress in Integral development and the ultimate opinion ,it is Divine alone who can do this Integral Yoga. spiritua Then I started searching vigorously what our ancestors have written and practising to achieve the highest goal and how far behind are we.

After writing the Mahabharata and the eighteen great Puranas, the Great sage and writer Maharshi Vyasdev (Fig I) did not feel satisfied with his writings, always he felt incomplete, something he should have written which he has not done. One day Devarshi Narada came to him and advised, if you are so depressed, why do not you write Bhagavatam describing the glory of Param Brahman,. right earnest Vyasdeb started writing the Bhagavatam, the song eternal, at Naimasyaran. I had the privilege to visit the place. Saw the Vyas gadi and Vyas Peeth. Recently we had our Annual conference of ISOPARB in Meerut, and I had an extreme desire to visit Sukteerth of the Mahabharata where the great sage Sukdeb, the

son of Vyasdeb recited the Bagavatam for the first time under a Banyan tree on the banks of river Ganges to King Parikshit, the grandson of Pandavas of Dwapar Yuga along with Devas, Rishis and ordinary people in lakhs. The Banyan tree or Bat Vriksha is still existing , (Fig II) though the course of river Ganges has shifted. Due to the grace of Lord Jagnnath I had an opportunity to visit the place and when I was under the Banyan Tree, I was transported back to that age . With everybody I felt as if I am listening to Sukdev and he is reciting, 31 st chapter of the Third Skanda of bhagavatam about how a human being is formed, about organogenesis, about when it starts listening to the voices, when it starts drinking, defecating and what it does while it was inside the womb of the mother feeling like a bird in the cage., how bacteria harass it, and how it remembers its previous one hundred births and prays not to go through this hell anymore and get liberated . I had read Bhagavatam , many a times, early childhood without understanding anything, during my school days. Then during my first pregnancy I got interested in how the foetus develops, what it does or feels. This time I bought a Sanskrit Bhagavatam translated into English published by Gita press Sukteerth and amazed by reading the 31 st chapter of Third skanda of Bhagavatam and could not believe that in 5000 to 6000 how much they knew and still whatever they knew, the modern scientists have unravelled most and verified their truth . Almost 7000 years have gone by, and we have still to travel a lot to reach their level.



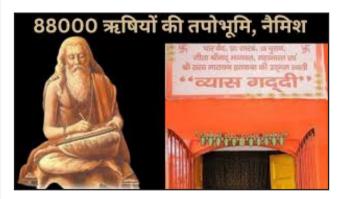


Fig. I



Fig.II

Atharva Veda is a fascinating compendium of medicine in its various stages of evolution. It contains the primitive to the highly developed stages of medicine in different sutras. The Rig Veda is vivid in description of historical facts of medicine while Atharva Veda goes into the details of origin of disease, clinical findings and remedies both medical and surgical. The knowledge was most vivid in some. Veda does not represent the sole medical tradition of India but scriptures like Sahmhitas of Kashyap, Charaka, and Shushruta and Astanga Sangraha. and Astanga Hriday clearly mentions the indebtness of Ayurveda to Atharva Veda. The Kaushika sutra of this Veda imparts superior knowledge about medicine.

Rapid Strides in medicine was made when Sahmhitas came between 600 BC and 200 AD. In obstetrics, Atharva Veda plays a vital role. There is vivid description of the anatomy and physiology of sexual organs, child birth, the indication of surgery for child birth, about menstruation, conception, stages of labour. Various Mantras describe them. Both western and eastern schools have interpreted them but many controversies are still there. Atharva Veda (1,11,5) gives the indication for surgery in obstructed labour, and mentioned about episiotomies, Caesarean Section tubectomies. All these procedures were to deliver the child safe as well as the removal of the placenta from the uterus. The blood supply to the uterus is very well described in the Vedas . How fertilisation occurs is well described. They knew about abortion and how to prevent them by herbs, mentioned abortion as a great loss. They have a beautiful prayer for safe delivery too, it is as follows,

Yatha Bato, jatha mono, jatha patanti pakhina

Esha twam dasmassya shak jarayuna, pataba jarayu padyatam.

As flies the wind, as flies the mind, as flies the winged birds, so do thou, O embryo, ten months old fall along. with the placenta. May the placenta fall down too.

Atharva Veda, 1,11,6.

Organogenesis

Then-

Let us have glimpses about the foetus in the womb of the mother. The stages of growth in human embryo is described in detail in 31st chapter of third skanda of Srimad Bhagvatam. Jagannath Das, the Odiya Bhagvatkar had written,

'A Jiba Je Karm Basare, Purusha Ret Ashrakare



Punh A Deh Dharibaku, Pravesh Janani Garbhku.'

In brief what is described in the scriptures is as follows.

By force of destiny, as directed by providence, the soul destined to become a human being enters the womb of the mother through the generated fluid of a man for the formation of its body. Within 24 hours the sperm unites with ovum and it is rounded into a shape of a bulb in ten days as hard as a plum and later on develops into the shape of a ball. By twelve weeks, all the organs of the body has been formed, 4th month, seven ingredients came into being, by fifth month, the baby feels thirst and hunger, make themselves felt and starts moving inside the mother's womb. It derives its nutrition from the food and drink of the mother consumes and remains in the unhealthy atmosphere of faeces and urine and breeding place of worms. Bitten again and again all over the body by the hungry worms, the creature suffers terrible agony. When mother eats salty, hot dishes the foetus experiences a painful sensation. In the congested space of the womb, the foetus is arched like a bow feeling suffocated in such a position just like a bird in a cage. The foetus is endowed with consciousness from the 7th month, with so much agony the foetus prays to the Lord with folded hands for quick release from the hell ie from the mother's womb. And not to put him in this condition again. Here the foetus remembers all about its 100 previous births. At last with great trouble the foetus issues head first and cries loudly in the dirty environment, meconium, liquor, mother's faeces and urine and he forgets about God, the All Mighty.

Now we can see the foetal development through ultrasonography from the date of conception till the birth and it is exactly the same as described in our Bhagavatam . I was

not believing previously that liquor amnion is infested with bacteria as described in the bhagavatam. But as the micro biota is unfolding day by day and the experiments conducted by the scientists are proving, mother's liquor amnion is not sterile, it is infested with microbiota, again proving the deep knowledge of our ancestors. The human microbiome includes trillions of bacteria, many of which play a vital role in host physiology. Numerous studies have now detected bacterial DNA in first pass meconium and amniotic fluid samples, suggesting that the human microbiome may commence in utero. Bacterial DNA and SCFA(short Chain Fatty Acids) are present in utero, that is now proved by many research articles.

The present definition of health is, "Health is a state of complete physical, mental, social and spiritual wellbeing, not merely the absence of disease or infirmity". It rests on the four pillars of the definition.

Prenatal care, also known as antenatal care, is a type of preventive healthcare in obstetrics; its goal is to have a happy mother and happy baby at the end of the day.

Prenatal care

Then-

Prenatal care is nothing new. We were practising it thousands and thousands years ago, and as we are having guidelines for prenatal care in the twentyfirst century, similar guidelines were given in Sushruta Samhita. The guidelines are, from the day the woman knows she is pregnant, she should be cheerful and happy. She should always be clean, neat and well dressed. She should bathe every day in water mixed with some herbs, specifically neem leaves, the leaves soaked in hot water and the extract must be used. It keeps the woman healthy and free from infection. She should be a devout, and should



worship the early morning sun, offer incense, arati and sandal paste to the family deity. About her nutrition, it is mentioned, she should eat foods she likes. Her food should be appetising and well prepared. Important foods that a pregnant woman should eat are milk, butter, curds, ghee etc.

Charak Samhitha (Fig III) mentions, intake of food plays a great role in the development of the unborn child. The ill effects of some foods on unborn child are well documented. Intake of plenty of sweets will produce a child who is prone to obesity and diabetes. Excessive smoking will produce an anaemic child, and sometimes may cause abortion. Intake of bitter things will produce a child who is weak. Foods producing flatulence will result in a malformed child, and eating of excessive pork, a hairy child. Tangy food eating women will have a baby who will go bald and grey very early in life. It is evident from their conclusion that a woman should take a wellbalanced diet and nutritious diet in right proportions. Excessive Indulgence in any one of the food must be avoided.

Other cares mentioned are, her bed should be soft, and broad enough, not too high or too low, it should have a proper head rest, slanted at a comfortable angle. She should use clean and loose clothes.

Sushruta Samhita has elaborately mentioned what a pregnant woman must not do. A pregnant woman should not overwork and should avoid excessive fatigue. She should not be allowed to carry heavy loads. She should have regular hours of sleep and should avoid late nights and sleeping at odd times. She should avoid tight clothing. Should avoid crowded places and sitting in uncomfortable positions on hard surfaces. Should not suppress her emotions like anger sorrow, joy etc. She should avoid long walks especially when the day is hot and

humid. She should not eat constipating foods, and should not suppress the desire to evacuate. She should avoid alcohol and food that is dry or stale. She should avoid looking down into deep pits and wells. She also should not go to the cremation grounds and empty haunted houses. A pregnant woman should not take oil baths till the 5th month is completed. And lastly the warning given is, if she does not follow the advice, she is likely to abort or deliver a malformed child. Kashyap samhita advocated giving new, pleasing holy and clean gifts to the pregnant woman.

During an eclipse she should stay indoors, pray and be cheerful. Till date my inquisitive mind is not able to get a scientific explanation for this restriction. We thus see that our ancestors were well aware of the optimum care to be given to a pregnant woman.

Whatever we recommend now, our ancestors were advocating it. From Vedantic age there were some guidelines for the pregnant women and they knew that the child is affected by the emotions of the mother, her nutritional status and her behaviour. The in-utero fetus can hear too. Most of us are brought up with Ramayan and Mahabharat stories and know that Avimanyu, the son of Arjun and Subhadra listened and learnt how to enter a chakrabyuha, but could not get out, as his mother had fallen asleep when Arjun was narrating that portion. Prahlad, the great devotee of Lord Vishnu, the son of Hiranyakasyap and mata Kadayu was born in Sage Narada's Ashram, all along in his intra uterine life hearing the name of Lord Bishnu. King Parikhit was saved in the mother's womb by the prayers made by Uttara to lord Sri Krishna. These things now we have discovered and we also know that the fetus can hear and that a good religious song sang by the mother is heard by the foetus and can have good effects on the foetal brain. All these signify, the unborn



child listens and feels the joy and sorrow of her or his mother. In our Veda, Vedanta and Samhitas, it has been written that, the pregnant woman must do Yoga and that too Patnjalis Astang Yoga. If both husband and wife do Gaytri mantra Japa for 3 years prior to conception, a very good baby is born. The modern prenatal care advocates pre-pregnancy counselling and advise. Gayatri mantra Japa by the mother increases the intelligence of the baby. Positive thinking of the mother greatly helps the unborn foetus.

Then the dark age came, not only in Europe but in our country too and it is still persisting. All these are branded as blind belief etc

J W Ballantyne is the pioneer of modern antenatal care. He wrote an article on antenatal therapeutics in 1899. And gradually by efforts of many obstetricians it has evolved to the present stage.

Now there are many guidelines for prenatal care and most of the countries practice the WHO guidelines of 2018. The World Health Organization recommends at least four ANC visits during pregnancy. Indian guidelines suggest that along with a minimum of three ANC visits, a woman should receive two tetanus toxoid (TT) injections and consume 90 or more iron-folic acid (IFA) tablets. The investigation procedures and what investigations are mandatory has been stream lined. In each visit the blood pressure is monitored and weight is recorded and counselling is done about nutrition, sleep, etc. and treatment is given for minor ailments. As a result the maternal mortality and perinatal mortality has been drastically reduced, most babies are born physically healthy. But it is high time that, the mothers should present highly evolved, virtuous children to the society. But how? That is the big question.

The new approach adhere to the teachings of Hippocrates,

'We should learn from the past and research the present to predict the future'.

Mother's womb is the first school of the baby. The chanting of Mantras, Swatik Parivesh, reading religious books in pregnancy, meditation, prayer, good thinking process cause epigenetic changes and helps to have an intelligent Deva sishu. Epigenetics are inheritable and their effects lasts for several generations, then declines gradually. A cultivator when cultivates a land for good crops, he utilises good seeds good fertilisers so also the human beings must utilise all the four pillars of the definition of health to have a good baby.

Scientific advances in the last 20 years have raised the hope that many pregnancy complications are potentially detectable from at least as early as the 12th week of gestation. It has become apparent that most major aneuploidies can be identified at 11 to 13 weeks' gestation by a combination of maternal characteristics, ultrasound findings and biochemical testing of maternal blood. It is also becoming increasingly apparent that an integrated first hospital visit at 11 to 13 weeks combining data from maternal characteristics and history with findings of biophysical and biochemical tests can define the patient-specific risk for a wide spectrum of pregnancy complications, including miscarriage and foetal death, preterm delivery, preeclampsia, gestational diabetes, foetal growth restriction and macrosomia. We have learnt that about 90% of foetuses with major aneuploidies can be identified by a combination of maternal age, foetal nuchal translucency (NT) thickness and maternal serum-free ß-hCG and PAPP-A at 11 to 13 weeks. The first-stage combined screening classifies the patients as high-, intermediateand low-risk and the new markers are examined



only in the intermediate-risk group which is then reclassified as low- or high-. 'This is known as' Inverting the pyramid of prenatal care' (Figure 1) to introduce on a large scale and in a systematic fashion a new model of prenatal care which will be based on the results of a comprehensive assessment at 11 to 13 weeks.

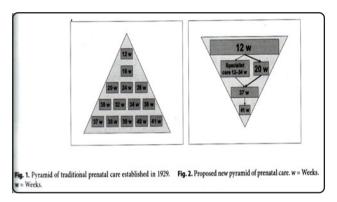


Fig IV

The way forward.

So what is the way forward? Apart from our usual advise and examination in the antenatal clinic we should do counsel about spirituality which consists of Yoga, mainly Astang Yoga of Patnjali. There is no controversy about spirituality. It does help. Some Vedantists are advocating Garvasanskar, to have evolved children to live and uplift the earth. There are 16 types of Garva sanskar and one is on the day of conception. But I do not know much about it, and I am not sure. Though I know some centres in south are doing it with a fee.

Advocating counselling in antenatal clinic seems easy. The reality is but something different, the same story, population explosion, In public or private clinic, the obstetrician examines too many cases, actually she does not have time for counselling. Corporate hospitals does have a counsellor, with a fee, they counsel the pregnant woman about nutrition, Yoga and spirituality. All pregnant women cannot afford

it. When I was working in PP Centre, SCB Medical College, Cuttack, Dr. Hara Prasad Pattnaik was with me. So many cases, we were not able to counsel them individually. So what we did, we published pamphlets about different types of contraception and about ante natal care and were distributing them, We had published it in both English and Odiva. This method we can adopt in our antenatal clinics. be it private or public. Apart from antenatal care clearly it should mention about Yoga and spirituality and how to go about it. The simplest way it can be advised is, to pray morning and evening, to go to temples whenever possible, and to read scriptures and good books, not novels, not to see horror films and so on so forth 'More things are wrought by prayer than this world dreams of.' Opined Lord Tennyson.

'The time has come for science and spirituality to come together.'

Pandit Nehru, October 15th, 1962

The great scientist of our time, Einstein had said,

'Science without religion is lame, religion without science is blind.'

To conclude, in 21st century the science is moving very fast in every aspect, we have discovered the space to certain extent, our Chandrayan is going to land in Jahnmamu shortly, We have now aeroplanes like the Puspak Viman of Ravan, and like our ancestors we have transplanted many of the organs of the human body and knew thoroughly about organogenesis of the foetus and about delivery of a healthy baby. Confirmed the stories, not stories but facts, that the unborn fetus can listen. To support us, now we also have the AI (Artificial Intelligence.) with us.

Which till date we have not proved is, the fetus can talk too. Many of us know about Rishi Astabakra. According to one version of



the legends surrounding Ashtavakra, goes thus -his father was once reciting the Vedas, but erred in correct intonation. The foetus spoke from the womb and told his father about the limited knowledge he was aware of from the Vedic books, there is much more to know apart from these books. The father got angry and cursed him to be born with eight deformities, hence the name 'Ashtavakra'. We can explain it by our modern science that, his mother perhaps was suffering from olgohydraminous., hence the deformity.

If we can achieve what ever is written in our scriptures, why not we practice spirituality in form of Yoga in pregnancy to have a Deva sisu(divine child) endorsed by The Mother and Sri Aurobindo. The physical health of a pregnant woman is taken care of by good nutrition, her social health is good as everybody, behaves nicely towards her, mentally she is very happy that she is going to be a mother, and for the International Yoga Divas, she is well aware of her spiritual health. They have now turned to spiritual health which few years back they were not responding to the advise of their elders. Most of the babies born are now healthy, beautiful, perinatal mortality has reduced. We are in right direction. What I want to convey is that, The day is not far when the Divya Sishu (Fig V) of Sri Aurobindo will inhabit the earth, we are simply the means.

Nimitta Matra Bhaba Sabyasatchi (Gita)

Dear Prenatal Friends, I know When science ends, God Takes over. Pray to God, Surrender to Him, but. Please never forget us, the obstetricians. Spiritual healing is not a substitute for medical treatment, they are complimentary to each other. All healing is from God whether through medicine or prayer or both. With such assurance, a prenatal woman can travel the last of the road and present to the world a child who will change the present s world scenario in a right direction.

Jai Jagnnath



Fig \

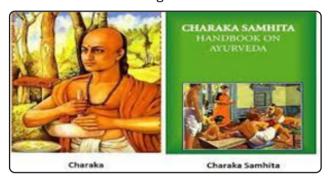


Fig III





Pre-natal Sacraments

Dr. Gopal Chandra Dash

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'Be a man by own virtues and not by mere appearance.

And thus, procure strength to give birth to divine offspring.' (Rig Veda X.43.7)

The Vedic seers have observed that each period of life is a unique opportunity for the soul to wash away the evil impressions it has gathered in previous lives. A chain of such glorious lives leads to emancipation of the soul. However, the period of emancipation is not unlimited and the soul is again embodied after gaining a blissful period of liberation.

The Eternal law of creation with respect to the living beings is such that only the female species has the ability to conceive and deliver children to sustain the posterity. The womb of the expectant mother has been designed as an excellent laboratory where the nature of the incoming child is moulded as per her desire and life-style.

Sushruta has stated: 'Whatever the expectant mother likes or dislikes, that becomes the aptitude of the child to be born'. Manu, the first code-maker of mankind had similarly exhorted: 'Whatever image is drawn in the mind of the expectant mother, that shapes predominantly the behavior of the child to be born'. So much so, the physical and mental condition of the parents during the period of copulation bears a significant effect on the character of the in-coming child.

The above conception has necessitated performance of three Pre-natal Sacraments for the expectant mother. These three are (i)

'Garbhadhana': just before conjugation of the wife and husband (ii) 'Pumsavana': (within two to three months after conception) during the physical development of the fetus and (iii) 'Seemantonnayana': (on 4th or 6th month after conception) during the mental development of the fetus. Each Sacrament consists of a short Agnihotra (Havana) i.e burning the divine fire which converts the macro substances like ghee, fragrant herbal materials like Guggal, Jaiphal etc. into micro level atoms.

These micro atoms spread to the atmosphere by wind and build a healthy and hygienic environment. The Vedic hymns enchanted during the sacrament rejuvenates the mind of the expectant mother. The executing couple performing Havana profusely benefit from the precious sermons of the scholarly priest who enlightens them about their duties and precautions to be taken during the period of pregnancy.

Researchers have gathered information about the life of great murderers' warriors, patriots etc. and have concluded that their lives were largely influenced when they were in their mother's womb.

It is said when Geetu, the murderer of American President Garfield was in his mother's womb, the mother tried to abort him several times. When Nepolean's mother was carrying her child, she was rejoicing the marching parades of French soldiers. The mother of Bismarck while expecting a child used to be mentally upset while witnessing portions of her house being destroyed by the French army. The result was birth of great Bismarck who took revenge on France.



The epic Mahabharat tells us about Abhimanyu. When he was in his mother, Subhadra's womb, Arjun was narrating the technique how to enter the impregnable battle array. It was this influence that enabled Abhimanyu to break the array and enter. While Arjuna was continuing the story how to come out of the array, Subhadra fell asleep and the child in the womb could not hear properly the rest of the story. This resulted in the fall of great Abhimanyu in the battle ground where he could not come out of the array.

Similar instances are available in the life of Astavakra and the sons of queen Madalasa. In ancient India, expectant mothers were often asked to live in pious precincts i.e Ashrams of saints in spiritual surroundings to enable them to shape the nature of the in-coming child.

In modern times, when crimes of violent nature have eclipsed the human society, it becomes the sacred duty of each parent to go through ancient Shastras, remove the orthodoxy and the garb of miracles in them and make efforts to produce vitreous children to glorify the human procreation.



The last stage of this perfection will come when you are completely identified with the Divine Mother and feel yourself to be no longer another and separate being, instrument, servant or worker but truly a child and eternal portion of her consciousness and force. Always she will be in you and you in her; it will be your constant, simple and natural experience that all your thought and seeing and action, your very breathing and moving come from her and are hers. You will know and see and feel that you are a person and power formed by her out of herself, put out from her for the play and yet always safe in her, being of her being, consciousness of her consciousness, force of herforce, ananda of her Ananda. When this condition is entire and her supramental energies can freely move you, then you will be perfect in divine works; knowledge, will, action will become sure, simple, luminous, spontaneous, flawless, an outflow from the Supreme, a divine movement of the Eternal.

The Mother/Chapt-V (Last para)

- Sri Aurobindo

Souvenir 2023 THE NEW CHILDHOOD



Conscious Child Rearing – Neonates, Infants & AMP; Under-Five Children

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Background

The word 'parent' is derived from Latin word 'parens' meaning a person who has produced the offspring or has legal status of a father or mother. Based on this understanding, parenting may be considered to involve biological and legal aspects. This involves providing the child with biological, psychological and developmental needs for physical and mental wellbeing.

By and large parenting may be considered to be a domain of the mother and father.

However, at various stages of life grandparents, other family members, siblings, teachers, care providers and pediatricians have important roles to play. Hence, all the concerned care providers should have a good understanding about child rearing.

However, the roles of mother and father are of central importance. Conventionally, mother is a nurturing figure and father the disciplining authority. Mother is the home maker and father the wage earner. However, with increase in number of nuclear families, father's participation in child care has become very important.

Similarly, working mother is a reality one cannot wish way in today's world. Motherhood is becoming more and more an issue of choice, which in a way is a good trend.

Other factor which is affecting upbringing of children is invasion of our leisure time by satellite channels and other electronic media. This has affected the child – parents and social

relationships. There is limited or no scope for children to imbibe life skills in the nuclear families. Disciplining is mostly restricted to saying 'no' most of the times and punishing. Often parents want their unfulfilled dreams, usually related to acquisition of certain professional degrees and wealth, to be realized in their children.

What is conscious parenting?

In comparison, conscious parenting means becoming deliberate and intentional about what we want for the children we care for. It's making choices about what we bring from our own families and what we choose to leave out.

This pro-active style is essential in establishing healthy patterns for family functioning. It enables parents and caregivers to choose and honour what was good and respectful in their own childhood. It helps them to make choices that are good for them and the children for whom they care.

One of the challenges to conscious parenting is the belief that parenting comes naturally: that it's automatic and you should just know what to do. This belief doesn't allow us to learn from our own and others' experiences.

By and large, parents could be of any of the following three types –

- 1. Permissive let the child do anything and everything
- 2. Authoritarian always prescriptive and dictating



3. Authoritative – setting an example for the child to follow

It is obvious that the third category is the most desirable. But even here, letting the child to grow with an example in front of her / him should also be not a limiting factor and turn the child into a stereotype.

In the words of Sri Aurobindo, "The child was in the ancient patriarchal idea the live property of the father; he was his creation, his production, his own reproduction of himself; the father, rather than God or the universal Life in place of God, stood as the author of the child's being; and the creator has every right over his creation, the producer over his manufacture... We have travelled to another conception of child as a soul with a being, a nature and capacities of his own who must be helped to find them, find himself, to grow into their maturity, into fullness of physical and vital energy and the utmost breadth, depth, and height of his emotional, his intellectual and his spiritual being."

Thus, in the context of conscious parenting, the role of parents is that of facilitators.

If we think about the most fundamental needs of the children for healthy development, they fall in to three categories –

- 1. Adequate Health Care as much as possible of disease-free childhood
- 2. Adequate Nutrition
- 3. Stimulating Environment full of emotional security and warmth

All this is possible only when parents develop a sense of responsibility. It does not begin with the birth of a child but much before that, as outlined below.

Different phases of parenting

"To Educate a Child is to Educate Oneself"

– The Mother

From two individuals to becoming parents is fundamentally a spiritual journey. It applies to both the spouses. This journey has following distinct but interrelated phases.

Pre-conception care – Important considerations are as follows –

Both the parents should have good physical health. Maternal age should be at least 21 years and should be less than 35 years. Maternal weight should be at least 45 kg and height should be 145 cm. Both the parents should have healthy diet habits and should be free from any addictions and habits.

Moreover, being mentally prepared for the child and acceptance of the pregnancy are very important aspects from the point of view of the health of the baby. Any negative thoughts even at this stage can adversely affect the well-being of the child.

In the words of The Mother, "True maternity begins with the conscious creation of a being, with the willed shaping of a soul coming to develop and utilize a new body."

Listening to good music, reading good books, meditation and intimacy with nature help.

Pregnancy, delivery and post-delivery period – This includes following aspects –

Usual care about physical health, balanced diet in adequate amount and safe delivery are very important. Immediate skin-to-skin care to the baby after birth, initiation of breast feeding as soon as possible after birth within one hour and Kangaroo Mother Care (if the baby is Low birth weight or preterm) provide very positive experiences to the baby apart from satisfying the basic needs. Similarly, adequate nutrition is the equally important for healthy growth and



development. It is very important to give exclusive breast feeding for the first six months. After this adequate and appropriate complementary feeds should be added. Breast feeding can be continued for two years and beyond as per the current recommendations.

The sensory organs of the child in womb develop sequentially during the pregnancy. Providing pleasant sensory experiences to the baby in womb helps in development of the child. Similarly, maternal mental stress and depression adversely affect the baby in womb and also the care of the child after birth. Again, listening to good music, reading good books, meditation and intimacy with nature are helpful both for the mother and the baby.

Development of the child in first 2 years is sensorimotor and it involves interactions with environment. Between 2 - 7 years child is in the stage of egocentrism ('child's view is the only possible one'). Egocentrism then gradually gives way to ability to generalize and logical thinking. This means that, in early years parents should focus on creating enough opportunities for sensory experiences (of course, within safe limits) and providing a secure and warm environment. By 4 th year the child starts becoming less dependent and starts developing empathy.

Relationship between the child and the parents (caretaker) is also critically important. It should be based on strong bonding and attachment between the two. Such a relationship leads to secure relationship, better social competence & positive interactions. Preschool attachment relationship between the child and the parents (caretaker) leaves a permanent imprint on the child's mind.

During first five years - period of nonformal learning - it is very important to respond to child's needs and also to communicate with the child in a language that the child understands. The role of native language is very important at this stage. Research has shown that by the time of birth, the neonate brain responds specially to the native language.

Importance of '1000 days'

Over the last few years, a lot of work has been done on this aspect with growing realization about the importance of '1000 days' from development point of view. '1000 days' means the period stretching from conception to completion of first 2 years after birth. Some people also include third year in this broad category –

'Prenatal to 3' phase.

This period is characterized by very rapid brain growth. In fact, by completion of three years the child's brain acquires 80% of the adult brain weight. In addition, there is a very rapid increase in the number of neurons and the neuronal connectivity.

The structure and functioning of the human brain are determined not only by our genetics, but also by our interactions with other people and our environment, as the brain molds itself in response to the inputs it receives. The brain is also the most plastic during this time; in other words, the brain is the most adaptable to the conditions it experiences during this period of life. Because of this plasticity, young children are especially vulnerable to the conditions in their lives and their interactions with key caregivers during the youngest years. Adversity during this time can have far-reaching consequences, but this time can also provide a window of opportunity to build the basis for lifelong resilience.

Although children are incredibly resilient,



exposure to chronic stressors early in life charts a course for physical, cognitive, and emotional health problems that can be costly for families and society to navigate. In fact, many disparities in health and wellbeing are rooted in the earliest years of development. The cost of inaction is an incredible burden for society to bear, and proactive interventions to support families can help ensure that all children have the best chance at reaching their full potential.

In conclusion, it can be said that parenting is an act of responsibility. The parents should be facilitators rather than instructors.

Let us always remember and be guided by what Sri Aurobindo has said: "The children should be helped to grow up into straightforward, frank, upright, and honourable human beings ready to develop into divine nature."

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The sovereignty of mind has made humanity the slave of doctors and their remedies. And the result is that illnesses are increasing in number and seriousness. The only true salvation for men is to escape from mental domination by opening to the Divine Influence which they will obtain through a total surrender.

(10/324) - The Mother



Angel In The Womb

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"What the soul sees and has experienced, that it knows; the rest is appearance, prejudice and opinion"¹

Sri Aurobindo

In this mortal world, soul means Atma the divine consciousness is only immortal . After death the soul leaves the body and also all other worldly mortal belongings of the body in this world and travels taking along with him only two things – 1-past karma and 2-sanskar. These two things are recorded as if in a CD. This soul which is very much a part of the Almighty is again now at the disposal of the Almighty and waits for its further journey. When the karma that the soul is carrying is pure and the sanskar is good then it gets all the blessings of the Almighty to be reborn again as a human being. One who performs good deeds to please god is virtuous and by the power of his/her punya karma he/she gets opportunity to get this human body.

The speciality of the human body is that, only in this form one can earn not only punya(virtues) but also wash away all his previous papa(sins) by the virtue of his good karma. "Human" came from the word humus means mud and that is this body. "Being" means soul or atma, which is energy or divine consciousness. When husband and wife both are planning for their pregnancy and praying before the almighty to get a child with all good divine qualities and have surrendered before god in a selfless manner with the prime intension that the 'angel' in the womb will be instrumental in bringing peace and harmony to this world then they definitely will get all the blessings of the almighty. The almighty will send a pious soul

and the mother now gets an angel in her womb. Now the foetus in the womb is a soul with his new body in formation. So naturally the mother has to nurture both the physical body and the divine soul. Now it is a situation where mother is carrying her own soul, mind and the soul, mind and body of the angel. We all are taking care of the physical body of the mother and the foetus by whatever science has given us but unfortunately the health of the soul is not properly taken care of. Parents want their child to be healthy, peaceful, happy, intelligent and also blessed with divine qualities like forgiveness, compassion etc. They can have all these in their child if they properly plan from the very day they thought about their pregnancy and entire process of having this Sankalpa in mind and executing the plan in a pious manner is all about the process called "Garbha sanskar".

Soul or atma has got five sanskars

- 1. Past birth sanskar.
- 2. Sanskar that it gets from the parents and other family members
- 3. Sanskar that it gets from the environment i-e school, college, work place etc.
- 4. Will power of the atma is also a sanskar so that it can change any of the sanskar in lifetime if it wishes strongly. So one has the power to change one's bad qualities or nature by virtue of this sanskar.
- 5. Innate sanskar or the original sanskar of atma means the divine qualities with wich evry soul has come.

Further there are seven divine qualities with which we all are blessed. They are – Purity,



Peace, Power, Happiness, Love, Wisdom, Bliss. So out of all these sanskaras or attributes of the soul the most important one is the innate or original sanskar. Unfortunately in life time though we are blessed with and hence capable enough to express such qualities most of us fail to do so. Thus we remain unhappy, powerless, impure, and live with hatred and never able to have a taste of what Bliss is. We hardly use the software given to all of us by our Almighty Creator or Parama pita. We impart all the care like good diet, medicines etc for the physical body but we hardly think about diet of our soul. In this present world science is well developed and we are able to take care of a lot of physical ailments of pregnancy. Science of spirituality says that since the grooming of the mind is not taken care of, we are not properly nurturing our soul. The soul is neither getting the right type of diet nor treatment. Now what is the diet of soul and what kind of treatment does it need?. Nurturing the soul and giving the right type of sanskar is all about the process of "Garbha sanskar" and this makes the mother's role more important. That is why it is said-women-are the key to change the society.

Our history and Purana is full of tales of mothers who had given birth to great men in the past. The sanskar the soul gets from the parents and other family members is extremely important. This is why it is said that a woman can bring about transformation in the society. Because it is the woman who gives birth and in the process of giving birth she sows the seeds of sanskar in that child. So sanskar are first created while the baby is in the womb. This "Garbha sanskar" lays the foundation of personality of the child- the little 'Angel' for a life time.

When the soul enters into the womb of the mother it is carrying with it the sanskar of previous birth. Hence it is carrying now with it all the experience of its past life. Because of its past sanskar it might be carrying negative vibrations like anger, hatred, fear, jealousy etc. and also some positive vibrations. Now the soul is in a detached state as it is detached from the other worldly connections and getting nourishment from the mother. In this situation vibrations may be negative or positive of the mother's mind and soul can touch that of the mind and soul of be foetus and vice versa. However since the soul of the foetus is in a detached state the vibrations of mother has got tremendous impact on it and it catches all such vibrations very subtly and retains it for a lifetime. This is the golden period during which if the mother herself remains calm, quiet, peaceful, listens to soulful music, chants Gayatri mantra, chants "OM" takes satwik diet, avoids seeing violent movies etc then the soul in the womb gets all these positive diets and the foundation of divine sanskar in it is laid down permanently. These positive thoughts and behavior of the mother has got so much effect on the soul in the womb that it even heals the negative experiences that it harbours. Hence it is the mother who is giving the diet and also giving the treatment to the soul in the womb. At the same time if mother is radiating negative vibrations like negative energy of anger, hatred, jealousy, violence etc . then the existing negative vibrations can be transmitted to the fetus in utero and affect it permanently in the future life after birth. Personality and character of the soul is therefore created in the womb. It is the moral responsibility of all the parents to create a human being who will be able to bring divine changes in the world.

Influence of the husband and family members also affects the unborn child through the mother who is interacting with them closely. There is also environmental influence over the mother directly and over the soul in the womb



indirectly. Hence the husband and in laws should participate in creating a peaceful, cheerful, violence free, environment at home. In the work place the working mother should also get such an environment. It is a very important to note here that there should be no gender preference either in the mind of the mother or her spouse and in-laws. If you always think and discuss about a male child and a female child is in process of making then the negative vibrations hurts that soul so deeply that it feels unwanted and neglected in the womb. Such a deep wound in the soul gives it a negative sanskar of

hatred and aversion towards the family and society that will manifest in its future life about to unfold. The entire problem and difficulties in the process of Garva sanskar is that, the mother has to change herself and has to adopt all the positive vibrations and divine qualities not only for the entire nine months of pregency but also for at least another four to five year including the period of breastfeeding. The parents have to live like saints for the entire above said period if they want to have a child with all divine qualities like lord Ram. It is not impossible to beget a child akin to Lord ram if they became parents like king Dasaratha and queen Kousalya.

Soul or atma has got three faculties i.e MANA, BUDHI, SANSKAR. Mana or mind creates thoughts, Budhi or intellect takes decisions and then that decision is brought into action. Any action that is done repeatedly becomes our

sanskar. Hence by giving proper inputs we nurture all the above three faculties of being. Nurturing here means making the soul so powerful that every vibration of that soul is right and hence it is able to take right decision in time and bring it into right action. In this world the child is going to face so many challenges. We have got no medicine to make him think in a right way in a right situation and act in right manner. Medical science can only take care of some of your psychiatric illness but it cannot make you think. No thought comes automatically rather it is the effect of the good sanskar that creates right thought in right time. In the near future we will all sooner or later realise that in this world our emotional health is more important than our physical health because now the life style diseases are becoming more common and producing more mortality and morbidity

As told by Yogi, Maharishi Sri Aurobindo in Savitri "All can be done if the god-touch is there" hence let us be wise and use our wisdom to adopt the age old teachings of "Garva Sanskar" so that in each home there will be birth of a divine being.

May Lord Jagannath bless all the angels in the wombs of their mothers and take care since we can help in ushering in a wonderful new world.

Reference: Essays Divine and Human-Ch.Jnana, P.424



Some people carry around them these ideas of despair and depression and are harassed by them. These ideas are contagious, like an illness, and one catches them just as one catches any other illness.

(17/36) - The Mother



Preparation for the enlightened childhood

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I saw them cross the twilight of an age,
The sun eyed children of marvelous dawn,
The great creators with wide brows of calm,
The massive barrier-breakers of the world,
And wrestlers with destiny in her list of will,
The labourers in the quarries of the gods,
The messengers of Incommunicable,
The architects of immortality.

-Savitri (1)

The day is awaiting, when matter shall reveal the Spirit's face (Savitri) and the new world will dawn in this material habitation. The Universal Nature (Mother Prakruti) is programming and progressing towards that goal and vision through her evolutionary ladder. The speed of the progress will gain momentum significantly to arrive at the goal in a much lesser time, if the thinking animal; the man becomes ready to collaborate and listen to the call of The Mother "will you help?". When the receiving capacity of the material world governed by the human mind, will be ready with sincere prayer for the descent of the higher consciousness sitting above the mental world, the new world will be established with the consent of the Universal Consciousness, the **Sachidananda**. For this preparation, the god in man needs to come to the front and lead the conscious movement of the human species. The higher consciousness to house itself in the physical form, shall seek the healthy human body with healthy life force and mind.

Only those who understand this can prepare self and perceive the new creation as led down by our Master; Sri Aurobindo and can

listen to the call of the Divine Mother and collaborate with the Nature for the ascent of her evolution. The man of readiness is hidden in the child. Enlightened childhood is the base for enlightened manhood. With proper preparation, the enlightened children in a larger scale can raise their heads and grow them up as gods' men & women and help the evolution to bring down the new world into this material manifestation at a quicker space. How to prepare the enlightened childhood, who can give birth to the enlightened manhood, while advancing in the journey of life with the passage of years from childhood to adolescent to adulthood? This needs a lot of preparation by the conscious parents, before bringing the child into the earthly atmosphere.

Parents have significant role towards the contribution in the making of enlightened childhood.

The Mother says, the education of human beings should begin at birth and continue throughout life. Indeed, if we want this education to have its maximum result, it should begin even before birth...". Parents must be prepared in their mentality before seeding the mother's womb. Mother's womb must be ready to house the embryo and baby who can invite and receive the soul from the higher planes. We do not know what their hidden in the little embryo which parent seed in woman's womb.

"In a small fragile seed, a great tree lurks, In a tiny gene a thinking being is shut, A little element in a little sperm, It grows and is a conqueror and a sage...."

- Savitri (2)



To build up the new childhood of readiness from the little baby, parents and family members have important role in providing proper nourishment (healthy food) and proper environment, for the growth of the child's bone, muscles, nervous system, senses, life force coursing all parts of body till the end of cells, and the different layers of the mind (Body, life and mind). To build up the child is a significant work. Mother has given emphasis on the vital roles of mothers, and she has given the example of Japan, where children are given topmost importance.... She has said, "They are, here, the center of care and attention. On them are concentrated -and rightly - the hopes for the future. Therefor the most important work assignment to women in Japan is child making. Maternity is considered as the principle role of women..... True maternity begins with the conscious creation of a being, with the willed shaping of a soul coming to develop and utilize a new body. The domain of woman is the spiritual. We forget it often" - The Mother (4).

Childhood is more influenced by the close environment. Sometime the physical environment in the family and education centers, may be good as per the expectations of the adults, but that may not suit the child's inner aspiration. Parents, family members and society may expect the child to develop as per their wishes without caring about the child's own naturality - this creates an imbalance, and the psychic being inside does not get the scope to guide the child due to the perturbed and confused environment. Most of the time due to lack of proper understanding, a child's growth in family and education institutions is tailored by the mechanical methods. Great efforts are needed to guide the children to have good physique, propelling life force and healthy progressing mind, by which they can explore their inner beings; "The Supreme Discovery" (5). Parents and teachers

have to educate and train themselves first and this is the first step to build up an enlightened childhood which will grow towards enlightened manhood. These children can be the pioneers and fore runners for the future gods' world.

A healthy child needs good food & nourishment, child friendly physical environment and activities, education and training on clean habits. The growth and development of children can be measured as specific health indicators have been led down by the modern health sciences. Also, easy to use measuring instruments are available. To prevent many infectious diseases vaccines are given under the National immunization program free of cost. Facilities are available for regular health check up at the public and private health facilities. Parents at home and teachers in schools must be aware, how to take the advantages of these facilities, while rearing the children at their respective places. As we receive children at early age into our Integral education centers, we must be conscious and ready for the above childhealth related activities. Sri Aurobindo Medical Association has developed a school health card which can be used optimally. Interested teachers with little training can do a wonderful job in this regard. School teachers can also be trained in, how to handle the common ailments which children may face in school/hostels and can assess the growth and development of each child.

We humans have six major senses; eye to see, ear to hear, skin to touch, nose to smell and tongue to taste and mind which receive informations sent by physical senses through the nervous system and brain and analyses to direct to act and react. With deficiency of our senses both at physical and training level, the entire process becomes defective and most of the life's activities lose proper direction. Health of sense organs and their proper training are



vital for child's development. As we give emphasis for the health of the body, so we have to give similar emphasis for the health of the life force and mind. Children must learn how to educate their minds to stay calm and balanced – this will help them to receive the universal energy. The enlightened childhood leading to manhood can achieve the state as stated in Savitri—

".....We hear what mortal ears have never heard,

We feel what earthly sense has never felt, We love what common hearts repel and dread.

Our mind hush to a bright Omniscient;"
- Savitri (3)

We teach our children to recite the prayer written by the Mother- "make us hero warriors, we aspire to become...". The child should understand the depth of this prayer and know how to be fearless — and the purpose for which he/she stands. Educating children on this very prayer can give new energy and power to the body's cells and the new childhood will burst

with higher intelligence, driving force and spiritual aspiration. For this we need to have a dedicated system in our Integral education centers & Integral health and healing centers. Our preparation in this direction will be our offering to the Divine Mother.

When planning for a year sow corn.

When planning for decade plant trees.

When planning for life train and educate man.

- Kwan Tsu

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...... for all the actions of life, even the most ordinary, it is demonstrated that if the presence of the ego is suffered (surely to make you understand what it is), it can really lead to an imbalance of health, and that the only remedy is the disappearance of the ego—and at the same time the disappearance of all illness.

11/219 - The Mother



Step wise guidelines of different Vedic Sanskar From pre conception to early child hood

Dr. Gopal Dash, MD, Medical Superintendent SE Railway Hospital, Khurda Rd

Preconception

- Age of marriage Minimum age of marriage for male is 25 yr & for female is 18 yr when man & woman are physically healthy & mentally matured.
- 2. Age of conception Age for child bearing is between 25 to 40 yr. when both sperm & ovum are in healthy & active stage.
- Timing of impregnation (Ritudan) Time of conjugation between 10 to 16 days menstruation which is fertility period of menstrual cycle.
- 4. Improve the quality of sperm of ovum by maintaining celibacy (Brahmacharya) and taking nutritious food.
- 5. Performing Vedic Rituals on the day of ritudan to open up the door for entry of a new reformed soul Atma.
- 6. There should be gap of 02 to 03 years between first and second conception.

During Conception:

- 1. Maintaining celibacy (Brahmacharya) throughout pregnancy period.
- 2. Intake of nutritious food rich in iron and calcium.
- 3. Adequate rest/sleep both day and night.
- 4. Creating a healthy stress free spiritual environment reading of spiritual books and hearing of music and songs.
- 5. Regular health check up (ANC as per requirement).
- 6. Exercise, Asana, Pranayama and meditation.

- 7. Maintaining health and hygiene.
- 8. Chanting of Vedic mantra OM, Gayatri Mantra and Maha Mrutunjaya Mantra.
- Punsavan Sanskar (Pro creation ceremony) conducted in second month of pregnancy for physical development of child.
- Seemantonnayam sanskar (mental development ceremony) conducted at 06 months of pregnancy to take special care of baby.

During Labour:

- 1. Maintaining Health and Hygiene.
- 2. Deep breathing throughout labour period.
- 3. Chanting of Vedic Mantra OM
- 4. Maintenance of proper posture.
- 5. Maintenance of proper hydration and nutrition.

Post Natal:

- 1. Jaat Karma Sanskar Performed immediate after delivery, after cutting umbilical cord and cleaning the baby by writing OM over the tong of the baby the finger and telling "Vedosmi" near the ear of the baby for arousal of sensory organs.
- 2. Naamkaran Sanskar performed 11th day after birth or by one year of age by choosing and giving a name to the baby for his identity in the society.

Infancy and Childhood:

1. Nishkraman sanskar – Performed in fourth month of age by taking out the baby from home to outside environment and exposing the child to sun shine and pure air.



- 2. Anna-prashan sanskar performed in six months of age by providing first outside food to the baby known as weaning.
- 3. Chudakarma or mundane sanskar performed at third year of age by cutting old scalp hair and nails of the baby by a razor for growth of new healthy hair.
- 4. Karnavedh sanskar performed in third or fifth of age by piercing the ear to prevent hernia and wearing jewellery for beautification.
- 5. Upanayan Sanskar performed between eighteen to twelve year of age by providing sacred thread to the child and taking oath to perform the duty towards god, parents and teacher.
- 6. Ved-arambh sanskar it is performed along with upanayan sanskar to provide Vedic knowledge and education to the child.



The seed grew into a delicate marvellous bud,

The bud disclosed a great and heavenly bloom.

The child remembering inly a far home

Even in her childish movements could be felt

The nearness of a light still kept from earth,

Feelings that only eternity could share,

Thoughts natural and native to the gods.

(Savitri)

- Sri Aurobindo



Foundational Stage Education

Dr. Hrushikesh SenapatyProfessor of Education
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Introduction

The National Educational Policy (2020) has laid emphasis on foundational years. Early Childhood Care and Education (ECCE), has emerged as an area of high priority in NEP 2020. The policy has acknowledged the need for strong investments in ECCE with a target to ensure that all children entering Grade I are school ready. The structure of school education has been changed, which reflects the importance of early years of a child's life. The policy replaces the existing structure of school education, i.e. 10+2, with a new curricular and pedagogical structure of 5+3+3+4 design, keeping in view the developmental needs and interests of learners at different stages of their development. The first stage is the foundational stage where 3 years of pre-schooling/Anganwadis will be integrated with Grades 1-2 and the focus will be on the holistic development of the children. There will be a strong base of Early Childhood Care and Education (ECCE) from the age of three years, which will promote overall learning, development, and well-being. Along with foundational learning and literacy, importance will be given to the development of socioemotional and behavioural aspects of the personality. It is for the first time that a National Curriculum Framework for the Foundational Stage was released in October 2022 as per the recommendation of NEP 2020 for the effective implementation of ECCE all over the country.

Balvatika

Significance of Early Years



Early childhood years, build a strong foundation for development, well-being, and lifelong learning. These early years of life are 'critical' in any child's lifespan since the rate of development is comparatively more rapid at this stage than any other stage of development. If the child does not get a stimulating, psychosocial environment in these years, the chances of the brain developing to its full potential are considerably, and often irreversibly, reduced.

A young child's brain requires a certain type of stimulation to develop properly. Thus for a large number of children from disadvantaged background who are 'at risk', good quality Early Childhood Care and Education (ECCE) has proven to be usefulby providing more equitable opportunities, which benefit not only the school performance of children but also have an impact on lifelong learning and development.

Early year's education plays a very pivotal role in child's life. It offers an enriched environment, educational simulation and many socialization opportunities for children who are of the same age group. It plays an important role in preparing children emotionally, mentally, socially and physically for formal school education and lifelong learning.

Highlights of NEP 2020

NEP 2020 mentions that every child at foundational stage (3-8 years old) must have



access to free, safe, high quality and developmentally appropriate Early Childhood Care and Education (ECCE).

ECCE provides the opportunity for stimulating brain development leading to holistic development (physical, motor, cognitive, language, creative and aesthetic, socioemotional) and lifelong learning. Experiences of ECCE should be extended to Classes I and II also.

The NEP 2020 recommends flexible, play-based, activity-based, and inquiry-based learning, comprising of alphabets, languages, numbers, counting, colours, shapes, indoor and outdoor play, puzzles and logical thinking, problem-solving, drawing, painting and other forms of visual art, craft, drama and puppetry, music and movement for ECCE. It also includes a focus on developing social capacities, sensitivity, good behaviour, courtesy, ethics, personal and public cleanliness, teamwork, and cooperation.

The vision of the policy is to instil among learners a deep-rooted pride in being Indian, not only in thought, but also in spirit, intellect, and deeds, as well as to develop knowledge, skills, values, and dispositions that support responsible commitment to human rights, sustainable development and living, and global well-being, thereby reflecting a truly global citizen.

Development of Child: Indian context

India possesses a rich range of traditions and practices for stimulating all-round development, including developing values and social capacities in young children. Childhood experiences vary considerably across India with factors such as religion, caste and class, gender, and location. Every child has the right to life, survival, development, education, protection and

participation. Hence, there is an urgent need of addressing the mental, emotional, cognitive, social and cultural development of the child in totality.

NCF-FS 2022 has laid emphasis on *Panchakosha Vikas* (Five-fold Development). The description of *Panchakosha* in the *Taittiriya Upanishad,* is one of the earliest articulations of different domains of the development of human beings. The *Panchakoshas* remain relevant even today along with the modern understanding that has emerged through the given fields: Developmental Biology, Psychology and Cognitive Neurosciences.

The concept of *Panchakosha* also covers the different domains of development as envisaged in Early Childhood Care and Education (ECCE). For holistic development to take place, it is necessary to impart experiences to children in all the *koshas*/domains.

Foundation Stage Education, especially Balvatika

Foundational stage education follows age specific and developmentally appropriate curriculum through play way and activity based approach for holistic development and leading to the achievement of foundational literacy and numeracy; teachers strive hard to make the entire learning process enjoyable for all categories of learners.

Activities are conducted in all areas of development like physical, motor development, language development, cognitive development and creative and aesthetic development. These areas of development are interrelated and interdependent. For example, social and emotional experiences influence teacher/child or child-child/parent-child relationships; physical and motor skill activities influence language, communication and thought process etc. All domains are given equal weightage.



Domains are mapped to curricular goals, competencies and learning outcomes. The curricular goals for Preschool/Balvatika in NCF-FS 2022 have been drawn from the vision of NEP 2020, keeping in view the koshas/domains of child development.

Curricular Goals

The curricular goals and competencies in Balvatika aim at holistic development of children. Teachers are expected to ensure that each concept or skill is addressed in a variety of ways during the transaction of the curriculum (toy based pedagogy, story-telling pedagogy/ theme-based pedagogy). Opportunities have to be provided to children to construct their learning by exploration, investigation, problem-solving and critical thinking thus, achieving the learning outcomes given in NCF-FS 2022. Teachers need to align the activities, experiences, content and pedagogy in order to achieve the learning outcomes while giving the opportunities for play, exploration, discovery, problem-solving, etc. Competencies and Learning Outcomes have been defined in NCF-FS 2022 and they help in planning and organising the content, deciding the pedagogy, and conducting assessment for achieving curricular goals.

Approach to Education at foundation stage

A safe, secure, comfortable, and happy classroom environment can help children learn better and achieve more at the foundational stage. Care and responsiveness with ample opportunities to experience, experiment and explore are the hallmark of pedagogy at this stage.

Play and activity based approach with age-specific and developmentally appropriate toys, stories, play equipment and learning teaching material etc. are essential. Children enjoy learning through several ways - talking,

listening, using toys, painting and drawing, singing, dancing, running and jumping

- Conversations
- Storytelling
- Toy-Based Learning
- · Songs and Rhymes
- Music and Movement
- · Art and Craft
- Indoor Games
- Outdoor Games
- · Spending Time in and with Nature
- Field Trips
- Organizing the Environment Awareness Programmes

Pedagogy

National Curriculum Framework for Foundational Stage (2022) has recommended the followings.

Planning for teaching: Panchaadi/ Panchapadi, a five-step learning process (Adhiti, Bodh, Abhyas, Prayog, Prasar), Differentiated Instruction, Scaffolding and Gradual Release of Responsibility

Building positive relationship with parents, families and community is important.

Four Block approach of teaching for Literacy Instruction and Mathematics (ESLP) {Experience, spoken language, pictures, written symbols}

{Oral math talk, skills teaching, skill practice, math game for reinforcing learning/problem solving}

Creating classroom norms with children around Self- Discipline and positive classroom behavior.

The medium of instruction will be the home language L1 in the Foundational Stage.



Domains	Curricular Goals
Annamayakosha and Pranamayakosha (Physical Development)	CG-1 Children develop habits that keep them healthy and safe CG-2 Children develop sharpness in sensorial perceptions CG-3 Children develop a fit and flexible body
Manomayakosha (Socio- emotional and Ethical Development)	CG-4 Children develop emotional intelligence, i.e., the ability to understand and manage their own emotions, and respond positively to social norms CG-5 Children develop a positive attitude towards productive work and service or 'Seva' CG-6 Children develop a positive regard for the natural environment around them
Vijnanamayakosha (Cognitive Development)	CG-7 Children make sense of the world around them through observation and logical thinking CG-8 Children develop mathematical understanding and abilities to recognise the world through quantities, shapes, and measures
Language and Literacy Development	CG-9 Children develop effective communication skills for day-to- day interactions in two languages CG-10 Children develop fluency in reading and writing in language 1 CG-11 Children begin to read and write in Language 2
Aesthetic and Cultural Development	CG-12 Children develop abilities and sensibilities in visual and performing arts and express their emotions through art in meaningful and joyful ways
In addition to the above curricular goals, Positive Learning Habits is another relevant goal	
	CG-13 Children develop habits of learning that allow them to engage actively in formal learning environments like a school classroom



Children will be immersed in multiple **oral** languages as early as is possible.

Reading skills will first be developed in L1 through picture and story books, read aloud books, shared reading, guided reading, and more independent reading through graded readers, with interactive activities involving poetry, songs, literature, drama, games to enhance learning.

Writing skills will be developed in L1 through drawing, labeling, spelling, writing workbooks, inventive games requiring writing, and other forms of guided writing followed by more independent writing of words, phrases, and then complete sentences in meaningful and creative contexts.

Methods and Tools of Assessment: Checklist, Event Sampling, Portfolios, Photographs, Artifacts, and Work Samples, Worksheets; Analysing Children's Responses for Effective Teaching- Learning; Documenting and Communicating Assessment

Along with the above pedagogical considerations, early identification of children who are 'at risk' for developmental delays and disabilities is very crucial for timely intervention.

Adult supervision must always be present. No physical violence or corporal punishment with children. Adults must not bully, harass, or intimidate children even by implication or covertly. Teachers must intervene inappropriate behavior. Zero tolerance of child sexual abuse. Teachers and all other adults must be aware of child sexual abuse, and the POCSO Act.

The curriculum is now process oriented and enhances competencies in spiral mode as children come from various contexts/ECE models and may or may not have experience of equitable quality. That is why, at least the first three months of class I should ensure that all students

are school ready, an interim 3-month play-based 'school preparation module' known as 'Vidyapravesh' should be used for all Grade 1 students consisting of activities and workbooks around the learning of alphabets, sounds, words, colours, shapes, and numbers, and involving collaborations with peers and parents.

Young children have multiple needs like health, nutrition, protection, education which need to be fulfilled for optimal growth and development. There should be **convergence** between all stakeholders such as policy planners, administrators, implementers, providers, parents and community and also between, different ministries, departments and sections within departments, dealing with different components of medical, health, care and early education.

Concerns

- There is increased recognition of the social consequences of neglecting development throughout childhood. Hence, there is an urgent need of improving the quality of foundational education and parental education. This perspective is strengthened by an increasing recognition of the need to ensure the sustainability of recent gains in child survival by empowering parents with knowledge and skills about child survival and development.
- The first two years are characterized by rapid growth and some of life's most significant learning experiences-including walking and talking, encountering fear and pleasure, and discovering oneself and others. It requires a very supportive physical, emotional, and social environments for the development of critical brain structures and behavioural skills. Programmes for children in this



- age-group must protect their physical integrity and provide them with the diet needed for their growth. They must also promote their psychological, social and emotional development and intellectual curiosity in a climate of affection and security.
- The period between the ages of three and six rapid physical and mental development takes place. Children gain confidence in their bodies, strive for independence by doing things on their own, and experiment with objects in the surrounding environment. They show a curiosity, enjoy the company of other children, and seek to imitate adult behavior. They learn to assert themselves as individuals and begin to acquire selfcontrol and discipline. During this period, children's intellectual and social development proceeds apace, as illustrated by their acquiring sophisticated language skills and adopting culturally acceptable behaviors. While the health needs of children in this age-group still require constant attention, it is essential that they be provided with challenges that respond to their enormous thirst for learning and be prepared for symbolic and logical thinking, required in formal schooling.
- Children construct knowledge. From infancy children are mentally and physically active, struggling to make sense of the world. Children construct their own knowledge through repeated interactions with people and materials. Throughout childhood, these mental constructions are continually reshaped, expanded and reorganized by new experiences.

- Children learn through social interaction with adults and other children. The development of higher-order mental functions, such as conceptualization, begins in social interaction and then is internalized psychologically. The principle of learning is that children can do things first in a supportive context and then later independently and in a variety of contexts. The support of adults and more competent peers provides the necessary assistance or "scaffold" that enables the child to move to the next level of independent functioning.
- Children learn through play. Children's spontaneous play provides opportunities for exploration, experimentation, and manipulation that are essential for constructing knowledge. Play contributes to the development of representational thought. A child expresses and represents his or her ideas, thoughts, and feelings when engaged in symbolic play. During play a child learns to deal with feelings, to interact with others to resolve conflicts, and to gain a sense of competence. Perhaps most important, it is through play that children develop their imaginations and creativity. Children's interests and "need to know" motivate learning.
- Child development and learning are characterized by individual variation. Each child has an individual pattern and timing of growth and development as well as individual styles of learning. Children's personal family experiences and cultural backgrounds also vary. In view of this, decisions about programmes and assessment may be as individualized as possible.



Challenges at foundational stage Risk of early instruction

Children are energetic, curious, and eager to learn. Their bones and muscles are still in the process of developing consequently sitting for long periods at a task tires them out, Heavy school bags or sitting in slouched positions for writing can adversely affect their posture and physical development. Their fine muscle coordination, particularly of eyes and fingers needs strengthening. Their attention span is limited to a maximum of 7 to 15 minutes. Their thinking is perception bound and limited to concrete objects and events. Logical and abstract reasoning is yet to develop. Their listening comprehension and social skills are still inadequate for group interaction. Problem is that ECCE practiced today is not in keeping with these aspects at all. Pressure points like teaching reading, writing and arithmetic to children at an early age using methods that are not childfriendly or appropriate like giving them pencil and making them write in four line notebooks, making them learn tables, addition, subtraction etc.

Assessment

Assessment at foundational stage is done to recognize and encourage strengths, identifying areas that need additional support, and addressing learning/developmental gaps. During the foundational years of learning assessment should be formative, stress-free and non-competitive also to diagnose learning gaps. Assessment should also provide opportunity to teachers to review, reflect, and modify their pedagogical practices and help them to provide remedial or referral to students on time. NEP 2020 suggests robust system of continuous formative/adaptive assessment to track and thereby individualize and ensure each student's learning. But unfortunately this is not the case.

Majority of schools do assessment using worksheets and give marks, which makes parents anxious and they start comparing and pressuring children. Both school administrators/teachers and parents need to be oriented.

Inclusion

Education should be inclusive which means involving all irrespective of gender, special need, disability, social class cast etc., where all children are given individual attention, all children play and learn together, and teachers teach them all together regardless of their learning levels. An inclusive teacher respects and understands that each child is special and has unique abilities and has their own culture and socio-economic background.

Arrangements for special equipment or any reorganization of space necessary for a lesson should be made by teachers. Quality classroom processes must promote the appropriate use of materials, facilitate the development of targeted skills, and promote positive behaviour among all children. For creating an inclusive environment, changes in lighting, noise level, visual and auditory input, the physical arrangement of the room, furniture or equipment, and accessibility of materials are all and equally important considerations. The activity areas or type of activities chosen must encourage social interaction among all categories of children, including children with special needs. All children should be made to feel welcome. It is thus important to create an inclusive environment for all children, especially those who are at risk of marginalization so that there is in the child a sense of self-esteem, comfort, and encouragement.

Advocacy

Advocating parents/community about quality ECCE, benefits of attending an ECCE programme, extending ECCE pedagogy i.e. child-



centered play-activity based in early grades and advantage of instruction in home-language/ mother tongue etc. along with sharing success stories, or finding solution to a problem in learning at foundational stages is matter of great importance. The community of advocates and implementers should organize strong advocacy programmes (for all stakeholders) using mediaresources, folk songs, street plays, puppet shows etc. to sensitize on factors that promote learning. Efforts should be made to make school visible by organizing events where the community can participate like festival celebrations, children fair and sports events etc.; parents and community members can be encouraged to help in organizing and managing such events.

Conclusion

National Education Policy 2020 is a revolutionary and progressive policy that strives to overhaul the Indian education system with an aim to make India a knowledge superpower. The policy aims to achieve a 100 percent Gross Enrolment Ratio (GER) in school education by 2030 and 50 percent GER in higher education by 2035. Recognizing the fact that over 85% of a child's brain development occurs at an early stage, the policy has proposed a structure of school education, i.e. 5+3+3+4, with a strong base of Early Childhood Care and Education (ECCE). With a wide choice of subjects with no hard separation among different subjects and disciplines: the holistic 360-degree multidimensional report will be the hallmark of the new system of curriculum and pedagogy. Notably, the policy recommends to increasing public expenditure on education from the current 4.43 percent to six percent of the GDP. Thus, the Education Policy 2020 is a step in the right direction and it will bring about a transformation in the entire system of education. To achieve universal foundational literacy and numeracy in primary school by 2025, a National Mission on Foundational Literacy and Numeracy, namely

NIPUN Bharat has been established. The National Curriculum Framework for Early Childhood Care and Education has been released in October 2022, and the development of the National Curriculum Framework for School Education, Teacher Education, and Adult Education is in process. All these will bring about a transformational change in the entire spectrum of education in India.

In order to implement this policy in the true spirit, particularly at foundational stage there is a need of overcoming many challenges, such as providing quality education to all categories of learners coming from the varied socio-economic background, bringing about reform in curriculum, pedagogy, and assessment keeping in view the challenges of 21st century, providing mother tongue-based education, particularly to the children whose mother tongue is different from the state language, bringing reforms in the existing teacher education programs keeping in view the requirement of foundational stage. The most important challenge is to strengthen the government schools, particularly the schools run by the state governments, which would help in achieving the goal of creating an equitable and vibrant knowledge society. Without a very strong political will and cooperation from all sectors, it would be difficult to overcome the challenges. Now, it is high time that we should try to overcome the challenges with a very strong political will and support from all sectors for the smooth implementation of NEP 2020, particularly at Foundational stage, to make India a knowledge supper power.

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Souvenir 2023 THE NEW CHILDHOOD





The Sensitive Unborn and Epigenetic Inheritance

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Baby in utero is unborn visitor to the Earth. Science of epigenetics shows us how environment affects us both while in the womb and also outside, on the life's journey till tomb.

The Vedas and the Geeta opine about divine fortification of baby in the intrauterine life and channeling of memory of present birth to the next birth. Examples of divine fortification in utero (as per the Puranas) are wisdom of Astabakra, devotion of Prahallad, gallantry of Abhimanyu, birth asphyxia rescue of Parikshita by Lord Krishna.

Examples that we observe are unique expertise in different life skills in early childhood, that reflect the previous birth memories of children and how the IQs of some children are better than others, as explained by Lord Krishna.

G 4/5 - Bahunime Byatitani Janmani Taba Charjuna Tanyaham beda Sarbani Natwam betha paramtapa

O Arjuna we have experienced many births beforehand together. All of them, I remember, but you do not remember those.

G 6/43 - Tatra Tang buddhi Sanjogam Labhate paurba dehikam Tatateto Tato Bhuyaha Sansidhau Kurunandana

That means one acquires previous birth intelligence easily in the present birth, which potentiates their strive to achieve the goal, i.e., achieve divinity in the present birth.

These are the visionary statements of lord Krishna and science is yet to prove it. However, when the fetus's auditory system formation is complete from 24th week of gestation onwards, it memorizes and responds to the mother's voice and it's character is determined based on the mother's experiences and practices. If a mother suffers from stress and anxiety while carrying the baby in- utero, the born baby either suffers from autism or manifests behavioral disorders.

Chanting of the Gayatri Mantra, while knowing it's meaning, by both the husband and wife before preparing for conception, will bring epigenetic change in their sperm and ovum respectively, so that on their union, if conception occurs, a divine baby will be born. This might be due to gene activity regulation as hypothesized by Prof. Annie Ferguson - Smith of Cambridge University. Our Bhagabata also depicts that Basudeva and Debaki, in their previous birth, performed 100 years of Vedic Penance which resulted in the birth of Lord Krishna in their next birth. Also lord Krishna, when he married Rukmini after abducting her, asked Rukmini what she desired from him. Rukmini desired a son with features similar to Sri Krishna. Lord Krishna told her, that both would have to maintain celibacy for 12 years with penance to get such a baby, which they actually practiced and Pradyumna was born to them.

Barker Hypothesis suggests that adult diseases have their origin in prenatal environment. Prof. Marcus Prembrey, a Geneticist at University College London, Bristol has defined epigenetic change as change in our genetic



activity without changing our genetic code. Environmental factors like smoking, drug abuse, alcohol abuse and dietary habits, pollution, war as well as the experiences of women during pregnancy, can leave a genetic memory with markings in the cell DNA that may affect up to 3 future generations. Bisphenal, a chemical component of plastic bottles, has been shown to cause obesity in rats for up to 3 generations, when given water in them. Hence in order to avoid several malformations in future children, one has to be very vigilant. The garvasanskaras as promulgated in Aryan culture such as garvadhana. pumsavana sanskara. simanthonayana sanskara and jatakarma sanskara should be practised to facilitate the

conception, to potentiate the energy of intrauterine baby, to impart spiritual influence in their mindset of the baby in-utero and after birth respectively.

To summarize, medical science is gradually unraveling the truth that the intrauterine life is one of the most sensitive stages in the life of a human being. The behaviors and experiences of the parents have an epigenetic influence on their sperm and ovum which are imparted to the fetus in-utero. The fetus can hear and learn while in uterus before birth. Thus, the science of epigenetics is revealing the influence of environment on the growing baby in utero with ongoing research activity.



And All and Nothing were a single term,
An eternal negative, a matrix Nought:
Into its forms the Child is ever born
Who lives for ever in the vasts of God.
Savitri (Page100-101) - Sri Aurobindo



Intervention During Pregnancy In All Three Trimesters For A Newborn That Will Ensure Healthy Childhood And Later Life

Prof. Dr. Ajit Kumar Nayak HOD, Dept. of O&G, FM Medical College, Balasore

Maternal undernutrition, infections and chronic diseases carry a high risk for poor maternal and neonatal health.

In order to attain optimum level of health during pregnancy and the best possible maternal and neonatal health outcomes, regular antenatal check-up with improved screening, effective interventions need to be delivered during preconception period and throughout pregnancy.

A mother's body needs time to recover fully from pregnancy and childbirth. She needs to regain her health, nutritional status and energy before she becomes pregnant again. For the health of both mothers and children, a woman should wait until her last child is at least 2 years old before becoming pregnant again. So, healthy spacing of pregnancy prevents small for gestational age (SGA) and preterm births.

During pregnancy, interventions including antenatal care visit model, iron and folic acid supplementation, tetanus immunisation, prevention and management of malaria, prevention and management of HIV and PMTCT, calcium and anti-hypertensive for hypertension, anti-platelet agents (aspirin) for prevention of pre-eclampsia, management of hypertensive disorder in pregnancy/eclampsia, external cephalic version for breech presentation at term (>36 weeks), management of preterm labour, premature rupture of membranes, management of unintended pregnancy and other high risk obstetric cases.

One of the best ways to protect the newborn is to stop smoking, drinking alcohol, and using drugs before becoming pregnant or as soon as possible during pregnancy. There's no safe amount to drink or smoke during pregnancy. Both can harm baby's health.

Use of folic acid three months before conception to three months after conception, is known to reduce the risk of a first occurrence and a recurrence of neural tube defects (NTDs). Folic acid deficiency has been linked to adverse outcomes of pregnancy like LBW, antepartum haemorrhage and perinatal mortality. It is recommended that all women of childbearing age should consume 0.4 mg of folic acid per day for the purpose of reducing the risk of a pregnancy with NTDs. Periconceptional folic acid intake also prevents occurrence of cleft palate.

During pregnancy, mothers who have iron deficiency anaemia have a higher risk of neonates being born either prematurely or with LBW. Regular Iron and folic acid intake during pregnancy aids in prevention and treatment of maternal anaemia.

Use of injectable iron like iron sucrose and iron carboxymaltose are quiet safe during pregnancy in moderately anaemic women and is very much useful for rapid rise of haemoglobin level as well as prevents blood transfusion.

As malaria infection is a very common problem in our locality, prevention and management of malaria in pregnancy is crucial to have good maternal and neonatal outcome. Prophylaxis, intermittent prevention, treatment and insecticide treated bed nets or curtains are useful.

Prevention and management of other infectious disease is also important to have optimal maternal and neonatal outcome.



Treatment of syphilis is associated with a reduction in preterm delivery and baby born with syphilitic stigma. Though, routine TORCH infection screening is not recommended in all pregnant cases, but women at risk or having bad obstetric history (BOH) or previous baby affected with such infection should be screened and management is to be done accordingly.

Dating obstetric scan by measuring CRL is important to know the exact period of gestation particularly pregnant women who are not sure of her LMP and having irregular menstrual cycle or those who have conceived within 6 months after stoppage of oral contraceptive pills. It is very much important particularly women who need intervention like CVS, amniocentesis to treat prematurity and post dated pregnancy.

Combined integrated testing should be done for detection of foetal aneuploidy which includes genetic sonogram (NT, NB, DV flow, TR) and dual marker testing(serum HCG,PAPPA) in between 11weeks to 13 weeks 6 days of GA & quad marker testing (serum B-HCG, AFP, unconjugated estriol, inhibin-A) with TIFA scan (including USG markers for trisomy) between 18 to 22 weeks of pregnancy.

Detection of cell free fetal DNA in maternal blood and its genetic analysis is the principle for NIPT. Non invasive prenatal testing (NIPT), though costly is to be offered to elderly pregnant women who are screened positive and high risk for having aneuploidy fetus, as the sensitivity of NIPT is as high as 99%.

Early anomaly scan between 11-14 weeks and TIFA scan between 18-22 weeks is a must to detect birth defects. Any major birth defect if detected during pregnancy can be terminated.

Fetal Echocardiography is to be done at 24 weeks onwards in indicated cases to detect fetal cardiac defects so that foetus having lethal cardiac malformation can undergo immediate termination.

As preeclampsia and eclampsia are associated with poor maternal and neonatal outcome, so its screening by mean arterial pressure (MAP) measurement, serum PIGF, sFlt estimation and uterine artery PI study in colour Doppler are mandatory to have a good maternal and neonatal outcome.

Use of gestosis scoring is very much useful to identify the pregnant women who are at risk of developing preeclampsia and eclampsia, so that aspirin and high dose of calcium can be started early (before 16 weeks of GA) to prevent the occurrence of both.

Serial measurement of SFH, abdominal girth and maternal weight gain during routine antenatal check-up to detect fetal growth restriction (FGR) and macrosomia.

Universal thyroid function test, particularly estimation of serum TSH, FT3 and FT4 during early pregnancy check-up in order to detect both subclinical and overt hypothyroidism. L-Thyroxine supplementation during pregnancy with hypothyroidism will prevent preterm labour, abruptio placenta, miscarriage, gestational hypertension, PPH, mental disability, growth delay, loss of hearing in newborn.

Universal screening for haemoglobinopathies by doing HPLC (to know haemoglobin pattern) in all pregnant women during early ANC & offering prenatal testing like chorionic villous sampling (CVS) in first trimester and amniocentesis in second trimester to detect fetal hemoglobinopathies are of paramount importance in women who are affected by thalassemia and sickle cell anaemia. In pre-natal testing, those fetuses detected with thalassemia major or sickle cell disease pregnancy can be terminated.

Universal screening for GDM during early ANC, at 24 -28 weeks and at 32-34 weeks of gestation by 75gram 2 hour oral glucose tolerance test as per DIPSI guideline.



Proper management of GDM and Type 2 DM during pregnancy with medical nutrition therapy and use of insulin/metformin in appropriate dose adhering to strict glycemic control (i.e. FBS-95mg/dl, 1hr PPBS-140mg/dl and 2hr PPBS- 120mg/dl) to prevent both maternal and neonatal complications.

Obstetric scan in last trimester for late evolving fetal malformation, foetal growth and biophysical profile in order to diagnose and manage FGR, macrosomia and other high risk obstetric cases.

Colour Doppler study of uterine artery, umbilical artery, MCA and Ductus Venosus flow for managing FGR and other high risk obstetric cases.

Routine antepartum Anti D immunoglobin administration at 28 weeks & at 32 -34 weeks in Rh negative pregnancy who are ICT negative having Rh Positive husband.

MCA PSV Doppler study in Rh isoimmunisation cases for early detection of foetal anaemia. Intra uterine transfusion for foetal anaemia have good neonatal outcome.

Immunisation during pregnancy (tetanus toxoid [2 doses of TT], reduced diphtheria toxoid[Td] and acellular pertusis[Tdap between 27 to 36 weeks], inactivated flu vaccine (if somebody is pregnant during flu season) plays a very crucial role to optimise both maternal and neonatal outcome.

Hepatitis B vaccine is found safe to be administered during pregnancy, if pregnant women is not fully vaccinated against Hepatitis B before.

HIV, HBsAg and HCV screening to be done during early pregnancy as routine antenatal investigation.

Early initiation of HAART in HIV positive pregnant women to prevent mother to child transmission.

Both active and passive immunisation of neonates born to Hepatitis B positive mother should be done within 24hours of delivery.

Routine urine culture and sensitivity test to be done in all pregnant women in addition to urine for routine and microscopic test. Treatment of asymptomatic bacteruria prevents preterm labour.

Antenatal corticosteroid in preterm labour between 24 to 34 weeks of gestation to prevent hyaline membrane disease/RDS, intraventricular haemorrhage, periventricular leukomalacia and necrotising enterocolitis.

Dose of antenatal corticosteroids: either intramuscular injection of dexamethasone 6mg 4 doses 12 hourly or injection betamethasone 12 mg 2 doses 24 hour apart, the effect of which lasts for one week, maximum benefit to newborn occurs if delivery is conducted 24 hours after completion of corticosteroid.

Use of short term tocolytics in preterm labour and use of progesterone in threatened abortion, early preterm labour and those women having short cervical length to prolong the pregnancy till term.

Timely cervical encirclage in case of recurrent pregnancy loss due to cervical insufficiency helps in continuing the pregnancy till term so that a term baby can be delivered.

As multi-fetal gestation incidence is increasing due to ART for infertility, early diagnosis, determination of chorionicity and zygosity, appropriate management for discordant twin, twin to twin transfusion and TRAP is of paramount importance particularly in case of monozygotic twin to have a good peri-natal outcome.

Use of Magnesium Sulphate in appropriate doses from 28 weeks to 32 weeks for neuroprotection of preterm newborn. Magnesium Sulphate administration with standard Pritchard



regimen for treatment of preeclampsia with severe features and eclampsia also optimises both maternal and neonatal outcome.

Use of cardiotocography (CTG) or Non-Stress test (NST) as admission test and also during labour for early detection of foetal distress and prevents delivery of a birth asphyxiated newborn.

Maintenance of partograph during active phase of labour to monitor the progress of labour, fetal condition, identify and intervene in cases of abnormal labour like obstructed labour, thus optimizing both maternal and neonatal outcomes.

Management of premature rupture of membranes (PROM) and preterm prelabour rupture of membrane (PPROM) with beta-lactam antibiotics (including penicillin) and macrolides is to be ensured. This use of antibiotics is mainly associated with a statistically significant reduction in chorioamnionitis, preterm birth and

neonatal infections like pneumonia, sepsis, meningitis.

Barker hypothesis: Adult disease of foetal origin: A hypothesis proposed in 1990 by British epidemiologist David Barker that fetal growth restriction, low birth weight, and premature birth have a casual relationship to the origins of hypertension, hyperlipidemia, coronary heart disease and non-insulin-dependent diabetes, in middle age.

So, healthy spacing of pregnancy, regular antenatal check-up with improved screening, preventive measures like adequate nutrition, supplemental iron and calcium, infection prevention, immunisation, personal hygiene, adequate bed rest, DFMC, peri-conceptional folic acid intake, use of aspirin and high dose calcium in cases at risk of preeclampsia, screening and identification of other high risk pregnancy, close supervision and timely intervention results in optimal maternal and neonatal outcome.



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Safe Child Rearing Practice

Prof. Arakhita Swain
Prof. of Pediatrics, IMS & SUM Hospital
Dr. Aditya Kumar Mohapatra
Consultant Child Health, NHM
Prof. Sailajanandan Parida
Retd. Professor of Paediatrics

Brain is the only organ not fully developed at birth. 90% of critical brain development occurs in the first 1000 days. Apart from the physical growth, a human baby's brain development paves the way for future level of intelligence and quality of life. Much of this development starts before a baby is born. In fact, the foundation is laid with the parents' decision to have a child. The baby in the womb is dependent on the mother for nutrition as well as mental, physical and emotional growth. The mother's nutrition, while planning the pregnancy as well as during pregnancy and subsequent breastfeeding, plays a significant role in influencing the baby's physical growth and mental development. Knowing, what and how to eat is beneficial for the health of the mother and the child. **Pregnancy and childbirth** may challenge the mother's body more than anything experienced before. Physical and mental preparation, and whole hearted family support is important not only for the would be parents' but for the well being of the baby in the womb as well.

Care during Antenatal Period:-

Staying healthy during pregnancy includes not only adequate nutrition but also **enough rest and exercise**. Healthy, balanced diet and **Simple exercises**, such as walking, during pregnancy are highly beneficial. It helps the mother prevent pelvic and back pain, reduces the risk of

gestational diabetes and hypertension, improves heart function, reduces constipation, bloating and swelling and ensures the right weight gain.

Labour and Childbirth:-

The birth of the baby is a special and unique experience. **No two deliveries are identical**, and there is no way to predict how your specific delivery is going to happen. Nature has designated birth hormones to do an amazing job during the process of a healthy birth.

During birth

Encourage her:-

- To get into a pushing position that uses gravity to your advantage.
- To push when she feels the urge, using the same muscles that one would use for a bowel movement.
- To rest and breathe between contractions.
- Wipe her face between contractions and offer sips of water. Tell her when you can see her baby's head "Do not become discouraged if your baby's head emerges and then slips back into the vagina".
- Don't be offended if she displays anger or becomes emotional.

After Birth:-

After a long wait of 9 months, baby is the greatest gift which mother will receive. From the moment she first hold this miracle of life in



her arms, the world will become broader and richer for her, and the mothers first touch path is cleared for the bonding between the two, which remains for the rest of the life of the baby

During the first three years of a baby's life, the brain grows and develops significantly and patterns of thinking and responding are established. During this period a baby's brain is twice as active as an adult's brain. The Parents have a very special opportunity to help their baby develop socially, physically, and cognitively. "The first years last forever.

A child needs to feel special, loved, and valued. Baby needs to feel safe, and needs guidance. He has to be exposed to a diverse environment filled with language, play, exploration, books, music, and appropriate' toys through play and stories.

New parents are typically most concerned about the baby's overall wellness but also about gender, skin colour, and birth weight and birth time. However, the most important thing that requires our attention would be measuring the **new-born's head circumference**, which can be done by a simple measuring tape. Measuring the head circumference helps doctors and parents track the brain's growth.

The brain of a term baby is underdeveloped at birth and most development will take place in the next 24 months. Let us not miss the opportunity. At Birth, only 25% of the eventual brain is formed. 75% of the human brain develops in the first 3 years. This is catalyzed by environmental stimuli which is in the hands of care givers. Head circumference accurately reflects brain size and growth during the first years of life—the period of the majority of brain growth—except in unusual situations.

Mother always nurtures, protects and teaches her young one to function and survive in this world.

- Spend the first hour or so after birth holding, stroking, and looking at your baby.
 Because babies are usually alert and very responsive during this time, researchers have labeled this as the sensitive period.
- Respond to your Baby whenever she cries promptly & gently without delay. You cannot spoil a young baby by giving her extra attention immediately after birth, the baby should be dried with a clean towel and dressed in the soft Cotton clothes that you have already prepared.
- Do not give your child a bath as the child was already swimming and taking a bath in your womb. She is clean and just needs drying up.
- Sometimes your baby's skin is covered with a thick, white, cheese like layer called vernix. Do not remove it for it gives your child's skin, protection from infection, is a moisturizer and is also your baby's first blanket.
- Have clean clothes for the baby ready:
 A pair of gloves or mittens, socks, long sleeved dress, clean towels and cotton diapers. The baby's dress should be made of clean, soft, 100% cotton cloth. It should cover the baby's upper body, should have long sleeves and no buttons.
- Breastfeeding should be started within the first hour of birth. The stomach size of the newborn is 1.5cm in diameter approximately. By day 3 it increases to 2.5 cm and by day 10 it becomes 3.7cm in diameter. The amount of milk the mothers produces is in accordance to the increasing stomach size.



Baby should feed at least eight times or more every 24 hours during the first few weeks. It's fine to feed your baby whenever they are hungry, when your breasts feel full or if you just want to have a cuddle. "It's not possible to overfeed a breastfed baby".

Breastfed babies generally feed more frequently than bottle-fed babies. Once the milk has come, new-born will typically feed **8-12 times a day**. This does not mean that the child is not getting enough milk each time. **The best feeding schedule is what the baby designs for herself**.

When your baby is hungry,

- She may get restless.
- Suck their fist or fingers.
- Make murmuring sounds.
- Turn their head and open their mouth (rooting).

It's best to try and feed the baby during these early feeding cues as a crying baby is difficult to feed.

To know your baby is getting enough milk.

- The baby's diapers usually provide clues whether she's getting enough milk.
- On the first day, the child wets only one diaper but;
- By day 7, they generally wet 6 or more diapers and pass at least 3 yellow stool.

Babies usually sleep for 16-18 hours and this duration will gradually decrease.

You can help your baby sleep by;

- Ensuring baby is well-positioned and well covered to allow sound sleep.
- Ensuring the baby is warm and well fed before trying to make your baby sleep.
- Understanding your baby's sleep cycle and ensuring adequate sleep.

• Allow the baby to maintain her own sleep cycle.

Massaging your baby;

- Massage or Touch therapy:- Touch is considered absolutely essential for growth and development of a new born. Systematic application of touch is termed as massage.
- Massage promotes circulation, suppleness and relation of the different areas of the body and tone up the muscles.
- Massage results in promotion of mother infant bonding.

Normal Reaction to Immunization:

- Do Not Panic.
- Crying.
- Mild fever.
- Irritability.
- Localized tenderness and swelling at site of injection.

If your baby has a fever:-

- Ensure she doesn't have too much clothing on.
- Do not cover her with a heavy blanket or quilt.
- Give her plenty of cool fluids.
- Give her a bath, sponge her down or turn the fan on.
- Ask the doctor if you can give your baby Paracetamol.
- Find out how much medicine can be given.

Complementary feeding or Annaprashana is the intoduction of solid in addition to your breast milk feeds.

The minimum number of times a child should eat solid, semi-solid foods is

• 2 times per day from 6-8 months and 3 times per day from 9 – 24 months.



- Continue frequent, on-demand breastfeeding until 2 years of age or beyond.
- Foods should have proper consistency according to age. At 6 months, the consistency should be a purée (or mash) cooked vegetables or fruits, that have been ground, blended and strained to the consistency of a creamy paste or liquid.
- At 7-9 months, the food should be lumpy and
- Beyond 9 months, the finger foods (foods meant to be eaten directly using the finger and the thumb) can be introduced.
- Food must have different flavors, textures and colors.
- Food should be hygienic (cooked thoroughly with safe water and raw materials and follow hygiene rules when storing and reheating food).
- Start with small amounts of food at 6 months of age and increase the quantity as the child gets older, while maintaining frequent breastfeeding.
- Give foods with less salt and less sugar or spices.

Tips for Parents:-

"Babies are intelligent, can see, hear, and even smell, they can recognize voice and touch of the parents, do respect their feelings and emotions".

- Parents should not undermine each other in front of kids.
- Fighting about parenting in front of children is bad for the children as it shakes

- their confidence in their parents, undermines parental authority, confuses them and puts them in a position of having to choose sides.
- Do not shame your child in front of others: Shaming your child in front of others (even if well intentioned), is emotionally wrong and can lead to childhood depression with long term devastating effects.
- Do not compare your child to her siblings or other children: Each child is unique. Many parents fail to realize this. They believe that by comparing one child to another, the "errant" one will improve. However, it does quite the opposite, and many such children feel worthless.
- Some parents want their children to be physically/emotionally flawless. They believe individualities are flaws that need correction. This may result in a child's poor self-image.
- Do not continuously harp about mistakes: Making mistakes is an integral part of a child's learning and growth process. It is important to remember that childhood is a time to freely explore and mistakes would happen.
- Criticism by parents, especially mothers, is a significant risk factor for depression in children: Persistent criticism breeds resentment and defiance, and undermines a child's initiative, self-confidence and sense of purpose. We need to prevent the buildup of these unhealthy attitudes in the minds of our children.



Souvenir 2023 THE NEW CHILDHOOD



Child Rearing with Consciousness

Dr. Prashant Patra, MD

HOD, Paediatrics, Nodal Officer, SNCU, RGH

Life is a dynamism and so also our health, which means a dynamic equilibrium between different parts and beings of body with the innumerable changes and forces around. As we know, change is the most visible and perceptible, most material and even subtle aspect of Truth in existence. However, the guiding force behind every vibration of change, the inherent motive force of all is consciousness, the creative nisus of our existence. No wonder. if we can believe, know, feel and understand the role of consciousness in unfolding the mysteries of the world around us, we can well predict, observe and sense even the so called in-comprehensible changes that go on constantly, within and without our body, in Medical Science and in the Humanity as a whole!

Well, coming back to existence, Life is an endless journey from infinite to the infinite. The human life as we generally understand begins from the conception in the womb and culminates in the dissolution in the tomb. But there are greater peaks beyond... in both the extremes. Human life begins to take shape much before the birth of a newborn.... even before conception! There lies the true role of would-be parents with their constant and sincere aspiration to bring into this world a developed soul, a greater being through intense prayer and meditation, which may facilitate 'conscious creation' of a being signifying true maternity.

Science believes that best possible prenatal and antenatal care pave the way to the birth of a healthy baby, a developed human being in terms of physical growth and cognition in

order to run the race in accordance with the needs of time.

However Spirituality ensures the creative role of consciousness of both parents, especially of the mother to bring down Higher Soul and Being amidst love and harmony within and without leading to life beautiful, not only to run the race mechanically but to build a new race, a new order free from useless anomalies and perversions.

The Mother enlightens so beautifully on this as follows -

"... And if she has in addition a consciousness and definite will to form the child according to the highest ideal she can conceive, then the very conditions will be realised so that the child can come into the world with his utmost potentialities. How many difficult efforts and useless complications would be avoided in this way!"

Who is the Child after all?
Sri Aurobindo in epic "Savitri" writes:"I saw the Omnipotent's flaming Pioneers
over the heavenly verge which turns
towards life

Come crowding down the amber Stairs of birth;

Forerunners of divine multitude, out of the paths of the morning star they come into the little room of mortal life." I saw them cross the twilight of an age, the Sun eyed children of a marvellous dawn

(Savitri Book-III)



What a deep and profound insight about the children when we people seem satisfied by referring children as our mere future assets! Our myopic vision soon dissolves by the great Lebanese American poet and philosopher Khalil Gibran's touching lines -

Your children are not your children
They come through you but not from you
You may house their bodies, but not their
souls

For their souls dwell in the house of Tomorrow

Which you can not visit, not even in your dreams...!

From conscious conception to the Growth of the Fetus:-

Once conception is confirmed, the would be mother should take utmost care to maintain a stable inner state full of peace and certitude for best outcome and should be ever away to connect to the baby in her womb with positive vibrations of love and goodwill. She should prepare for a conscious motherhood by availing the advantages of regular and effective antenatal care and also adopting a stress free life style, through mild yogic exercises, regular meditations and pranayama etc. and always avoiding negative emotions like fear anger, hatred, jealousy, falsehood and outride rejection of horrific and degrading contents in media and mobile.

At Labour:

The care providers at delivery points should create and maintain a congenial atmosphere for the lady on labour who would be encouraged to co-operate with the needful and timely instructions to facilitate smooth labour.

At Birth... The First Cry:

Fortunately here again Science meets Spirituality. The newly introduced practice of delivering a newborn on her mother's abdomen justifies the creater becoming the creation, by early skin to skin contact and facilitating breast feeding. This serves as the right stimulus for the tiny baby to forge ahead along the tune of Vedic chant - 'Tamaso ma Jyotir gamaya' (Take me off darkness towards Light).

So, in a nutshell, a sincere aspiration, a conscious preparedness, a warm welcome in a harmonious baby friendly environment, followed by immediate rooming in and initiation of breast feeding with right attitude will no doubt enable the newborn baby to kick start the right journey with right spirit... towards a safer, secured and progressive journey.

Needless to reiterate here that the baby is the pivot, around whom revolves the entire motherhood. The care providers especially, the Perinatologists' role is more important who can guide the mother to discharge their duties of initiating and maintaining exclusive breast feeding for first six months and thus allowing the baby to exercise her right to breast feed. This will go a long way to ensure best possible mother-child bonding & a healthy start towards stronger humanity.

Exclusive Breast Feeding For First Six months of Life:

Should become an essential dimension and a golden opportunity to infuse healthy vibrations into the baby.

Here also, a mother can utilise her own consciousness to bring about positive outcome in terms of baby's well being and even gross nature to help blossom into flowing personality that she may be aspiring for, in proportion to the power of her will and imagination being infused into the baby during the very act of breast feeding. Hence, a mother's inner and outer atmosphere, filled with love, peace and calm seems essential; so also the support of family, society and care providers is necessary for such creative endeavour to be fruitful.



Child is not a miniature adult. He is a Soul in evolution, in the form of a being. As the conscious parents, teachers, well wishers and care providers we must not forget this. Together we can provide the right start, ignite the forward journey and guide till the goal is reached. And the goal is not to make a brute machine with a brain, but to help manifest the inner potential, to help attain "New Childhood" in the consciousness perspective, which alone can lead towards the birth of New Race... a New World.

That is why bringing a child into this prosaic existence is quite easy but to bring up the child rightly, to rear him perfectly is too difficult, though not impossible.

Sri Aurobindo speaks "We have travelled to another conception of the child as a soul with a being, a nature and capacities of his own who must be helped to find them, to find himself to grow into their maturity into a fullness of physical and vital energy and the utmost breadth, depth and height of his emotional, his intellectual and his spiritual being."

Responsible parenting is the most talked about subject these days. But the sense of responsibility to rear a child can only be realised by the power of consciousness taking into account the true identity of the child as that of an evolving soul who has chosen his parents and others, even the external environment for her own progress. Conscious parenting is better concept as regards to ideal child rearing. Conscious parenting involves respecting children first, before expecting any respect from them, a democratic way of functioning, spending quality time filled with human touch and never letting them in the hands of servants or care takers and more importantly becoming living examples themselves for the ideals they expect from their own children and thus provide favourable ground of real protection and guidance which would inspire them to move forward with courage and confidence.

Role of Food:

Parents need to practice good food culture before resorting to feeding children and should be careful about conscious eating through the following principles -

- 1. Eat to live, but don't live to eat.
- Distinguishing difference between Desires
 Needs.
- 3. Eat according to hunger, neither more, nor less.
- 4. Choose food according to age and regular activities.
 - But "How much?" Should be left upon the child himself.
- 5. Food should serve as the means to aquire inspiration and strength and not as means of reward or punishment.
- Conscious eating always given priority.
 Food not to be pushed and not to be added to mobile gaming or TV viewing.

The child need to be made conscious of the quality and quantity of food, including the texture, flavour and taste associated with it, so that he can rightly feel the body signals about the type and amount of food that his body is in need of.

Sleep Culture:

Except neonates and infants who need around 12 hours of sleep all children and adults as well need on an average 8 hours of sleep daily. Children should go to bed before it is 10 pm at night and parents should also follow the same pattern as far as practicable. Use of mobile phones and TV etc. are to be avoided at least 1 hour before going to bed. Teaching children how to relax in between activities will also help them to get better sleep.

The parents, teachers and the caretakers should try by whatever means available to them in order to teach a child the importance of Truth,



Love and Knowledge to tread the life's path with courage. To inspire to widen his consciousness by breaking apart the limitations of little ego & to try to feel for others around who have been chosen as his playmates for collective progress. Cleanliness within and without should always be put into the culture of rearing.

To conclude, ultimately we have to become a child, in order to realise the childhood in its deeper sense. While taking care of children and rearing them in best possible manner we should not stop at the so called normal growth potential and timely achieved developmental milestones, even super IQ, but should go beyond... thinking beyond the boundaries of scientifically defined health indices.

We have to act, act and act to make the child realise his inner possibilities, his true

identity so that he may keep on striving to evolve into a higher being, which would manifest beauty of the body, wideness and receptivity of the mind and discipline of the vital or emotional being to support the Higher Force at work and thus a Higher Life.

Sri Aurobindo speaks - "Our job is to make the child physically fit, mentally alert, socially adaptable and Spiritually oriented."

Let us embark upon this concept of integral care of children for welcoming New Childhood which is lurking in the horizon, with golden rays.

"What is God after all?

An eternal child playing an eternal game in an eternal garden."

Let us embrace "New Childhood" for New World Order.



Thou wilt lead them all to their supreme destiny. Thou hast seen the hearth and seen the child. One attracted the other: both were happy; one because it burned, the other because it was warm.

Prayers and Meditations, March 27, 1917

- The Mother



Warm Welcome

Dr. Reetanjali MishraConsultant O & G

Becoming a mother gives immense pleasures to a married woman and also to her family members. Everybody is excited to welcome the newcomer. Preparation starts mentally, socilly, physically & financially. We are forgetting the Spiritual aspect of preparation. Both the Boy & Girl once they decided to marry should understand the culture of each other, understand the Psychology of each other and try to adjust. Marriage is nothing but adjustment between 2 persons to make a happy society & Peaceful forces."

Antenatal period for woman is a time where, she should be given time and liberty to concentrate on her developing baby, feel every day for the baby, talk, explain and keep the baby inside pure and happy. Whatever mother does

or feels has a great effect on Baby." Thinking good things, Respecting seniors, doing her own wark perfectly, remaining satisfied herself, makes baby active and healthy. Seeing violent movies and serials and having depression in mind makes the baby depressed and violent. Doing meditation, listening to light music, listening to positive thoughts & mixing with positive people keeps both mother and baby happy." A Pregnant mother cann't do all these positive things even if she is very rush .. for this. The family members, work place colleagues and overall a pleasant at rush phase can give the mother all these things. Letus welcome a baby in a proper manner make him/her the blessings of lord and make the newborn fit to do something for society.



.... it is the faith of the patient which gives the remedy its power to heal. If men had an absolute faith in the healing power of Grace, they would perhaps avoid many illnesses.

(11/225), 13 March 1970

- The Mother



Neonatal Sepsis

Prof. Reba Kanungo, MD, PhD

Former Prof. and HoD of Microbiology & Dean-Research Pondicherry Institute of Medical Sciences, Pondicherry

Neonatal sepsis is infection in the blood that occurs in an infant younger than 90 days old. They are of two types depending on the age of the neonate at which the infection occurs. Early-onset sepsis is seen in the first week of life while the other, late onset sepsis occurs after 1 week through 3 months of age. Incidence of neonatal sepsis in India is probably one of the highest in the world. Every year nearly 0.75 million neonates die in India. Early-onset neonatal sepsis most often appears within 24 to 48 hours of birth. The baby gets the infection from the mother before or during delivery. Babies with late-onset neonatal sepsis are infected after one week of delivery, and the infection is acquired from external sources.

Factors which increase the **risk of sepsis** in a newborn include preterm delivery, very low birthweight, water breaking (rupture of membranes) longer than 18 hours before birth and infection of the placenta tissues and amniotic fluid, jaundice, and foetal distress. Babies with late onset sepsis are at a greater risk if there is an intravenous catheter often inserted into the blood vessel to deliver medication or nutrients, mechanical ventilation or prolonged stay in the hospital.

Factors associated with the mother, are maternal infections, either systemic or local in the birth canal, during pregnancy or after delivery, poor nutrition, low socioeconomic status and mother's age less than 20 years or more than 37 years. In early onset sepsis infections acquired from the mother, before or during birth, are transmitted vertically and are known as intrauterine or intrapartum infections

Neonatal sepsis can be **caused by** bacteria such as Streptococci, Staphylococci, *Esch coli* and often bacteria colonising the skin of the baby namely Coagulase negative staphylococcus, which is acquired within a few hours after birth. Prolonged stay in the hospital predisposes the baby to infections caused by organisms which are found in the hospital environment. An emerging danger of these infections is that they are caused by bacteria which are resistant to multiple antibiotics which are commonly used in life threatening infections. Hence higher and more costly antibiotics are being increasingly required to treat these infections.

Immunity of the foetus takes time to develop, and is incomplete even at birth. This makes the newborn prone for infection. The mother's immunity protects the foetus in the uterus till birth and for about six months after birth..

Symptoms to recognise neonatal infection include weak or absence of crying, drowsiness, floppiness, or unconsciousness. weak or absent suckling, cold to touch or fever (> 99 °Fahrenheit), abdominal distension, diarrhoea, or abnormal bowel movements and vomiting may occur. Other symptoms include grunting or chest indrawing, which indicates difficulty in breathing, low or increased heart rate. Additional signs could be skin pustules or umbilical infection which may be the source of infection.

Tests to confirm sepsis: Sepsis in the new born can be confirmed by tests like complete blood count, estimation of C-reactive protein,



procalcitonin, and blood culture. Other specimens which can be cultured are cerebrospinal fluid, urine, stool and pus from umbilicus or skin pustules.

Treatment of Sepsis in the newborn is by instituting immediate empiric therapy. Intravenous broad-spectrum antibiotics are generally preferred for empiric therapy, as the causative agent is not known. Treatment may need to be changed to specific antibiotics, based on the culture and antibiotic sensitivity report. Maintaining airway, nutrition and hydration are the other important parameters in the management of sepsis in the newborn.

Newborns whose mothers have confirmed infections during the intrapartum period. or who may be at high risk for other reasons may also need to get IV antibiotics at first, even if they have no symptoms.

Prevention of infection in the newborn must start with educating the mother. During pregnancy the mother must be screened for any infection either systemic, urinary tract or local, in the birth canal. She must be treated

appropriately. Maintaining good personal hygiene, practicing hand washing with soap and water, and keeping the environment clean are necessary practices for a clean and safe process for a healthy baby to be born. Delivery must be conducted by trained personnel in a clean hygienic environment in health care setup, with adequate facilities for maternal and child care.

During delivery sterile precautions and use of personal protective equipment must be ensured. Care must be taken while handling the newborn. Hand hygiene is the single most important procedure which can prevent majority of externally acquired infections. The mother and other attenders must be trained to always practice hand hygiene.

Environmental cleanliness is the other factor which can prevent infections in the newborn. Clean and washed clothes, and sheets must be ensured for the use of the newborn and the mother. Regular antenatal check-up, maternal vaccination, healthy and harmonious body and mind of the mother will go a long way in ensuring the birth of a healthy baby.



The body that held this greatness seemed almost

An image made of heaven's transparent light.

Its charm recalled things seen in vision's hours.

(Savitri) - Sri Aurobindo





Sickle Cell Nephropathy

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Introduction

Sickle cell disease (SCD), first discovered in West Africa is an autosomal recessive hemoglobin disorder. It results from the replacement of glutamic acid by valine at the sixth amino acid of the beta-globin chain. The primary pathophysiology is based on the polymerization of oxygen deprived sickle hemoglobin with formation of long fibers within the RBCs causing a distorted sickle shape which eventually leads to early destruction of red blood cells lysis and occlusion of blood vessels, subsequently resulting in multiorgan damage. Some of the renal complications, collectively known as sickle cell nephropathy (SCN), include blood stained urine, diluted urine, renal papillary necrosis, proteins in urine, renal tubular disorders, acute and chronic kidney injury, sickle cell glomerulopathy, and renal medullary carcinoma. Clinically significant renal involvement occurs more frequently in sickle cell disease than in sickle cell trait or in combined hemoglobinopathies.

Newborn babies are asymptomatic for an initial couple of months, given fetal Hb (HbF) predominance. Early childhood is characterized by severe inflammation of the finger and toe tendons & joints, acute chest syndrome, sepsis, splenic sequestration, and stroke. After age of 5 Classic painful vaso-occlusive crises (VOC) occurs, this increases in frequency with age. Adolescence is associated with nocturnal enuresis, damage of the hip due to loss of blood supply, leg ulcerations, delayed puberty and

prolonged erection of penis without sexual arousal. After age 25 to 30, the frequency of VOC tends to reduce and is replaced with signs and symptoms of chronic organ damage, including heart failure, pulmonary hypertension, sickle hepatopathy, and sickle cell nephropathy (SCN). The primary cause of death in younger patients is usually infection; whereas, in older patients, the primary cause of death is mostly irreversible organ damage.

Risk factor

Risks factors associated with progression of CKD in patients with Sickle Cell Nephropathy are

- · Infection with parvovirus B19
- Recurrent Acute chest syndrome
- Vaso occlusive episodes
- Nephrotic range proteinuria
- Underlying hypertension
- · Severe anemia

Coinheritance with alpha-thalassemia apart form higher fetal hemoglobin is protective factor.

Epidemiology

The high prevalence of SCD in West Africa and parts of Asia represents a probable survival advantage because the presence of the sickle cell gene protects against malaria. SCD is now a worldwide health problem. In India it is more prevalent in Madhyapradesh, Maharastra, Gujrat, Chhatisgarh, Odisha, the incidence of SCN is around 12% (Median age of 37 years). Proteinuria is common in SCD, occurring in about 30% of patients.



Pathophysiology

HbS polymerization is the key event, and it occurs during cellular or tissue hypoxia, oxidative stress, or dehydration. The mutated beta-globin chains of the HbS molecule tend to clump resulting in the change in the shape of red blood cell (RBC) to a crescent or sickle, with increased rigidity. Local oxygen tension, acidosis, and hyperosmolarity are some factors that influence the polymerisation. Repeated cycles of tetramer formation make the sickle RBCs exhibit high adhesiveness resulting in increased microvascular transit time, leading to further sickling. The whole process ultimately results in the early destruction of the RBCs and frequent, widespread vaso-occlusive episodes with consequent acute and chronic organ damage.

The main cause of disease severity are

- Vaso-occlusion with ischemia-reperfusion injury,
- · Hemolytic anemia.

The renal complications in sickle cell disease originate from the occluded vessels in the inner parts of kidney, given the low partial pressure of oxygen, acidosis, and high osmolarity, which predisposes to hemoglobin S tetramerization and subsequent sickling of the erythrocytes. Repeated cycles of sickling and sludging lead to microinfarcts and ischemic injury giving rise to chronic microvascular disease.

Hyperfiltration injury ultimately results in proteinuria and glomerulosclerosis leading to progressive Chronic Kidney Disease. Frequent urination, from the decreased concentrating ability, a consequence of tubular injury may be seen in childhood and adolescence. Papillary necrosis may result from ischemia from the sickling of red cells and manifest with gross hematuria and ureteric obstruction from sloughed ischemic papillae.

Evaluation

The initial diagnosis is based on the clinical manifestations and is primarily is a diagnosis of exclusion. The initial investigations in a patient with SCD, who presents with blood or protein in urine are

- Basic metabolic tests
- Urine analysis
- Renal imaging with a renal ultrasound
- · X-ray of urinary tract
- CT scan,
- · Serum albumin levels,
- · Autoantibodies and complement levels,
- · Viral markers,
- Serum electrophoresis,
- · Microscopic examination of Renal tissue,
- Review of the current
- · Previous medication history.

Management

The conservative approach, with bed rest, oral hydration, remains the cornerstone in the management gross hematuria. Severe cases of hematuria need urine alkalinization, medicines to increase urine flow, and blood transfusion. Hydroxyurea is the only proven drug for the management of SCD, which reduces the risk of polymerization. In patients with hypertension, the goal is keep the blood pressure less than 130/ 80 mm Hg. Erythrotoiesis-stimulating agents can be used with Hydroxyurea when hemoglobin drops 10% to 15% below the normal reference range. Hb target should be lower in patients with SCN (10-10.5 gm/dL). Agents improving clotting can be used in patients with gross hematuria. High dose urea prevents the polymerization of sickle hemoglobin. Hemopoietic stem cell transplantation is



potentially curative and is largely limited to children. Renal transplantation offers the best survival outcomes in patients with SCN who require renal replacement therapy

Take Home Message

- The major underlying pathophysiological mechanism in kidney injury in SCN is from hypoxia, ischemia, and hemolysis.
- Early detection is key as the goal of treatment is to delay the progression of renal failure.
- CKD development is from early glomerular hypertrophy and hyperfiltration; tubular hyperfunctioning; endothelial injury with sickling and vaso-occlusive episodes
- Diagnosis of SCN is primarily based on clinical manifestations and is essentially a diagnosis of exclusion.
- Hydroxyurea should be used in all patients with SCD and RAS blockade should be considered in SCN patients with proteinuria.
- Renal manifestations are generally more common and severe in SCD compared with

- those seen in sickle cell trait, except medullary renal cell carcinoma.
- All forms of renal replacement therapy are beneficial in ESRD patients from SCN, with renal transplantation giving a demonstrated advantage in survival benefit
- Physicians should be vigilant in SCD patients for any early signs of renal complications.

Conclusion

Patients with sickle cell are commonly followed by the primary care provider, nurse practitioner, hematologist and the internist. The renal function in these patients needs to be monitored by an inter professional team because it can lead to end-stage renal disease and shortened life expectancy. As soon as the renal function starts to decline, a nephrology consult should be made. Many of these patients do require dialysis and some may benefit from a kidney transplant. Without any treatment, the life span is severely limited.



Even when she bent to meet earth's intimacies

Her spirit kept the stature of the gods;

It stooped but was not lost in Matter's reign

(Savitri) - Sri Aurobindo



Autism Spectrum Disorder and Principles of Management

Dr. Debasis Panigrahi

Introduction

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental disorder that affects communication, social interaction, and behaviour. The term "spectrum" in ASD signifies a wide range of symptoms, skills, and levels of disability that individuals with the disorder may present. Each person on the spectrum is unique, necessitating an individualized approach to management and treatment. This article delves deep into the nuances of ASD and the multifaceted principles of its management.

Understanding the Spectrum: Variability in ASD Presentation

One of the defining characteristics of ASD is its spectrum nature. Individuals with ASD can exhibit a diverse array of symptoms, and these symptoms can manifest in varying degrees of severity. Core features of ASD include challenges in social interaction, difficulties in communication (verbal and nonverbal), and restricted and repetitive behaviours. Some individuals may excel in specific areas, such as mathematics or music, while struggling with basic social interactions. This heterogeneity emphasizes the importance of personalized approaches to management

Etiology

Though the exact cause of ASD remains unidentified, a combination of genetic and environmental factors are believed to contribute. There's a strong genetic component, with several genes implicated in the disorder. Environmental triggers, such as certain drugs or infections

during pregnancy, might also play a role.

Characteristics

ASD can manifest in diverse ways, but commonly observed characteristics include:

- **1. Social Challenges**: Difficulties in understanding and interpreting social cues, leading to challenges in forming relationships and interactions.
- **2. Communication Difficulties**: This might manifest as delayed speech development, lack of speech, or challenges in initiating and maintaining conversations.
- **3. Repetitive Behaviours**: Individuals may indulge in repetitive motions or develop specific routines and rituals.

Early Identification and Diagnosis

Early identification and diagnosis of ASD are crucial for ensuring timely intervention. Signs of ASD can emerge as early as infancy, but they might become more noticeable during the toddler years. Delayed or atypical language development, lack of interest in social interactions, repetitive behaviours, and sensory sensitivities are among the indicators that warrant attention. A multidisciplinary assessment involving psychologists, speech and language therapists, occupational therapists, and developmental paediatricians is often employed to make an accurate diagnosis

Principles of Management of ASD

Managing ASD is multifaceted. There's no one-size-fits-all approach, but several principles guide effective management:



1. Early Intervention

Research consistently supports the benefits of early intervention. Intervening during the crucial early developmental years can lead to better outcomes in cognitive function, language skills, and adaptive behaviours.

2. Individualized Approach

Given the spectrum nature of ASD, what works for one individual might not work for another. Tailoring interventions to suit the individual's specific needs is crucial.

3. Multimodal Therapies

These can include:

Applied Behaviour Analysis (ABA): ABA is a structured behavioural therapy that focuses on teaching adaptive behaviours and reducing challenging behaviours. It emphasizes positive reinforcement and systematic teaching techniques to promote skill acquisition and behaviour modification.

Speech and Language Therapy: Communication challenges are a hallmark of ASD. Speech and language therapy helps individuals with ASD develop language skills, improve social communication, and learn alternative communication methods (e.g., augmentative and alternative communication systems).

Occupational Therapy: Occupational therapists work to address sensory sensitivities, motor coordination difficulties, and daily living skills. Sensory integration therapy is a common approach used to help individuals with sensory processing challenges.

Social Skills Training: Social skills training aims to improve individuals' abilities to interact with others, understand social cues, and engage in appropriate social behaviours. These interventions help individuals navigate social situations more effectively.

Parent Training and Support: Providing parents with training and support is vital. Parents learn strategies to manage challenging behaviours, facilitate communication, and create structured environments that cater to their child's needs.

Educational Therapies: Early, structured, and intensive interventions in an educational setting can improve outcomes.

Family Therapies: Involving families helps them understand the disorder and equips them with strategies to improve home life and support their child's development.

4. Medication

While no medication can cure ASD, some can manage associated symptoms like aggression, anxiety, depression, and attentional issues. It's vital to regularly review and monitor medication use.

5. Integrative Care

Considering co-existing conditions, like ADHD, anxiety, or gastrointestinal issues, and addressing them in tandem can lead to a holistic management approach.

6. Skill-based Approach

Focusing on teaching skills can have longterm benefits. This includes social skills training, adaptive skills, and vocational training for older adolescents.

7. Inclusivity and Advocacy

Promoting inclusivity in schools, workplaces, and the community can enhance the social integration and acceptance of individuals with ASD. Advocacy is essential to secure rights, resources, and opportunities.

8. Lifelong Learning

While early intervention is crucial, it's also essential to recognize that individuals with ASD can learn and grow throughout their lives. Continued support and opportunities for learning



can lead to improved outcomes and quality of life.

9. Transition Planning

For adolescents with ASD, planning for adulthood, including higher education, employment, and independent living, becomes a priority. Developing a transition plan can set them on a path to success.

10. Continuous Assessment

Given the evolving nature of the disorder, regular assessments ensure that interventions remain relevant and effective.

Challenges in ASD Management

While progress has been made in understanding and managing ASD, there are several challenges that persist:

- Access to Services: Disparities in access to quality services, especially in lowerincome communities or rural areas, can limit the effectiveness of interventions.
- Comorbidity: Many individuals with ASD have comorbid conditions such as intellectual disabilities, anxiety disorders, or epilepsy. Managing these additional challenges requires a comprehensive approach.

- Transition to Adulthood: The transition from childhood to adulthood can be particularly challenging for individuals with ASD. Planning for independent living, vocational training, and ongoing support is crucial.
- 4. Lifespan Approach: ASD is a lifelong condition, and its management should take into account the changing needs and challenges that arise across different stages of life.

Conclusion

Autism Spectrum Disorder is a complex neurodevelopmental condition with a broad range of symptoms and severities. While there is no one-size-fits-all approach to management, evidence-based principles such as early intervention, applied behaviour analysis, speech and language therapy, and social skills training provide a foundation for effective support. As understanding and research continue to evolve, a holistic and individualized approach to management is essential to enhance the well-being and quality of life of individuals with ASD



The only unfailing method for getting rid of illnesses is to turn one's attention away from them and refuse to give them any importance.

16 April 1935 (17/91)

- The Mother



Autism Spectrum Disorder – Psychological Assessment and Management

Dr. Seema Parija

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Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder that affects how people interact with others, communicate, learn, and behave. Autism is considered a lifelong disorder. Autism is known as a "spectrum" disorder because there is wide variation in the in the type and severity of symptoms and the degree of impairment in functioning in individuals with autism.

Signs and symptoms of ASD

In this disorder the core deficits are in two domains: Social communication/interaction and restrictive, repetitive patterns of behavior.

- A. Social communication / interaction behaviors may include:
- · Making little or inconsistent eye contact
- Appearing not to look at or listen to people who are talking
- Infrequently sharing interest, emotion, or enjoyment of objects or activities
- Not responding or being slow to respond to one's name
- Having difficulties with the back and forth of conversation
- Often talking at length about a favorite subject without noticing that others are not interested or without giving others a chance to respond
- Displaying facial expressions, movements, and gestures that do not match what is being said
- Having trouble understanding another person's point of view or being unable to

- predict or understand other people's actions
- Difficulties adjusting behaviors to social situations
- Difficulties sharing in imaginative play or in making friends
- B. Restrictive / repetitive behaviors may include:
- repeating words or phrases
- Stereotypical movements such as hand flapping, rocking, spinning
- Showing overly focused interests, such as with moving objects or parts of objects
- Becoming upset by slight changes in a routine and having difficulty with transitions
- Being more sensitive or less sensitive than other people to sensory input, such as light, sound, clothing, or temperature

People with ASD may also experience sleep problems and irritability. They might have comorbid intellectual disability, attention deficit/hyperactivity disorder (ADHD) etc which might complicate their diagnosis.

People with ASD may have many strengths, including:

- Being able to learn things in detail and remember information for long periods of time
- · Being strong visual and auditory learners
- Excelling in math, science, music, or art



Psychological Assessment of ASD

The evaluation involves interviewing the parent/caregiver, observing, and interacting with the child in a structured manner, and sometimes conducting additional tests to rule out other disorders.

The screening tools for autism are Modified Checklist for Autism in Toddlers, Revised (M-CHAT), Screening Tool for Autism in Toddlers and Young Children (STAT) etc. Autism specific tools which can help in diagnosis are Childhood Autism Rating Scale, Autism Diagnostic Observation Schedule (ADOS) etc

The Government of India has notified the guidelines for certification of Autism. For identification of Autism cases INCLEN tool is used. Based on identification of Autism cases, certification of Autism is issued on the basis of Indian Scale of Autism Assessment (ISAA) tool

Approach to treatment

While there is no "cure" for autism, there are several effective interventions that can improve a child's functioning. Just as the ideal assessment for autism is multi-disciplinary, approach to treatment involves a multi-sensory, multi-disciplinary approach. Early intervention should be the aim to yield the best outcome and results

- Applied behavioral analysis: It involves systematic study of the child's functional challenges, which is used to create a structured behavioral plan for improving their adaptive skills and decreasing inappropriate behavior
- Developmental individual-difference relationship-based model (DIR). In the DIR model, also known as floor time therapy, parents and therapists follow the child's lead in playing together while also directing the child to engage in increasingly complex interactions
- The Picture Exchange Communication System, or PECS, allows people with ASD

- with little or no communication abilities to communicate using pictures.
- Social skills training: Done in group or individual settings, this intervention helps children with autism improve their ability to navigate social situations
- Parent management training: Parents learn effective ways of responding to problematic behavior and encouraging appropriate behavior in their child. Parent support groups help parents cope with the stressors of raising a child with autism
- Treating co-occurring conditions: Children with autism experience insomnia, anxiety, and depression more often than peers without autism. They may have ADHD or intellectual disability and this needs to be addressed. The impact of these conditions can be reduced with the proper services, which include all of the above, in addition psychotherapy and/or medication treatment
- Medication: A psychiatrist can evaluate for co-morbid depression, anxiety, and impulsivity for which medications may be helpful. For example, autism-related irritability can be reduced by medications such as aripiprazole and risperidone

Speech & language therapy, Occupational therapy and Special education services can improve the child's speech patterns, language skills, adaptive skills and improve social, and life skills.

Since ASD is a lifelong disorder, Caregiver burden should be addressed. Tips For Parents:

- Learn as much as possible about Autism Spectrum Disorder
- · Provide consistent structure and routine
- Connect with other parents of children with autism
- Seek professional help for specific concerns
- Take time for yourself and other family members.





Autism & Homeopathic Approach

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What Is Autism?

Autism is a complex neurodevelopmental condition. Autism was long described as a pervasive developmental disorder, meaning that it becomes apparent in early childhood and affects all aspects of a child's development. However, there is much more openness now to the idea that autism need not be seen as a disorder but rather as a neurological difference, hence the terms "neurodiverse" and "neurodivergent."

A diagnosis of Autism is given when two specific areas of development are significantly affected. They are: social interaction and communication, and repetitious behaviors and so-called restricted interests (American Psychological Association, 2013, CDC, 2020). People with Autism also tend to experience differences with their senses that can affect the way they feel about and respond to their surroundings. Autism is also known as Autism **Spectrum Disorder (ASD). '**Spectrum' refers to the wide range of characteristics, skills and abilities that different people with Autism experience. No two people are affected by Autism in exactly the same way. Some people with autism are highly verbal and conversational while others may not use any verbal forms of communication. Similarly, some people on the spectrum seem very withdrawn from social interaction while others have families and jobs. Some people with autism test as having a wide range of IQs. Every person experiences Autism differently and has different support needs. Although the core characteristics of Autism can cause a range of challenges, it is important to recognize that they can also result in unique skills and capabilities.

Prevalence of Autism in U.S. children increased from 1 in 150 children in 2000 to 1 in 36 children by 2022 (CDC, 2023). Autism is the fastest-growing developmental disability and is four times more prevalent in boys than in girls (CDC, 2023). These developmental differences tend to become apparent between 18 and 36 months of age.

Autism is most probably caused by multiple factors interacting in complex ways (i.e. genes, environment and brain development).

Signs that may indicate a developmental challenge include:

- An unusual insistence on routine
- A preference for being alone or aloofness
- A resistance to being held or touched
- Spinning objects or unusual sensory interests in objects (e.g. peering at objects, sniffing or licking non-food items, watching objects fall)
- Engaging in repetitious motor movements or activities (e.g. running in circles, flapping hands, lining up objects)
- Repeating words or phrases
- Laughing, crying or showing distress in situations where one would not usually see or predict such a reaction
- No apparent response to verbal instructions despite normal results to hearing tests
- A strong sensitivity to sensory stimuli (sounds, lights, tactile sensations, commotion)



Positive Characteristics and Strengths of People on the Autism Spectrum

• People with Autism can be characterized not only by these areas of challenge but also by significant areas of strength. Many individuals on the Autism spectrum are superior at what is known as systemizing, that is, "the drive to analyze objects and events, to understand their structure and predict their future behavior" (Baron-Cohen, 2005, pp. 110). This may be exhibited as an intense interest in train timetables, for example, or an almost intuitive sense of how to program a computer. Other cognitive patterns have emerged through research. For example, people with Autism tend to show an above-average awareness of details and ability to segment stimuli (e.g. Happe, 1999).

Every child is unique and follows his/her own developmental pathway, and yet it can be very useful for parents to be aware of possible signs of Autism. This offers the best chance to get assistance, step in, and make what could very well be a far-reaching difference in your child's development and life. If you are concerned about your child's development, it is important to seek help

The Autism Society urges parents to use a four-pronged approach when going through the diagnosis process.

- **Stay informed:** Learn as much as you can about your child's disorder and when talking to healthcare professionals, ask questions and if something isn't clear, ask for clarifications.
- **Be prepared:** Be prepared for meetings with doctors, therapists and school personnel. Write questions and concerns and note answers.
- **Be organized:** Many parents find it useful to keep a notebook their child's diagnosis and treatment as well as meetings with professionals.
- **Communicate:** It's important to ensure open communication. If you don't agree with a

professional's recommendation, for example, say specifically why you don't.

Homeopathic Treatment for Autism

- A child receives a diagnosis based on observation of the behaviors outlined above. However, though a child may share a common diagnosis with other children, each has a unique pattern of development and functioning. Each child is unique in their processing of sensory and other information, and their motor planning (the ability to plan and carry out actions). Some children are over reactive to sensations, such as touch and sound, while others are under reactive. Some children have relatively strong auditory memories, and can memorize entire scripts; others have relatively strong visual memories. Some children are able to plan and carry out a number of actions in a row, such as going upstairs, getting a toy, and bringing it back down, while others are only able to carry out one action at a time, becoming very fragmented in their behavior.
- In addition to differences in sensory processing and motor planning, children differ in their basic mastery of the foundations for relating, communicating, and thinking. Some children with ASD can form relationships and engage in two-way communication, while others appear to be very self-absorbed and aimless. Some children can focus and attend and engage with others, but can only participate in a backand-forth flow of communication in a limited way, finding it difficult to use language meaningfully or connect ideas together for logical and reflective thinking. Other children show some mastery of the basics, and the ability to engage in more complex communication as well as the ability to create ideas and use them logically, but are very limited in their capacity to apply these abilities to a broad range of situations. Therefore, while some children may exhibit common symptoms that lead to a diagnosis of an autistic spectrum disorder, their



individual patterns — and therefore their developmental journeys - are quite varied.

• Undoubtedly a pediatric Autism case taking is a challenging task for a Homeopath – find out the individualizing uncommon, characteristic features of the case and match those with the symptoms of most similar Homeopathic drug basing upon the similar Miasm. Once Similimum Constitutional remedy is chosen, patient improves in all aspect in a gradual manner. Constitutional treatment is the keynote for cure, ,

What is Constitution?

- According to Paracelsus: No knowledge is perfect unless it includes an understanding of the origin- that is, the beginning; and as all man's disease originate in his constitution, it is necessary that his constitution should be known if we wish to know his diseases.
- An individual is formed in accordance with his intrinsic nature, this nature of the individual being termed his constitution. It is the interior and exterior lives which stamp in the constitution and render it with distinguishable features & qualities.

In Homeopathic perspective, no two persons are same in this world. Everyone has some individualizing features, the personality traits which is reflected through their physical symptoms, mental features, behaviours etc.

'Personality Traits' distinctive or well-marked Psychological, Intellectual, Emotional & Physical characteristics of an individual. The inborn, subconscious and unconscious impressions bring about the personality traits in everyone. 'Personality Traits' are observed during healthy state and sickness.

In Homeopathy personality traits play a vital role in selection of remedy in every case even in asymptomatic disease like vitiligo and other skin problems.

In Autism, Homeopathic case taking should include:

- o Complete each symptom of the patient with their sensation, location, modalities, concomitants.
- Find out the causative factors from homoeopathic point of view very carefully.
- Observation of Physician is most important e.g. facial expression, body language, manner of speech, behavior, sphere of interest etc. –
- Go through the life situation of the patient / parents / mother during pregnancy – Thorough and careful probing inside situations to get more and more information
- Physical constitution
- Mother's obstetric history, any disease during pregnancy, menstrual history, any chronic diseases etc.
- Temperament of the child
- Sociability Activity Destructibility (SAD) axis
- o Reaction to stimulus
- o Characteristic mental generals
- o Emotions
- Past History
- Family History
- Personal History / immunization schedule
- Treatment History

Few Homeopathic Medicines for Autism are discussed below:

Many deep acting Constitutional homeopathic remedies can be prescribed for Autism basing upon selection of Similimum with significant improvements, no side effect and non-addictive nature. Few of them are discussed below:



Carcinosin - Very effective homeopathic medicine is helpful in children affected by autism who are talented but are obsessive, compulsive, stubborn, fastidious, under parenteral domination and also have sleep-related issues. These children may also have addictive disorders.

Baryta Carb — Withdrawing, hypoactive, emaciated, dwarfish

Idiotic with delayed milestones. H/O birth trauma, shy of strangers, sits in corners, hides himself, indifferent to toys, susceptible to cold with enlargement of glands e.g. tonsils, cervical lymph nodes, offensive foot sweat, nail biting, learns same thing over & over again yet remains untrained. Chilly.

Argentum Nitricum – Approaching / withdrawing, hyperactive, nondestructive,

Child looks like a withered old man, emaciation progressing every year and most marked on lower limbs, happy, optimistic, needs constant support to do anything, hurry before an appointment, apprehensive diarrhea, cowardice, fear of crowd, public places, craving for sugar, salt, ice cream, diarrhea after sugar intake, hot patient

Agaricus - mentally and physically awkward and show symptoms like indifference, muttering, talking, shouting, or singing but not answering to direct calls or questions. Involuntary jerks when they are awake.

These are only a few examples of how homeopathy can provide remedies for the autistic child and thus is an effective solution. However, along with Homeopathic treatment Speech Therapy, Occupational therapy may be adopted for Autism to get faster result. Family support is highly essential for children with ASD.

Homeopathy may prevent Autism in Offspring:

Homeopathic Constitutional treatment of both parents during Preconceptional period & treatment of mother during Pregnancy may prevent Autism in offspring by preparing healthy chromosomes and subsequently preparing a healthy foetus. Ideally, pre-conceptional counseling allows the physician to select a Homeopathic Similimum for both the couple through detailed homeopathic case history, physical examination and laboratory investigations which will affect the complete well-being during pregnancy and eventually delivery of a live HEALTHY baby.

- HEALTHY infant includes both physical & mental health.
- An unhealthy mother reproduces a baby who is prone to frequent ill health, chr. Infections, depressive mood etc.
- Instruction on diet, exercise habits vitamins especially folic acid taken 3 months before conception may be beneficial. Maternal anemia, hypoproteinemia should be addressed before pregnancy.
- Counseling about menstrual history, obstetric history of the lady.
- Any severe disease, hereditary disease with the lady can be determined & can be corrected.
- Emotions, anxiety, depression ought to be rectified.
- A HAPPY MOTHER PRODUCES A HEALTHY BABY.

While Autism is a life-long condition, with appropriate and tailored support, children and adults with Autism can make significant progress and live fulfilling lives. Consequently, it is imperative that people with Autism have access to Homeopathic treatment that understands their needs and helps in developing their skills and strengths.





ନୂତନ ଶୈଶବ

ଡା: ପ୍ରଶାନ୍ତ କୁମାର ନନ୍ଦ

ମାନବ ସଭ୍ୟତା ଯାହାକି ଏଭଳି ଏକ ନାଟକୀୟ ଭଙ୍ଗୀରେ ଏ ସମୟରେ ଶେଷ ହେବାକୁ ଯାଉଛି, ତାହା ମନର ଶକ୍ତିବଳରେ ପର୍ଯ୍ୟବେସିତ । ଏହା ମନ, ବସ୍ତୁ ଓ ଜୀବନ ସହିତ ଚଳାଚଳ କରୁଛି । ସଂସାର ପାଇଁ ଏହା ଯାହା ହୋଇଥାଉ ପଛକେ ଆମେ ଏଠାରେ ସେ କଥା ଚିନ୍ତା ନକରି ଏକ ନୂତନ ବ୍ୟବସ୍ଥା ବା ଜାତିର ଆଗମନ, ଯାହାକି ଏକ Spirit, ଯାହାକୁ କୁହାଯାଏ ମଣିଷ ରୂପରେ ଭଗବାନ; କିନ୍ତୁ ଭଗବାନ ଯେକି ନିଜକୁ ସମଗ୍ର ଜଗତରେ ମନୁଷ୍ୟ ସମାଜ ମଧ୍ୟରେ ଆବିର୍ଭୂତ କରିବେ, ଏହା ପ୍ରକୃତରେ ସୟବ ହେବ ସେମାନେ ଉତ୍ଥ୍ତ ହେବେ ଏବଂ ମାନବ ସମାଜକୁ ଭଗବାନଙ୍କ ବିଜୟ ଦିଗରେ, ନୂତନ ସୃଷ୍ଟି ପ୍ରାରୟର ଉଷା (Dawn) ଆଡ଼କୁ ପରିଚାଳିତ କରିବେ।

ପ୍ରଭୂଙ୍କ ଭାଷାରେ ସଙ୍ଘ ଅତିମାନବ ଯେତେବେଳେ ପ୍ରକୃତିର ରାଜା ହୋଇ ଜନ୍ମଗ୍ରହଣ କରିବ, ତା'ର ଉପସ୍ଥିତି ଜଡ଼ଜଗତକୁ ରୂପାନ୍ତରିତ କରିବ। ସେ ପ୍ରକୃତିର ରାତ୍ରିଗର୍ଭର ସତ୍ୟର ଅଗ୍ନି ପ୍ରଜ୍ୱଳିତ କରିବ ଏବଂ ଏହି ପୃଥିବୀରେ ସତ୍ୟର ମହଉର ବିଧିକୁ ପ୍ରତିଷ୍ଠିତ କରିବ, ମନୁଷ୍ୟ ମଧ୍ୟ ପରମାତ୍ମାଙ୍କ ଆବାହନ ପ୍ରତି ଉନ୍ମଖ ହେବ।

ଗୋଟିଏ ଶିଶୁକୁ ଗର୍ଭରେ ଧାରଣ କରିବା ଏଙ ଏହାର ଶରୀରକୁ ପ୍ରାୟତଃ କେବଳ ଅବଚେତନ ଭାବରେ ପ୍ରସ୍ତୁତ କରିବା ଏକମାତ୍ର ଲକ୍ଷ୍ୟ ନୁହେଁ । ପ୍ରକୃତ କାମ ଆରୟ ହୁଏ ଯେତେବେଳେ ଭଗବତ୍ ଶକ୍ତିର ଚିନ୍ତା ଓ ଇଚ୍ଛା ଦ୍ୱାରା ଆମେ ଗର୍ଭଧାରଣ କରିବା ଏଙ୍ ଏକ ଆଦର୍ଶକୁ ଅବତରଣ କରିବାରେ ସକ୍ଷମ ହେବା ।

Once again Nature feels one of Her great impulsion towards the creation of something utterly new, something unexpected. And it is to this that we must answer & obey.

ଏଥି ନିମିଭ ପୁନଃ ଏହି ମହତୀ ପ୍ରକୃତି ଅନୁଭବ କରୁଛି ଯେ, ତା'ର ଏକ ମହାନ୍ ପ୍ରେଶାକୁ ଏକ ସମ୍ପୂର୍ଣ୍ଣ ନୂତନ ସୃଷ୍ଟିର ଆବିର୍ଭାବ ନିମିଭ କିଛି ଗୋଟିଏ ସମ୍ପୂର୍ଣ୍ଣ ରୂପେ ନୂତନ ସୃଷ୍ଟି କରିବାପାଇଁ। ସାମୀ ବିବେକାନନ୍ଦ କୁହନ୍ତି: ଏକ ନୂତନ ସୃଷ୍ଟିର ଆବିର୍ଭାବ ପାଇଁ ଉଭୟ ପିତାମାତାଙ୍କର ପ୍ରାର୍ଥନା କରିବା, ଶାରୀରିକ ଭାବେ ନିଜକୁ ଠିକ୍ ଭାବରେ ପ୍ରସ୍ତୁତ କରିବା, ଏଥିପାଇଁ ଉଚିତ ଚେତନାରେ ସର୍ବଦା ବାସ କରିବା ନିହାତି ଆବଶ୍ୟକ।"

"ମନୁ" ହିନ୍ଦୁଧର୍ମର ପ୍ରାଚୀନ ଓ ପ୍ରସିଦ୍ଧ ଆଇନ ପ୍ରଶୟିତ। ଆର୍ଯ୍ୟର ସଂଜ୍ଞା ବିଷୟରେ କୁହନ୍ତି, ସେ ହେଉଛି ପ୍ରକୃତ ଆର୍ଯ୍ୟ ଯେ କି ପ୍ରାର୍ଥନାରୁ ଜନ୍ମଗ୍ରହଣ କରିଛି । ଯେଉଁ ଶିଶୁ ପ୍ରାର୍ଥନା ଦ୍ୱାରା ଜନ୍ମ ନ ହୋଇଛି ସେ ଅବାଞ୍ଚ୍ଚ, ଜାରଜ । ଶିଶୁଟିଏ ପାଇଁ ସର୍ବଦା ପ୍ରାର୍ଥନା କରିବା ଉଚିତ । ଏଣୁ ଏକ ସନ୍ତାନକୁ ଗର୍ଭଧାରଣର ୧ବର୍ଷ ପୂର୍ବରୁ ପିତାମାତାମାନେ ନିଜେ ମଧ୍ୟ ଏକ ସମୁଚ୍ଚ ସାସ୍ଥ୍ୟର ଅଧିକାରୀ ହେବାପାଇଁ ଚେଷ୍ଟିତ ହେବା ଉଚିତ୍ ଯାହାକି ଜନ୍ମ ହେବାକୁ ଥିବା ଶିଶୁ ତାର ଏକ Genetic inheritance ଯୋଗାଇବ ।

ମାଆର ଗର୍ଭଧାରଣ ସମୟରେ ସେ ରହୁଥିବା ଚେତନାର ଅବସ୍ଥା: ଶିଶୁଟିକୁ ଗର୍ଭରେ ଧାରଣ କରିବା ଓ ତାକୁ ଜନ୍ୱଦେବା - ଏହି ଅବଧିଟି ଉଭୟ ପିତା ଓ ମାତାଙ୍କ ପାଇଁ ବହୃତ ଉପାଦେୟ ଅଟେ । କାରଣ ଯଦି ସେମାନେ ସେ ସମୟରେ ନିମ୍ନ ଓ କଦର୍ଯ୍ୟ ଜୀବନ ଯାପନ କରୁଥିବେ, ତେବେ ଶିଶୁ ସେମାନଙ୍କର ଏହିସବୁ ଗୁଣ ଆହରଣ କରିବା ଭଲଭାବରେ ଗଢ଼ାହୋଇ ନଥ୍ବା ଶିଶୁମାନେ ଶ୍ରତିଶକ୍ତିହୀନତା, ବୃଦ୍ଧିହୀନତା, ଦୁର୍ବଳ ଶ୍ରତି ଶକ୍ତି ପ୍ରାପ୍ତ ହୋଇଥିବେ। ଏହା ନିର୍ଭର କରେ ପିତାମାତାମାନେ ସନ୍ତାନକୁ ଗର୍ଭରେ ଧାରଣ କରୁଥିବା ବେଳେ ସେମାନଙ୍କ ଚେତନାର ଅବସ୍ଥା ହେତୁ । ଏପରିକି ଶିଶୁଟି ଜନ୍ମହେବା ଓ ତା'ର ଜୀବନ ଅବଧି ଯାଏଁ ଏହା ରହିଯାଇଥାଏ । ଏଣୁ ଗର୍ଭ ସଞ୍ଚାର ସମୟରେ ପିତାମାତାମାନେ ଯେଉଁ ଚେତନାରେ ରହିଥାଆନ୍ତି, ତାହା ଶିଶୁ ଉପରେ ସେହି ପ୍ରକାରର ମୋହର ଲଗାଇଥାଏ, ଯାହାକି ତା'ର ଜୀବନ ସାରା ପ୍ତିଫଳିତ ହୋଇଥାଏ । ଏହି ସମୟରେ ପିତାମାତାମାନଙ୍କର ଚେତନାକୁ ଆମେ ଯେତେ ଛୋଟ ବୋଲି ଭାବିଲେ ମଧ୍ୟ ଏହା ଏକ ବିରାଟ



ଉପସଂହାରରେ ପରିଣତ ହୁଏ । ସନ୍ତାନଟି ଯେତେବେଳେ ଖରାପ ବ୍ୟବହାର କରେ ସେମାନେ ତା'କୁ ଓ ନିଜକୁ ମଧ୍ୟ ଧିକ୍କାର କରନ୍ତି, "କେଉଁ ବେଳାରେ ଆମେ ଏହାକୁ ଜନ୍ମ ଦେଇଥିଲୁ କେଜାଣି ।" (CWM - 5/41)

ପ୍ରକୃତ ମାତୃତ୍ୱ କ'ଶ?

ପ୍ରକୃତ ମାତୃତ୍ୱ ଆରୟ ହୁଏ ବ୍ୟକ୍ତିର ସଚେତନ ସୃଷ୍ଟିରୁ । ଯେଉଁ ଆତ୍ମାଟିର ଆଗମନ ହେଉଛି ତାହାର ଏକ ଐଚ୍ଛିକ ଆକାର ଦେବା, ତଦ୍ୱାରା ତା'ର ବୃଦ୍ଧି ଘଟିବ ଏବଂ ନୂତନ ଶରୀର ଗଠନ କରିବ । ନାରୀର ପ୍ରକୃତ କାର୍ଯ୍ୟ ହେଉଛି ଆଧ୍ୟାତ୍ମିକତା । ଏହାକୁ ଆମେ ସମୟେ ସମୟେ ଭୁଲିଯାଉ ।

ଅବଚେତନ ଭାବରେ ସନ୍ତାନଟିକୁ ଧାରଣ କରିବ, ସେତିକିରେ ଚଳିବ ନାହିଁ। ପ୍ରକୃତ କାର୍ଯ୍ୟଟି ଆରୟ ହୁଏ ଯେତେବେଳେ ଶକ୍ତି ଓ ଇଚ୍ଛା ବଳରେ ଆମେ ଶିଶୁଟିଏ ଗର୍ଭରେ ଧାରଣ କରିବା ଏଙ ତାକୁ ଆଦର୍ଶ ଭାବେ ଗଢ଼ି ତୋଳିବା।

ଏକଥା ସ୍ଥିର ନିଷ୍ଟିତ ଯେ ଜନ୍ମ ହେବାକୁ ଯାଉଥିବା ଶିଶୁର ଗୁଣ ବହୁଳ ଭାବରେ ନିର୍ଭର କରେ ତା'ର ମାତା ଉପରେ ଯେ ତାକୁ ରୂପ ଦେଇଥାଏ ଓ ସେ ରହୁଥିବା ଏହି ପାର୍ଥ୍ବ ପରିବେଶ ମଧ୍ୟରେ । ତା'ର ଚିନ୍ତାରାଜି ସର୍ବଦା ସୁନ୍ଦର, ଶୁଦ୍ଧ, ଅନୁଭବରାଜି ସର୍ବଦା ଉନ୍ନତ, ସେ ସମଞ ପ୍ରକାରର ସରଳ ଜୀବନ ଯାପନ କରୁଥିବ ଏଙ୍ ସର୍ବୋପରି ଏହା ସହିତ ତା'ର ଏକ ସଚେତନ ଏଙ୍ ନିଷ୍ଟିତ ଇଚ୍ଛାଶକ୍ତି ଶିଶୁଟିକୁ ସର୍ବୋଉମ ଆଦର୍ଶ ରୂପେ ଗଢ଼ିତୋଳିବାର ଯଦି ଇଚ୍ଛା ରହେ ସେ ଗର୍ଭଧାରଣ କରିପାରେ । ତପ୍ରେ ଉଚ୍ଚତମ ସର୍ଭ ଗୁଡ଼ିକୁ ଶିଶୁଟିକୁ ଯୋଗାଇଦିଆଗଲେ ସେ ଉପଯୁକ୍ତ ସମୟରେ ଏ ପୃଥିବୀକୁ ଆସିବ । ଏହିପରି ଭାବରେ ସମୟ ଅସୁବିଧା ପରିସ୍ଥିତି ଓ ଅବାଞ୍ଚତ କଷ୍ଟଗୁଡ଼ିକ ଏହି ବାଟରେ ପ୍ରତ୍ୟାଖ୍ୟାତ ହୋଇପାରିବ । ଏସବୁ ପାଇଁ ପ୍ରାତଃ ଭ୍ରମଣ, ଶ୍ଳୋକ, ଗୀତାପାଠ, ରାମାୟଣ, ଆଧ୍ୟାତ୍ମିକ ସଙ୍ଗୀତ ଶ୍ରବଣ ଓ ମନ୍ଦ୍ରଗାନ ସହିତ ମା'ଙ୍କ ମ୍ୟୁଜିକ୍ ଶୁଣିବା ଓ ଗାଇବା ମାତୃଗର୍ଭରେ ଏକ ସୁନ୍ଦର ସନ୍ଦନ ତିଆରି ହୋଇଥାଏ ।

ମା'କୁହନ୍ତି ପୂର୍ବକାଳରେ ଏବଂ ଏବେ ମଧ୍ୟ ଗର୍ଭଧାରିଣୀ ମା'ମାନେ କେତେକ ପରିବେଶ ମଧ୍ୟରେ ବାସ କରୁଛନ୍ତି, ଯେଉଁଠାରେ କି ସୌନ୍ଦର୍ଯ୍ୟ, ସମତା, ଶାନ୍ତି ଏବଂ ଉତ୍ତମ ସାସ୍ଥ୍ୟକର ଅବସ୍ଥା ରହିଛି । ଏହାଦ୍ୱାରା ଶିଶୁଟି ସର୍ବୋତ୍ତମ ଅବସ୍ଥାରେ ଗଢ଼ାଯାଇପାରିବ । ମଣିଷ ସମାକ ଏଭଳି ପରିବେଶ ତିଆରି କରିବା ପାଇଁ ବହୁତ ସକ୍ଷମ ହେଲେଣି, ଯାହାକି ପୂର୍ବେ ଆଦୌ ଆଶାକରାଯାଉ ନଥିଲା । ଖୁବ୍ କମ୍ ଲୋକ ଏ ବିଷୟରେ ଚିନ୍ତା କରୁଥିଲେ ଏବଂ ଅନେକେ ଏହାକୁ ଚାହୁଁ ନଥିଲେ ।

ହିରଣ୍ୟକଶ୍ୟପ ପୁତ୍ର ପ୍ରହ୍ଲାଦଙ୍କ ମାଆ ଓ ରାବଶଙ୍କ ମାତାଙ୍କର ଉଦାହରଣ ଦେଇ ମା' କହିଛନ୍ତି ଯେ ମାଆର ଗର୍ଭାଶୟ ହିଁ ଶିଶ୍ୱର ଭବିଷ୍ୟତ ନିର୍ଣ୍ଣୟ କରିଥାଏ।

Supreme shall be born of women: ଆମକୁ ପ୍ରଥମେ ଭଲଭାବେ ବୃଝିବାକୁ ପଡ଼ିବ ଏକଥାର ଅର୍ଥଟିକୁ, ଏହା ସୂଜନ କରୁଥିବା ଦାୟିତ୍ୱଟିକୁ ଏବଂ ଆମପାଇଁ ଆସୁଥିବା କାର୍ଯ୍ୟଟିର ଗୁରୁତ୍ୱଟିକୁ । ବର୍ତ୍ତମାନର ସମୟ ବିଶ୍ୱୟରୀୟ ଏହି କାର୍ଯ୍ୟଟିକୁ ବିସ୍ତୁତଭାବେ ନିଷାର ସହ ବୁଝିବାକୁ ହେବ। ବର୍ତ୍ତମାନର ଏହି ଅନ୍ଧକାରକୁ ଦିବ୍ୟ ଆଲୋକ ଓ ସମତାକୁ ରୂପାନ୍ତର ହେବାର ବାଟ କଅଣ ? ମା' କହୁଛନ୍ତି, ପୃଥିବୀର ଏହି critical period କେବଳ ମାତ୍ । ଏହା ଯଥେଷ୍ଟ ନୁହେଁ ଯେ ଗୋଟିଏ ସନ୍ତାନ ଜନୁ କରିଦେବା ଯାହାର କି ଆମ ସର୍ବୋତ୍ତମ ବ୍ୟକ୍ତିତ୍ୱର ସୃଷ୍ଟି ହୋଇଗଲା । ଆମେ ଖୋଜି ଚାଲିବା ଯେ ଏହାର ଭବିଷ୍ୟତ ୟରଟି କଅଣ ଯାହାର ଉର୍ଦ୍ଧ୍ୱଗତିଟିକୁ ପ୍କୃତିମାତା ଯୋଜନା କରୁଛନି । ତଥାକଥ୍ତ ବଡ଼ଲୋଟିଏ, ସମୟ ଉଚ୍ଚଗୁଣଯୁକ ବ୍ୟକ୍ତିଟିଏ ବା ଯାହାକୁ କହନ୍ତି: ଜଣେ ନିଜକୁ ସମର୍ପିତ ବ୍ୟକ୍ତିଟିଏ ନୁହେଁ ବଙ୍ଗ ତା ମଧ୍ୟରେ ଥିବା constant aspiration of thoughts and will ଏବଂ ସର୍ବୋତ୍ତମ ସନ୍ଧାବନା ଓ ସଙ୍କଳ୍ପ ଯାହାକି ସମୟ ପାର୍ଥିବ ମାପ ଓ feature ଠାରୁ ଦୂରରେ ଥାଇ ପରମଙ୍କୁ ଜନ୍ମଦେବ । ପଭୁ ଶୀଅରବିନ୍ଦ କହୁଛନ୍ତି:

When superman is born as Nature's king
His presence shall transfigure Matter's world:
He shall light up Truth's fire in Nature's night,
He shall lay upon the earth Truth's greater
law;

(Savitri 708-709)





Sun-eyed children

ପ୍ରସାଦ ତ୍ରିପାଠୀ

ପଚାରିଲି ଦିନେ ଗୋଟିଏ ଶିଶୁକ୍ "ବଡ଼ ହେଲେ କ'ଣ ହେବୃ ତୃ କହ ?" ପିଲାଟି ଖୁବ୍ ଧୀର ଅଥଚ ଦୃଢ଼ ଭାବରେ ମୋତେ ଚାହିଁଲା- ଆଉ କହିଲା ସତ କହିଲ ଭାଇ, "ତୁମେ ପିଲାଦିନେ ଯାହା ହବାକୁ ଚାହିଁଥିଲ- କ'ଣ ତାହା ହୋଇପାରିଚ ?" ଆରେ ସତେତ ! ଏ କଥା ମୁଁ ନିଜକୁ ପଚାରିବା କଥା ଶିଶୁଟି ପୁଣି କହିଲା- ତୁମେ ଯାହା ହୋଇଚ ତାହା କ'ଣ ସବୁ ଅଯଥାର୍ଥ ? ତୁମେ କ'ଣ ଏକ ତ୍ରଟିପୂର୍ଣ୍ଣ ଭବିଷ୍ୟତରେ ପହଞ୍ଚଛ ? ମୁଁ ପୁଣି ଭାବିଲି, ମୁଁ ହୁଏତ ଯାହା ହେବାକୁ ଚାହିଁଥିଲି ତାହା ହୋଇପାରି ନାହିଁ. ମାତ୍ର ଯାହା ହେବା କଥା ତାହାହିଁ ହୋଇଛି I ମାତ୍ ଏ କଥା ଶିଶୃଟି କିପରି ଭାବି ପାରିଲା ! କାରଣ ଏ ସମୟ ଏକ ନୃତନ ଚେତନାର ଅଭ୍ୟୁଦୟର ସମୟ ଏଠାରେ କିଛି ବି ଅନାବଶ୍ୟକ ଘଟୁ ନାହିଁ। ଏପରିକି ଶିଶୃଟିଏ ମଧ୍ୟ ସଚେତନ,

ପୁଣି କହିଲା- ମୁଁ ଭବିଷ୍ୟତରେ କ'ଣ ହେବି ଏକଥା ମୁଁ ନା- ଅନ୍ୟ କେହି ଭାବିଛନ୍ତି ? ମୋର ପିତାମାତା ପରିବାର କେହି ବି ଜାଣନ୍ତି ନାହିଁ କେବଳ ଦିବ୍ୟ ଜନନୀ ହିଁ ଜାଣନ୍ତି । ତେଣୁ ଭବିଷ୍ୟତ ବିଷୟରେ ଚିନ୍ତା ନ କରି କେବଳ ତାଙ୍କ ନିକଟରେ ନିଜକୁ ସମର୍ପି ଦେବା ସବୁଠାରୁ ସମୀଚିନ ନୁହେଁକି ? ବାୟବରେ ସେଦିନ ସେ ଶିଶୁଟି ମୋର ଚକ୍ଷୁ ଖୋଲିଦେଲା । ଆମ କାହାରି ହିସାବରେ ସଂସାର ଚାଲୁ ନାହିଁ । ମାତ୍ର ଯାହା ହିସାବରେ ଚାଲୁ ପଛେ ଆମେ ତାହିଁରେ ନିଷ୍ଟୟ ଖୁସୀରେ ଅଛୁ ।

ମା' କହିଲେ, ... We are here to open the way of the Future to children who belong to the Future.

... ଆମେ ଏଠାରେ ଭବିଷ୍ୟତ ନିମନ୍ତେ ଉଦିଷ୍ଟ ଶିଶୁମାନଙ୍କ ନିମନ୍ତେ ଭବିଷ୍ୟତର ମାର୍ଗ ଖୋଲିଦେବାକୁ ଅନ୍ତୁ....

ଅର୍ଥୀତ୍ ଏଇ ଶିଶୁମାନେ ହିଁ ନୃତନ ଭବିଷ୍ୟତର ଅଧିକାରୀ । ସେମାନେ ହିଁ Sun-eyed children ସେମାନେ ହିଁ New Child.





SAMA – SAMATA ZONE

A Decade's Journey of Health & Healing

Dr. Prashant Patra

A sincere aspiration and passionate urge to work towards health and healing for the community I belong to was the starting point. The real impetus to plunge into action came from constant inspiration and guidance from Prof. Shyama Kanungo and other stalwarts of Sri Aurobindo Medical Association (SAMA).

SAMA, Samata Zone (comprising of Sundargarh, Deogarh and Jharsuguda district) made its serene presence felt during hosting of 1st district level conference over the theme of "Fever and Fear" in January'2013, at Sri Aurobindo Yoga Mandir, Rourkela. Although it was a Sundargarh district event members of the Sri Aurobindo Study Circle Committee of the entire SAMATA Zone participated. Hence being inspired by its wide recognition we moved forward, and organised 1st Zonal Health Conferences most successfully in the year 2014, intensified the School Health Programs in different Sri Aurobindo Integral Schools in the zone and conducting awareness programs for students and teachers. The successive Annual Zonal Conferences that were organised and widely acclaimed with befitting Central Themes, are as follows -

- 1. 2014 Pain and suffering
- 2. 2015 Tension, Hypertension and Solution
- 3. 2016 Mental Health Problems and Solutions through Mind and Beyond
- 4. 2017 Ageing Problems, Solutions
- 5. 2018 Heart and Harmony Problems & Solutions
- 6. 2019 Style of Living & Holistic Healing
- 7. 2020 Crisis & Cancer Cause & Cure

- 8. 2021 (In Virtual mode due to ungoing COVID 19 Pandemic)
- "Fear and Falsehood Health & Healing"
- 9. 2022 (In Hybrid mode) Social Health & Harmony Problems & Solutions
- 10. 2023 (Concurrently with Sri Aurobindo's Rourkela School's Golden Jubilee) 11th February 2023-08-25 Body, Brain and Beyond For Health & Healing.

Gradually the need of Convergence was felt increasingly and utilised in subsequent activities. We started thinking and working upon way forwards, upon the practical utility of the consensus statements of each conference towards improving health status of the community a whole.

The 10th Zonal Conference which was held on 11th February 2023, i.e. during the celebration of Golden Jubilee of Sri Aurobindo's Rourkela School. Theme was "Body, Brain and Beyond For Health & Healing". The lead faculty was Dr. Alok Pandey of Sri Aurobindo Ashram, Pondicherry. Among the luminaries, Medical Scientists, Integral Healers and Sadhaks, Prof. Shyama Kanungo, Dr. Yogesh Mohan, Dr. Asit Tripathy, Prof. H. K. Senapati, Dr. Debidutta Kar, Shri Gadadhar Mishra, Shri Prasad Tripathy, Dr. Biswajit Mahapatra were prominent, who by their heart touching deliberations and interactive sessions made the conference sweetly memorable. The Healing Solutions by Dr. Yogesh Mohan, the pioneer Integral Healer from Chennai was attended with great enthusiasm and sincerity – The topics of discussion were – The Need of Convergence, Body and Beauty, Mind



your Brain, Heal Body without Pill, Love and Knowledge for Health and Healing and open Q&A Session on Body-Mind-Medicine".

A befitting exhibition was also held over the conference theme and a Souvenir was brought out to mark the occasion.

To make the school Health Program more realistic and effective this year we conducted students' comprehensive Health Screening and Mothers' meeting in Sri Aurobindo's, Rourkela School to start with. The School Health Card as devised by SAMA was taken as the yard stick for assessing overall health status & students, which can be kept as vital documents in the School for future reference and research. We could find out the prevalence of anaemia (60%-65%) in our School Children, Obesity (10%), Mental health issues especially poor scholastic performance (10%) and accordingly addressed the issue in subsequent Mothers' meetings and could guide the mothers and guardian as well, on the possible solutions who were inspired to play their role in preventing illness and in health seeking behaviour at the earliest in specific conditions through open discussion, power point presentations and open Q & A Sessions.





We plan to extend such meaningful school Health programs to other schools in Sundargarh district and beyond ...

Long Live SAMA!

May the Mother Bless us, guide us and lead us.



One must maintain, through a sort of conscious concentration, a condition, a way of being which is not natural according to the old nature, but which is evidently the new way of being. But in that way, illness can be avoided. But it is almost a Herculean task. It is difficult.

(11/243) - The Mother



REPORT OF 2022-2023 OF SAMA

Emancipated from COVID but learning from COVID the 33rd Annual conference of Sri Aurobindo Medical Association was a 'Hybrid' one. It was a very special event commemorating the confluence of the sesquicentenary - 150th year of Sri Aurobindo's Birth and the 75th year of the Independence of our Nation. The theme was "Transformation - the Goal of Evolution envisaged by Sri Aurobindo" selected by none other than Dr.A.S. Dalal who has been closely associated and guiding the Sri Aurobindo Medical Association for long and for which we feel exceptionally privileged.

The Day 1 of the 33rd All Orissa Conference of the Sri Aurobindo Medical Association started with a soul stirring invocation by Namita of SAIEC Rajgangpur followed by a thrilling pre-recorded recitation of Sri Aurobindo's "Transformation" by Narad (Richard Eggenberg). This was followed by a most inspirational Audio message by Dr.A.S. Dalal. Written Message of Sri Manoj Dasgupta, Managing Trustee was read out. Welcome address was given by Prasad Tripathy. Report of the 32nd All Orissa Conference was read out by myself. Dr. Badal Mohanty gave the inaugural address and released the Souvenir. Vote of thanks was given by Dr.Bipinananda Mishra. This was followed by the plenary session entitled "My Body-its beauty and total health" by Dr.Nityananda Swain and Dr.Sindhunandini Tripathy. Post lunch there were two key note pre-recorded addresses - "Sri Aurobindo's Yoga and Ayurveda" by Dr.Vamadeva Shastry (Dr. David Frawley) and "Evolutionary Parenting by Dr.David Marshak. In the evening there was an Oration on "Destiny of the Human Body" by Dr. Alok Pandey.

On Day 2 there was a live workshop on "Consciousness as Medicine" in two sessions 6.30-8.00 am (pre-breakfast) and 9.00 am-10.30 am(Post breakfast) conducted by Dr.Yogesh Mohan. From 11 am - 1.00 pm there was a prerecorded Symposium captioned "Transformation – from Near to Far". 'During Conception' presented by Dr.Smruti Vaishanav of Bhakaka University. 'During Childhood' by Dr. Pravakar Mishra. 'During Adolescence and Youth' by Dr. Vladimir Yatsenko; 'During the life of a Householder'- by Dr. Sampadananda Mishra; 'During Vanaprasthashrama and Sanyasashrama' by Dr. Valendu Vaishnav. From 3-5 pm was a freelance symposium on 'Influence of the Yoga of Transformation in my Professional life' by Dr.Alok Pandey (pre-recorded) Dr.Yogesh Mohan(live) and members of SAMA - Dr.Bijoy Sahoo, Dr. Madan Pradhan, Dr. Sujata Das, Dr.Sudhansu Moharana, Dr.Bijayeeni Mohapatra, Dr. Abhijit Lincoln. Another Plenary Session on "Need of the Hour: Engaging in the Yoga of Transformation" that were pre-recorded talks by Dr. Alok Pandey and Dr. Vladimir YatsenKo. Folowed by Concluding remarks by Sri Gadadhar Mishra and Vote of thanks by Dr. Pratap Chandra Rath.

The other activities of the Sri Aurobindo Medical Association were :

1. Travel support for the Satelite Dental care services extended by the Department of Public Health Dentistry headed by Prof.Hemamalini Rath, at the 'Ringiovennaire', Sri Aurobindo Srikshetra, Dalijoda,



- Annual Master Health Check-up for the Sadhaks and Sadhak Teachers on 13th April 2023.
- 20th Sri Aurobindo health squad Training 3. from 3rd to 23rd May 2023 conducted at Shreekshetra Bhavan, Ranihat. Learning from past experience and considering the basic capabilities required understanding the components this time it was restricted to those having a minimum of graduate level education in the participants. It was also differently structured giving more stress on Integral Healing and Psycological, Spiritual and Consciousness domains which were offered by live sessions by Dr.Yogesh Mohan – pre-recorded sessions by Dr. A.S. Dalal, Dr.Alok Pandey and Dr.Gayatri Satapathy. The common health problems of Centres and Schools however were also covered. Important sessions were videorecorded. A detailed copy of the program is included in the Souvenir.
- 4. Master Health check up on 27th May 2023 for Senior Sadhaks of Matrubhaban. The laboratory tests were done by Dr.Prativa Sen's team.
- 5. Setting up a multidisciplinary out-patient service at the SAIIHR, Ranihat in addition to the OBGYN Out & Inpatient services provided by myself and other gynaecologists Dr. Ashok Kumar Dash, Dr. Boblina Mohanty, Dr. Nihar Ranjan Mishra and in-patient surgical services provided by Dr. Bijoy Kumar Sahoo.

This conference revolves on the theme "THE NEW CHILDHOOD" International, National and State level resource persons will be covering the theme (both in pre-recorded and offline) holistically from modern scientifically authenticated facts to subtler ranges of evolutionary consciousness addressing the primal aspirations of man in the domains of health and healing as in all other domains...

Hoping for a joyful interaction amongst the participants in the ensuing two day event...



It is this in the body which finds it difficult to adapt itself to this new Power and creates the disorder and difficulties, the illnesses

(11/316) - The Mother



AWARDEES OF CERTIFICATE OF APPRECIATION

<u>S.N.</u>	<u>Name</u>	Discipline	<u>Mobile</u>
1	Dr. Meena Som	Health Specialist, UNICEF	9437030443
2	Dr. Rudra Prasanna Das	Consultant, UNICEF	9453572912
3	Dr. Brajesh Merta	Consultant, UNICEF	9620749084
4	Dr. Sambit Jena	State Public Health Consultant	9437078144
5	Dr. Murali Padhy	Additional Director, Maternal Health	9437060327
6	Dr. Nirod Kumar Sahoo	Additional Director technical, NHM	9437352014
7	Dr. Dinabandhu Sahoo	TLSHSRC, NHM	9439994817
8	Sri Saroj Panigrahi	Consultant, RMNCHA+N	9439994845
9	Prof. Dr. Leena Das	HoD Paediatrics, PGIMER,Bhubaneswar	9437271989
10	Prof. Dr. Ajit Kumar Nayak	HoD, OBGYN, FMMCH, Balasore	9338008554
11	Dr. Biranchi Narayan Mohapatra	OBGYN Specialist, DHH, Jajpur	9861775760
12	Dr. Indira Palo	Associate Professor, OBGYN ,	
		MKCG Medical College Hospital, Berhampur	9437217544
13	Dr. Ojaswini Patel	Associate Professor, OBGYN, VIMSAR	9937103805
14	Prof. Dr. Sasmita Swain	Prof.OBGYN,SCBMCH	9861085727
15	Prof. Dr. Kirtirekha Mohapatra	HoD & Nodal Officer, CoE, MH, SUMAN, SCBMCH	9437219111
16	Prof. Dr. Lucy Das	Professor OBGYN, SCBMCH	9437255580
17	Prof. Dr. Sweta Singh	HoD, OBGYN, AIIMS, BBSR	9438884131
18	Dr. Jasmina Begum	Associate Professor, O&G, AIIMS, BBSR	9443392737
19	Dr. Pushpanjali Khuntia	Associate Professor, O&G, Govt. Medical College, Sundergarh	9438680103
20	Dr. Priti Dubey	Fetal Medicine Specialist, ODISHA FETAL MEDICINE CENTRE	6370992994
21	Dr. Sandhyarani Behera	Associate Professor, PGIMER, BBSR	9437148772
22	Dr. Madhusmita Pradhan	Associate Professor, BBMCH, Balangir	9437136182
23	Dr. Radhakanta Panigrahi	Associate Professor, SLNMCH, Koraput	9437159007
24	Dr. Saumya Nanda	Associate Professor,	8895578238
25	Dr. Subhasree Mishra	Associate Professor, O&G	9438913475
26	Dr. Sujata Singh	Professor O&G	9437266016
27	Dr. Amitabh Giri	Sonologist, Balasore	7978302341
28	Dr. Ashok Kumar Dash	O&G Specialist	9937172303
29	Dr. Boblina Mohanty	O&G Specialist	9437164692
30	Dr. Dillip Kumar Patra	O&G Specialist	9937841887
31	Dr. Dipak Kumar Das	Obstetrics & Gynaecology	7606084867
32	Dr. Himansu Sekhar Kar	O&G Specialist, DHH, Jagatsinghpur	8763314880
33	Dr. Om Avishek Das	Assistant Prof, FMMCH, Balasore	9337294956
34	Dr. Pramodini Swain	O&G Consultant	9439331122
35	Dr. Rama Manjari Naik	Fetal Medicine Consultant, BBSR	7327079596
36	Dr. Ashis Mohanty	O&G Specialist, DHH, Keonjhar	9437034571



37	Dr. Satyanarayan Behera	Asst. Prof. O&G,V IMSAR	8327715824
38	Dr. Abhaya Pattnaik	O&G Specialist, Kandhamal	9437026680
39	Dr. Ashok Khurrana	Founder President, SFM, Odisha, Chief Mentor,	
		Online USG training of O&G Specialist	9811713643
40	Dr. Balaram Sahoo	O&G Specialist, Titilagarh	9438067810
41	Dr. Bijaya Ch. Shadangi	O&G Training Consultant, SIHFW	9437858587
42	Dr. Geetanjali Rath	O&G Specialist, DHH, Cuttack	9437628464
43	Dr. Hasmukh Lal	Sonologist, Course I/C Online Training in USG, Odisha	8144688604
44	Dr. Pramod Kumar Nayak	O&G Specialist, DHH, Jagatsinghpur	9437298590
45	Dr. Rabinarayan Senapati	O&G Specialist, Anandapur,	9238855237
46	Dr. Ranjana Bhandari	O&G Specialist, DHH, Baripada	9861093910
47	Dr. Ritanjali Mishra	O&G Specialist, Koraput	9437111525
48	Dr. Samarendra Mahapatra	O&G Specialist & FM Specialist	8249603336
49	Dr. Sasmita Das	Associate Professor, O&G, IMS SUM	9437032636
50	Dr. Sankar Jaykisan Patel	O&G Consultant, Jharsuguda	9437130565
51	Dr. Srikanta Sahu	O&G Specialist, DHH, Gajapati	7008112979
52	Dr. Sudarsan Meher	O&G Specialist, DHH, BOUDH	9861422149
53	Dr. Suren Prasad Dash	Sonologist	8144082364
54	Dr. Abhipsa Rath	Asst.Prof O&G	8895159121
55	Dr. Dillip Kumar Biswal	Obstetrics & Gynaecology	9437258458
56	Dr. Aditya Mohapatra	Consultant Child Health, NHM	9437800025
57	Dr. R.N.Panda	Pediatric Consultant, NHM	943999825
58	Dr. Mala Sibal	Director Gynae Academy, Bangalore,	
		Mentor in Gynae USG, Online training of USG in Odisha	9845069940
59	Dr. Nirmala Dei,	RMNCH+A Consultant, NHM	9437230809
60	Dr. Sasmita Behuria	Associate Professor, O&G, SCBMCH	9437106234
61	Dr. Mrityunjoy Mishra	Consultant NH, NHM	9437283900





34th ANNUAL CONFERENCE OF SRI AUROBINDO MEDICAL ASSOCIATION

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Er. Lalatendu Samant





PROGRAMME

DAY 1: 09.09.2023 (SATURDAY)

8.00 - 9.30 am : Registration & Breakfast 10.00 - 10.15 am : Collective Meditation

10.20 am : Opening of the Exhibition- "THE NEW CHILDHOOD"

10.30 - 11.30 am : Panel Discussion: "PRENATAL FACTORS FOR OPTIMAL OUT COME OF

NEWBORN BEFORE DELIVERY"

Moderators : Dr. Ajit Nayak, Dr. Sweta Singh

Panelists : Dr. Radhakanta Panigrahy, Dr. Ojoswini Patel,

Dr. Mahija Sahu, Dr. Jeetendra Behera

Experts : Dr. Priti Dubey, Dr. Kirtirekha Mohapatra, Dr. Jyotsna Panigrahy

11.30 - 12.30 pm : INAUGURAL SESSION

12.30 - 1.30 pm : Panel Discussion: "PRENATAL FACTORS FOR AN

INTEGRALLY CONSCIOUS NEW BORN"

Video presentation of Giselle Whitewell, Anuradha Agarwal

Moderators : Dr. Smruti Vaishnav, Dr. Gopal Chandra Dash

Panellists : Dr. Bharadwaj Mishra, Dr. Sujata Das, Dr. Latika Behera,

Dr. Ritanjali Mishra, Dr. Ashok Kumar Dash, Dr. Rabi Senapaty,

Experts : Dr. Yogesh Mohan, Dr. Madhusmita Pradhan, Dr. Sasmita Swain

1.30 - 2.30 pm : Lunch

2.30 - 3.30 pm : Panel Discussion: SAFE CHILD REARING IN NEONATAL, INFANCY,

UNDER-FIVE PERIOD.

Moderators : Dr. Sailajanandan Parida, Dr. Arakhita Swain

Panellists : Dr. Leena Das, Dr. Jyotiranjan Champatiray, Dr. Aditya Mohapatra,

Dr. Sanghamitra Panda, Dr. Nirmallya Pradhan

Expert : Dr. Jnanindra Behera, Dr. Sunil Agarwal, Dr. Prasanna Kumar Sahoo,

Dr. Shashi Vani

3.30 - 4.30 pm : Panel Discussion: CONSCIOUS CHILD REARING IN NEONATAL, INFANCY

AND UNDER-FIVE PERIOD

Moderators : Dr. Prashant Kumar Patra, Dr. Deepa Banker

Panellists : Dr. Nikhil Kharod, Dr. Alpa Khakhar, Ms Sanghamitra Sau Sengupta,

Dr. Madan Mohan Pradhan,

Experts : Dr. Yogesh Mohan, Prof. Hrushikesh Senapaty, Dr. Tophan Pati 4.30 - 5.30 pm : PANEL DISCUSSION: AUTISM: Causes, Prevention, Management

Moderator : Dr. Debasis Panigrahi, Dr. Nihar Ranjan Biswal

Panellists : Dr. Juan Guillion, Dr. Sumana Panda, Dr. Seema Parija, Dr. Nikhil Kharod,

Ms Sanghamitra Sau Sengupta

Experts : Dr. Yogesh Mohan, Dr. Neelmadhab Rath, Dr. Sashi Vani



6.00 - 7.30 pm : Plenary Session - THE NEW CHILDHOOD

Chairpersons : Dr. Badal Mohanty, Dr. Prasanna Kumar Sahoo, Sri Gadadhar Mishra

The New Childhood : Dr. Alok Pandey (Sri Aurobindo Ashram)- Video- 15 min

Dr. David Marshak (California) Video 15 min

KMC What, Why, How : Dr. Shashi Vani 20 min

The Divine Child : Dr. Nityananda Swain-20 min 7.30 - 8.00 pm : CULTURAL PROGRAM : Dance

Exposion : "SUN EYED CHILDREN OF A MARVELLOUS DAWN" by Sri Aurobindo

Kala Parishad.

8.00 pm : Dinner

DAY 2: 10.09.2023 (SUNDAY)

6.00 - 6.15 am : COLLECTIVE MEDITATION

6.30 - 7.30 am : GUIDED SESSION ON Consciousness As Medicine -

by Dr. Yogesh Mohan

8.00 - 9.00 am : BREAKFAST

9.00 - 11.00am : Chairpersons: Dr. Pratap Ch. Rath, Dr. Dhaneswar Pradhan,

Dr. Biranchi Narayan Mohapatra

9.00-10.30 am : "GUIDED MEDITATION FOR ADOLESCENTS" - Prof. Bhalendu Vaishnav

10.30-11.00 am : School Health Program of Govt of Odisha- Sri Saroj Panigrahi,

RMNCHA Consultant (NHM)

11.30-1.00 pm : VALEDICTORY SESSION:

Chief Guest : Professor Ganeshi Lal, Hon'ble Governor of Odisha

1.00-2.00 pm : LUNCH

2.30-3.30pm : Panel Discussion : Integrated School Health Check up Moderators : Dr. Madan Mohan Pradhan, Dr. Sanghamitra Panda,

Dr. Shyama Kanungo

Panelists : Er. Lalatendu Samant (ASPRUHA), Sri Sashikanta Bhoi (ASTHA),

Sri Akshay Kumar Biswal (KRUPA), Sri Tareswar Rath (NISTHA),

Sri Suresh Mishra (SAMARPAN), Sri Dambarudhar Sahu

(SAMATA), Sri Prafulla Kumar Panda (SANGATI),

Sri Mayadhar Sahoo (SATYA), Sri Madan Mohan Dani(SHANTI)

Experts : Prof. H. K. Senapaty, Sri Prasad Tripathy,

Dr. Bijoy Kumar Sahoo, Dr. Bijayeeni Mohapatra

3.30- 5.00 pm : ORGANISATION MEETING - WAY FORWARD

Dr. Chaitanya Sahoo, Dr. Sudhir Brahma,

Dr. Prashant Nanda, Sri Bipin Kar, Sri Sridhar Sahoo, Smt. Sabita Rath

5.00-6.00 pm : High Tea

6.00-6.30 PM : Collective Meditation

