



INTERNATIONAL JOURNAL OF MULTIDISCIPLINARY HEALTH SCIENCES

ISSN: 2394 9406

COVID 19 AND AYURVEDIC MODALITIES FOR PSYCHOLOGICAL WELLBEING OF CHILDREN

Dr. Sandeep Patil¹, Dr. Jyotsna Ahir², Dr. Varsha Bagal³

¹Associate Professor, Dept. of Kaumarbhritya,

²Associate Professor, Dept. of Kaumarbhritya,

³P.G. Scholar, Dept. of Kaumarbhritya,

L.R.P. Ayurvedic Medical College, Islampur, Sangli, Maharashtra, India

Corresponding Author's Mail ID:-varshabagal48@gmail.com

ABSTRACT

The entire health scenario have been transformed or even altered with the COVID pandemic. Everybody in the society is being affected in the scenario of mental health, with modern developed world. One of the key vulnerable groups in the society is none other than children. Even though the educational scenario has been supplemented by the learning platforms, different online tools the social scenario have been affected so adversely. Children become self-centered and their social aspect of wellbeing unfortunately affected which cause impact on their personality and upcoming psychological issues in future. . Ayurvedic principles of psychiatry and psychology including preventive principles, medicines and psychotherapy will do fine if applied in this area, so as to enhance the quality of life of the affected children. An attempt has been made of using these Ayurvedic principles *Satvavajay Chikista* and *Medhya Aushadhi* to improve health and complete wellbeing of our future generation.

Keywords:-Child psychology, COVID Scenario, *Satvavajay Chikista*, Screen Media, Screen Addiction *Medhya Aushadhi*

INTRODUCTION

The COVID-19 outbreak has profound impact on the lives of people across the world. Children being the most vulnerable are the worst affected age group of society and often affected differently during crisis. More effect has happened on their mental health rather than their physical one. Children were still confined within the four walls of their homes unlike adult. Mobility restrictions and school closures limits their access to socialization, play as well as interaction with peers and teachers which are inevitable for their development and psychological well-being and social wellbeing. Though these social distancing measures are necessary to curb the spread of disease, it can have detrimental effects on children's mental development and chances of increased psychological issues in future. The neglected issue is the psychological impact resulting from the situation on them.

AIMS AND OBJECTIVES

1. To Review the study of psychological impact of Covid 19 on children.
2. To Review the perspective of Ayurveda and management for psychological wellbeing of children through different modalities.

MATERIALS AND METHODS

The materials were collected from Classical Samhita, Modern books, research journals and articles.

Pediatric Psychological Impacts

There is lot of psychological impact on pediatric age group which are often not able to recognize so easily; proper child parents communication and good attentive teacher in school going children can detect the psychological problem in children. All children have unique behavioral traits usually within the acceptable limits of deviance. It is important to differentiate this behavioral aberration from psychopathic disorders¹. School is the platform that accelerates intellectual, physical and psychosocial development of children along with the education. Because of COVID 19 outbreak many countries took decision to off the schools for indefinite time period that causes direct impact on pediatric population of society, decreased interaction with social surroundings has negative impacts on student's population.

Also during pandemic children were exposed to lot of scary and fearful information on digital platforms, also classes has shifted online too much screen timing has happened in younger age group. Incident of low background committing suicide were reported due to inability to cope up with financial need². All these

events to increasing stressful events in children life. COVID 19 is perceived as significant stressor as far as many parents concerned. Parental stress and their inability for financial need which result in cognitive, physical and emotional and physical fatigue which seriously affects parent's child healthier communication and relationship³. As part of quarantine children has to separate from peer group that leads to develop separation anxiety. There is lot of psychologically challenged children in society which needed special attention while learning; for those children online learning is hard hitting transition which makes them difficult to cope up with this environment. They may need extra attention to stay on track

Researchers have documented anxiety, depression, lethargy, impaired social interaction, and reduced appetite as the commonly reported manifestations of stress due to negative events in children⁴. To be added more, pandemic stressors such as persisting fear of infection of themselves or their dear ones, thoughts about virus, media coverage of the consequences also may have an insecurity feeling and troublesome impacts on mental health of children. Physiological effects include a compromised immune system which can have both physical as well as psychological consequences in due course.

When children are kept away from their school, their activity level decreases, diet and sleep become irregular. Their routine got disrupted and there is a risk of establishing unsafe habits such as screen addiction and even substance abuse. Anxiety caused by the existing uncertainty is capable of leading to sleep disorders such as nightmares and insomnia in many children. Fear of themselves or loved ones getting sick can also cause distress in children.

Perspective of Ayurveda

In *ayurveda* various aspects of mind functioning is narrated. In *ayurveda* different *praman* such as *anumanpraman* through which various psychological states can be expressed like DSM criteria used conventional; emotions like *krodha* can be understood by from *dainya*, *bhaya* from *vishad* this applicable when we find out deep rooted cause of behavioral abnormality. According to *ayurveda* Acharya Charak has mentioned these emotions *Krodh*, *Shok* and *Abhidroh* can be understood by *dhinya* and *bhaya* from the *Vishada*⁵

Satvabalaie, Mental strength of the child should be assessed by like Adult with little bit of variations. *Doshas* of the mind *Rajas* *Tamas* and their imbalance so relevant for concluding psychogenic disorders and

behavioral abnormality⁶ Also *Acharyas* has explained about detailed history of *Pradnyaparadh* is also to be considered for imbalance of doshas and can be correlated with intellectual pseudo conception. Also the concept of *Ojus* i.e., *saptadhatusar* what has mentioned in *Samhitas* by different *acharyas*; depletion of *Oja* leads to not only effect on the body but also shows psychological variations.

Unwholesome action performed by *Dhi* (Intellect), *Dhriti* (Patience), *Smriti* (Memory) is termed as *Pradnyaparadh* which is main component of psychological illness and imbalance between *rajas* and *tamas* and deteriorating of *satvabhav*. And *Asamyakindriyasamyoga* and not controlling on *mansik vegas* will lead to psychocological variations will lead to behavioral abnormality in children⁷.

Management through different Ayurvedic modalities

Ayurvedic have explained '*Satvāvajaya chikitsa*' is the psychotherapeutic technique that is used to control the mind from unwholesome objects and is capable of attributing to any available psychiatric ailments⁸. *Jñāna* (self – realization of the various aspects), *vijñāna* (scientific knowledge about the existing condition), *dhairya* (re-assurance about the situation), *smṛti* (experience sharing and its derivatives) and *samādhi* (relaxation

strategy) are certain steps dealt under '*satvāvajayachikitsa*'⁹ Promotion of *jñāna* and *vijñāna* is done by enhancing *dhī*, *dhṛti*, and *smṛti*. Self-realisation and awareness about current situation of ongoing pandemic, its own strength and opportunities should be made known to children. It is essential to convince children that the world around them is working tirelessly to eradicate this epidemic. Their role is to support them by staying along with them.

Dhairya is the controlling power of mind in stressful situations¹⁰. Mental instability is quite common in children. For imparting *dhairya*, motivating the child for self-control (*manonigraha*) and reassuring through *āśvāsana* (reassurance), *sāntvana* (consoling the patient) and *harṣana* (making them happy) by proper guidance and suggestions from parents, teachers etc. are to be done. Recollection of past successful experiences is an important component of the *smṛti* domain. *Samadhi* can be achieved by relaxation techniques, meditation and *yogāsana*s, under adequate supervision and guidance. *Pranayam* and breathing techniques can play important role in mental stability.

Emotional balancing can be adopted by practicing *Pratidvandvacikitsa* (replacement by opposite emotions). Here

the condition is managed by inducing Understanding of the issues in terms of the alteration or vibhrama of the eight mental faculties such as *manas*, *budhi*, *samjñajñāna*, *smṛti*, *bhakti*, *Seela*, *cheshta* and *achara* is considered as the steps of mental status examination as per Ayurveda¹¹. In the *Vibrama* of *manas*, a child's thought process is altered and he or she thinks about the instances which are worth thinking but thinks of such instances which are not to be thought about in the current situation. In the alteration of *budhi*, a proper decisive cognition doesn't occur on time. Proper discriminative power is lost and the child doesn't know what is good and what is bad. This may result in the presentation of behavioral disorders leads to psychological impacts.

Role of medicine and Diet and Routine

As per the severity of the conditions, medicine supplementation is crucial as well as effective. In Ayurvedic parlance, it is mentioned that, medicines used in children can be same as that of adults as components of disease such as *doṣa*, *duṣya* and *nidana* are similar but with a lesser dosage calculated as per the age^[12]. Agni is the primary factor to be considered while administering the medicines^[13] Single drugs such as *aśvagandha*, *śankhupuṣpi*, *vaca*, *jadamansi*, *yaṣṭi* etc can be used as per the demand from the

condition. Ghṛta yogas or medicated ghee preparations such as *Pancagavyaghṛta* and *Kusmāṇdasvarasaghṛta* are beneficial in psychiatric disorders especially in children. A medicine which enhances the ojus can also be incorporated such as *jivanīyagana*, *DrakshadiKwatha* etc. *Rasāyanadrugs* especially *medhyarasāyanas* such as *maṇḍūkapaṇi*, *yaṣṭimadhu*, *gudūci* etc. are used so as to enhance memory, concentration and intellect¹⁴ *Panchakarma* treatments are also ideal in severe manifestations on a conditional basis in children. *Shirobasti* and *Shiridharacan* are helpful in sleep disorders like insomnia due to increased anxiety¹⁵.

Routine the concept of *dinacarya* or the daily routine is considered as the ultimate preventive measure in *Ayurveda* having *ushna jal* in morning treatment modalities like *nasya dhumpan abhangya* proved as helpful to increase immunity in covid scenario¹⁶

Prevention

Preventive Aspect While narrating the definition of a *svastha* (healthy individual), it is clearly mentioned that the person should be '*prasannātmendriyamana*' (Pleasant soul, sense organs as well as mind) which is having due importance in the current

scenario¹⁷. A child's mental status should be preserved so that he/she remains healthy physically, mentally as well as in the social perspective. The role of parent is quite inevitable in this regard.

Dietary Factors Food and dietary habits have an influence on the child's mental health as per the Ayurvedic classics, Indian philosophical texts and contemporary sciences. *Manas* is said to be *annamaya* which means supplemented by the food and the *sūkṣmarūpa* (minute part) of food nourishes the mind. By the *śuddhi* or the purity of the *ahara*, *śuddhi* or clarity of functions of the mind is attained¹⁸. In this scenario where challenges persist to both physical as well as mental health, it is essential to develop healthy eating habits in children and such positive habits are prone to retain by them throughout their life. *Dugdha* (milk), *navanīta* (butter) and *ghṛta* (ghee) are some of the food constituents mentioned as *medhya* which means enhancing the intellect¹⁹. Habituating to *sātvikaāhāra* or ideal diet is described in *Bhagavatgīta*, which are of the properties of *snigdha*, *sthira* and *hr̥dya* which definitely promotes clarity to functioning of body and mind in children²⁰. Excessive spicy foods, fried items, curd, junk foods etc. which result in aggravation of certain behaviors as agitation, anger, increased

sexual desires etc. should be absolutely avoided.

DISCUSSION

As Children are most socially isolated became are the most vulnerable group who face psychological challenges especially during the period of COVID-19 pandemic. Timely recognition and addressing of their negative emotions are inevitable to save children from the psychological consequence of the pandemic. Here the parents, teachers as well as the caregivers are having inevitable role. Different modalities like preventive and curative aspect of *ayurveda* can help in developing wellbeing of children.

CONCLUSION

Preventive and curative aspects in Ayurveda are to be effectively utilized so that children can appropriately overcome a condition of distress and attain emotional stability which also reflects in their later life and nation will have emotionally and physically healthy future. Further studies are the need of the hour and will especially be helpful for the affected in the near future.

REFERENCES

1. Mukesh Agrawal, Textbook of Paediatrics, Behavioral disorders Chapter

no.4,page no.41,CBS Publishers and Distributors.

2. Hans O Löfgren, Solveig Petersen, Karin Nilsson, MojganPadyab, Mehdi Ghazinour, et al. (2004) Effects of Parent Training Programs on Parental Stress in a General Swedish Population Sample 8:

3.<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7229970/>

4. Hoven C W, Duarte C S, Lucas C P, Wu P, Mandell D J, et al. (2005) Psychopathology among New York City public school children 6 months after September 11. Arch Gen Psychiatry 62: 545-552.

5. Acharya JT (2017) Charaka Samhita of Agnivesa (Ayurveda Dipika, Chakrapanidatta, comme, Sanskrit) Varanasi: Chaukhamba Surbharati Prakasan 248.Vimana sthana 4/8

6. Dr. Ganesh Garde Ashtang Hridya Sarth Vagbhat Choukhamba Prakashan Varanasi/Adhaya 1 Page no.14

7. Acharya JT (2017) Charaka Samhita of Agnivesa (Ayurveda Dipika, Chakrapanidatta, comme, Sanskrit) Varanasi: Chaukhamba Surbharati Prakasan 296. Sareerasthana 1/98.

8. Acharya JT (2017) Charaka Samhita of Agnivesa (Ayurveda Dipika, Chakrapanidatta, comme, Sanskrit) Varanasi: Chaukhamba Surbharati Prakasan 77.Sootra sthana 11/54.

9. Acharya JT (2017) Charaka Samhita of Agnivesa (Ayurveda Dipika, Chakrapanidatta, comme, Sanskrit) Varanasi: Chaukhamba Surbharati Prakasan; 16. Sootrasthana 1/58.

10. Acharya JT (2017) Charaka Samhita of Agnivesa (AyurvedaDipika, Chakrapanidatta, comme, Sanskrit) Varanasi: Chaukhamba Surbharati Prakasan 297. Sareerasthana 1/100.

11. Acharya JT (2017) Charaka Samhita of Agnivesa (Ayurveda Dipika, Chakrapanidatta, comme, Sanskrit) Varanasi: Chaukhamba Surbharati Prakasan 474. Cikitsasthana 9/86.

12. Krishna Ramacandra ShastriNavare (2009) Ashtanga Hridya of Vagbhata (Sarvangasundara, Arunadatta, Ayurvedarasayana, Hemadri, comme, Sanskrit) Reprint ed. Varanasi: Chaukhamba Krishnadas Academy Uttarasthana 2/30.

13. Acharya Charak Samhita,2014 Choukhamba Sanskrit Pratishtan Adhaya no.21/

14. Acharya Charak Samhita, 2014 Choukhamba Sanskrit Pratishtan, Chikisthasthan Adhyay no.1 /30 page no.39

15. Dr. Dinesh K.S Clinical Peadiatrics in Ayurveda, Vasudevi Publications first edition, Chapter 8,page no.101.

16. Dr. Ganesh Garde Ashtang Hridya

Sarth Vagbhat Choukhamba Prakashan

Varanasi/Dincharyaadhay 2/28

17. Acharya JT, Acārya NR (2005)

Susruta Samhita of Susruta

(Nibandhasamgraha, Dalhana, comme,

Sanskrit) 8th ed. Varanasi: Chaukhamba

Surbharati Prakasan p.43.Sootra sthana

15/41.

18. Sreeman Nambuthiri D, Upanishat

Sarvasvam, Samraat Publishers, Trissur,

(1998) Chaandogya Upanishat, 6, Khaanda

5: 158-7.

19. Pratibha P Nair, Jithesh M (2017) A

two-arm exploratory study on mental

health status in relation with food patterns.

Int. J. Res. Ayurveda Pharm 8: 67-71.

20. Dwaraknatha C (1996) Introduction to

Kayachikitsa. Chaukambha Orientalia,

Edition no 3 6: 80.



INTERNATIONAL JOURNAL OF
MULTIDISCIPLINARY HEALTH SCIENCES