Application of Ayurvedic Principles in Prevention and Management of Behavioural Problems in Children

Review Article

Renu Rathi1*, Bharat Rathi2

1. Professor, Department of Kaumarabhritya, 2. Professor, Department of Rasashastra Bhaishjiya Kalpana, Mahatma Gandhi Ayurveda College Hospital & Research Centre, Salod (H) Wardha, (MS), Datta Meghe Institute of Medical Sciences (Deemed to be University), Sawangi (Meghe) Wardha. India.

Abstract

Introduction: Behavioral problems are commonly prevalent worldwide. It is important to diagnose and treat timely as if untreated, increase the risk of getting psychiatric illnesses. Present review is aimed at providing Ayurvedic guidelines in the form of Sadrīttā (Code of conduct), Achar rasayan-AR (ethical principles) and few Ayurveda interventions correlating with recently developed interventions of Psychology which may prove helpful in prevention and management of behavioral problems in children. Material and Methods: This review is based on data collected from classical Ayurvedic literature, published research works in various journals and counselling experiences. Observations and Results: Behavioral problems are generally multi-factorial in origin and arise as a result of conflict between the child’s personality, attitudes of parents, teacher or peers. Counselling with family and adoption of Ayurveda principles can manage and prevent further progress of behavioral problems in children. Satvavājay Chikitsa-SC (non-drug psychotherapy), Achar Rasayan and Sadrīttā, Yog are Ayurvedic ways to balance Satva (good qualities of mind), (Passionate, agitated), Tama (Laziness, lack of concentration) applicable in prevention of behavioral problems. Conclusion: Ayurvedic principles such as AR, Sadrīttā and SC are best non-pharmacological modalities required for early detection and prevention of behavioral problems. Knowledge, education and proper expressions of code, conduct or etiquettes along with Ayurveda interventions such as use of Medhīya (nervine tonic/nootropic) drugs, Panchkarma pre-procedures can prove to be a significant therapeutic way to combat behavioral disorders.

Key Words: Achar Rasayan, Ayurveda interventions, Behavioral problems in children, Sadrīttā, Satvavājay Chikitsa.

Introduction

According to World Health Organization, mental health disorders are one of the leading causes of disability worldwide (1). Behavioral problems of children are becoming common and roughly 6 million children globally (2) and out of these 33.4% in India are affected by different behavioral problems (3). Poor parenting is one of the leading causes for occurrence of behavioral problems (4). It is noted that ferociousness, impulsivity in children has increased significantly as compare to couple of decades ago. Research studies have proven that strong child-parent relationship, friendly family environment, good faith and understanding among family members, peers and teachers are key factors in development of children’s personality (5). Behavioral disorder is a mental ailment diagnosed in childhood age that presents a repetitive and persistent pattern that violates the basic rights or norms. They include aggressive, destructive odd behaviour, lying, vandalism, anxiety etc. (6). In Charaka Samhita it has been categorically mentioned that all diseases cannot be named but need to understand its basic concepts and accordingly can be treated (7) There are few guidelines in Ayurveda which can prove beneficial in prevention and management of behavioral problems. Some interventions have been advised such as Sadrīttā, Achar Rasayan AR (good conduct) and Satvavājay Chikitsa SC (mind control therapy) which can be applied in prevention of psychological disorders including behavioral problems (8). Sadrīttā and AR are simple tips regarding how to behave with others and considered as alternative to get rejuvenation effects; described in Ayurvedic classics (9) SC is psychic therapy for withdrawal of mind from harmful objects and thoughts. (10) It is the need of hour to explore the role of Ayurveda in present circumstances.

Before conception itself, Ayurveda has been given emphasis towards balancing Doshas (three fundamental factors of body i.e. Vata, Pitta and Kapha) of parents through Shodhan (body purificatory measures) and Rasayan (immune-modulatory measures) to ensure the healthy progeny. (11) Thereby, physical and mental health of parents and in turn newborn’s is also maintained. Improper care during pregnancy and delivery may seriously affect the physical as well as mental development of the child. Even if mother is in...
stress during pregnancy, results in poor mental development of fetus which later develops into behavioral problems in children (12).

Nutrition plays an important role to maintain good growth and development during gestation and later in lactation period which also improve the quality of breast feeding, essential tool required for both physical and mental development of child. (13,14)

Childhood age is the appropriate time of personality building, development of manners, etiquettes and reposes good habits. However, children are unaware of any of these hence, it is the duty of parents to take utmost care during this period. Family members, peers, teachers as well as genetic, dietary and environmental factors are responsible for development of child’s personality (15). They must utilize their potential to boost confidence, practical wisdom and inculcate good qualities in children by proper education and maintaining personality nourishing environment. To achieve these traits some guidelines are must. In present work, an attempt has been made to present a review of Ayurveda principles related to prevention and management for various behavioral problems.

Material and Methods

This review is structured on data congregated from Ayurvedic compendia, text books of psychology; journals and researches related to depression, child behaviour & development. The study also includes Ayurveda concepts related to Psychotherapy, SC and personal counselling experiences of last 20 years. A meticulous understanding, co-relation with analysis has been carried out to highlight this issue.

Observations and Results

Origin of psychosomatic disorder (PD) & behavioral disorders (BD)

According to Ayurveda, the fetal expressions are transformed to mother through sensory–motor path ways and expressed in the form of various desires of mothers (Dauhridavastha); if their needs are not fulfilled or use of Garbhopghatkar bhavas (harmful measures to fetus) then it may be a cause of these disorders. It can be interpreted that the desires of mothers towards various diet is for fulfilling the need of proteins, vitamins and mineral supplements to facilitates efficient organogenesis and mental development too. Thus, if mother’s desires are ignored during Dauhridavastha then it may result in deficiency of vital requirements of fetus; and such deficiencies cause malformation of nervous system in the born child and may have various psychological problems. (16)

Lack of proper awareness from parents or lack of encouraging re-enforcement in kids to accomplish task, results in distress, loss of self-confidence and low-down self-respect which may leads into depression (17,18). Traumatic incidents like sudden demise of near and dear, poor mental health due to nervousness, stress and strain, need of societal and emotional support, poor parenting and prenatal stress cause to develop learning, behavioral and developmental disorders, these are few key reasons for the origin of PD and BD (19).

Excluding prenatal and traumatic reasons, recurrent disappointment is common reason in all other causative factors. Brain is the main site of Mana when gets vitiated with Tridosha and Raja-tama obstruct the manovah stratas and creates different behavioral problems in children (20).

Role of Satvajay Chikitsa (C)

SC may include Ayurvedic psychotherapy, counseling, play therapy, cognitive behavioral therapy-CBT, meditation, mind control, problem solving approach, assurance and measures to boost Satva and minimize Raja-tama of mind. (21) In Satvavajaya concept, it is clearly mentioned that for wellness of mind all sensual factors such as diet, words, visual objects, material objects etc should be within limit of tolerance. Unwholesome diet has very important role in maintenance of Satva dominance of mind in turn helps to preserve health (22).

Role of Achar Rasayan and Sadvrita

It refers to those acts of parents which ensure safe, firm discipline with pragmatic expectations, create affirmative learning environment, provide interactive caring and unconditional love. (23,24) Parenting is a skill which even some of the biological parents have failed to cultivate. Buckling under the pulls and pressures of the fast-paced modern life, most of the parents often unintentionally commit the crime of neglecting to cater various needs of their children (25). Fulfilling only the material needs of a child and giving him/her a comfortable and luxurious life is just one part of the best child care program. On the other hand, the pre requisite component of emotional care and close bonding looks conspicuously missing in many cases. Spending time with little one and engaging in conversations with child is more important than buying digital toys. Parenting is an art, so parents must master it with care which is essential for better growth and development of their younger children. Few attributes of good parents include, a good role model who knows how to explore talent and skills to become problem solver and responsible too. (26)

Ayurveda advocates Sanskaras or etiquettes adoption to balance Raja and Tama and boost Satva to remain away from mental ailments. There are so many behavioral problems occurs in childhood age if code of conduct is not adopted properly. According to Ayurveda all ailments develop due to three basic reasons- Asatmyendriyartha Samyoga (incompatible contact of sense organs), Pragyaparadha (intellectual blasphemy), Parinama (time factor for chronological error). It is the inductor of all pathological conditions of body and mind, vitiates all Sharirik and ManasDoshas(CharakSharrir) (27). Table no 1 is showing details of Behavioral disorders and its management and complications if left untreated or not treated soon. (6, 21, 28) There were few research works done in this regard. Table no 2 is showing current status of research work done regarding BD and PD with outcome of research by Ayurveda interventions. BD and PD kind of problems are complex in origin so require multimodal treatment strategy.
Table no. 1: Showing details of behavioral problems and its management

| S. No | Behavioral Problems | Clinical Features | Causes | Complications | External Treatment | Internal Treatment |
|-------|---------------------|-------------------|--------|---------------|-------------------|--------------------|
| 1     | ADHD, Autism        | Hyperactive, poor attention, slow in academics, defiant interpersonal relationship | Stress, pre-natal, natal, post-natal origin, less quality time sharing by parents with wards. | Loss of confidence, frustration, inferiority, depression, low self esteem | Shiro-Dhara, Abhang, Shirolep, shiripichu, Snehan-Swedan, Matrabasti | Medhya, Balya, Vatahar, BruhanRasayan, Snehapanc, counseling of parents, play, cognitive therapy to child |
| 2     | ODD - Oppositional defiant disorder | Negativistic attitude, disobedient, hostile behavior, Frequent arguments, annoyance, no physical aggression | Bad parent–child relationship, no good parenting, insecurity, lack of love & care, bad peer group, busy, over-burdened parents, unfulfilled dreams of parents for child | Schizophrenia, addiction to drugs, may become criminal | Above all | Rule out & avoid cause/s |
| 3     | Conduct disorder    | Just above all features with intense violation, aggression, physical harm to self & others | Lack of love & care by parents, Above all causes | Psychiatric disorders, Above all | Above all pre procedures | Above all |
| 4     | Psychosomatic disorders like enuresis, pica, breath holding spell, thumb sucking, etc. | Different as per problem mentioned Impulsiveness, jitteriness | Lack of love & care by parents, Above all causes | Resolves automatically above all pre procedure | Above all pre procedure | Above all |

There is important role of *Panchkarma* if *Doshas* are more vitiated to eliminate ama/toxins with ease and pre-panchkarma procedures are helpful to pacify comparatively less vitiated fundamental factors respectively. Any disorder occurs when there is physical or mental *Doshic* imbalance. There are five purificatory/*Shodhan* measures- *Vaman* (medicated induced emesis), *Virechan* (scientific induced purgation), *Nasya* (medicine instillation in nostrils), *Basti* (medicated oil/decoction instillation inside rectum) and *Raktamokshan* (bloodletting). Some important pre-procedures are *Shirolep/Talapodichhil* (medicated external application on scalp), *Shirodhara* (pouring of a stream of medicated liquid on head) snehan (oleation therapy), Swedan (hot fomentation) etc. are meant for rehabilitate and facilitate the major five procedures. (20,33) **Table no. 3** is depicting different *Panchakarma* pre-procedures with their mode of action helping to cure as well as prevent behavioral problems in children.

Table no 2, showing Research work done on behavioral problems of children

| No | Behavioral Problems | Research done | Outcome |
|----|---------------------|---------------|---------|
| 1  | ADHD (28, 29)       | *Medhya* (memory booster) medicines + *Panchakarma* pre-procedures | Better results than only conventional one. |
| 2  | Autism (20)         | *CAM* + Yogasanas & meditation | Multimodal therapy proved more beneficial. |
| 3  | Conduct disorders (30) | *Satvavajay, AcharRasayan, Sadvritta* | Improves the condition with other measures. |
| 4  | Psychosomatic & habit disorders (31) | *Achar Rasayana, Satvavajay* – corrections in family environmental causes | Symptoms slightly relieved. |
| 5  | Learning disabilities, developmental delay (32) | Ayurveda drugs, panchkarma | Mental health promoting effect. |

*ADHD=Attention Deficit Hyperactive Disorder, HIE=hypoxic ischemic encephalopathy, NBID= Neurodevelopmental behavioral intellectual disorders, CAM= complementary & alternative medicine*
and confidence of client or parents, it corrects the
have other advantages such as, it boosts the self-respect
psychosomatic or psychiatric illnesses. Counselling
to grievances. A good counselling helps in preventing
physical derangements (40).

Growing children are continuously subjected to
social, cultural and parental discipline. Hence, to
increase their Satva attribute there should be gradual
withdrawal of bad habits with adopting good habits
suitable for making acceptable behaviour, building
patience, mental calmness and strength to overcome
psychological or environmental triggers. As the root
causes of BD & PD are related with mind hence focus
should be on correcting mental health first by
balancing Satva, Raja and Tama by SC. The
management in such situation consists of educating the
parents to make them understand the developing psyche
of the child (8), as intellectual blasphemy (Pragvaparadha) is leading cause amongst mental and
physical derangements (40).

Role of Counselling:
It sorts out the problem with proper compliance
to grievances. A good counselling helps in preventing
psychosomatic or psychiatric illnesses. Counselling
have other advantages such as, it boosts the self-respect
and confidence of client or parents, it corrects the
method of parenting, it is the basic intervention to rule
out the causes of psychological illness and planning of
therapy accordingly. (41)

Role of Play Therapy
It is an age-old therapy, described in Ayurveda
also. Toys play a significant role in boosting mental
health, growth and development of child. (42) It can be
made more pleasurable, effective, inexpensive and
easy to execute to release their hidden frustration,
forgetting burdens or disappointments. Play therapy
addresses several problems like anxiety, anger,
depression, distractibility and non-compliance. As play
therapy involves both physical and mental discipline
hence, it can be considered as a novel way in prevention
of BD and PD (43). Violent toys help the release of
anger, irritability, hostility and other emotions that can
be freed through destruction. Real-life toys target
withdrawn children that may be timid, shy, or
introverted. Creative-expression toys give a wide range
of expressive emotions that promote creativity (44).

Application of Cognitive Behavior therapy (CBT):
The CBT model is based on a combination of
the basic principles from behavioral and cognitive
psychology. CBT is "problem-focused" and "action-
oriented", meaning it is used to treat specific problems
related to a diagnosed mental disorder and the
therapist's role is to assist effective strategies to address
the identified goals and decrease symptoms of the
disorder (45). CBT is based on the belief that thought
distortions and maladaptive behaviours play a role in
the development and maintenance of psychological
disorders and that symptoms and associated distress
can be reduced by teaching new information-processing
skills and coping mechanisms (46). As CBT is based on
behaviours, and emotional regulation hence, it is a
developed part of SC.

Mode of action of Sadvritta, AR and SC are
through avoidance of misbehaviour as well as
controlling indulgence of sense organs and mind with
improper subjects (Asatmendriyarth sanyog).
Inappropriate knowledge of object leads to rude or
offensive speech and physical activities. Improper
intellect and perception both are objects of Prajna.
(conscious) Good Intellect, Dhee (Adaptation of new
things), Dhruti (Controlling factor of mind) and
Smruti(recalling power)are within the purview of mind
which regulates mood, concentration, limits Raja-tama and augment Sattva dominance by inhibiting Pragyaparadh. Thus, SC works on attention, cognitive and emotional domain by working on selfcare, compassion, ability to distract from negative thoughts, relaxation of body and mind in turn pacify anger, anxiety and irritability. SC an Ayurveda Psychotherapy facilitate mental wellbeing and strength (9,47) Sadvritta and AR help the child to develop mentally strong as well as protect from psychosomatic, behavioral and psychiatric complaints. Acharyas have elaborated the counselling ethics separately in Sadvritta description (48).

Acharyas have described the role of Asatmyendriyartha Samyoga, Pragyaparadha and Parinama in inducing the pathological conditions in body and mind. They are accountable for vitiating for all Sharirik Dosha and Manas DOShas - Pragyaparadha means unbalanced act in less, excess or unusual way (49). For this inducer, control over mind is necessary. It means unbalanced act in less, excess or unusual way all body and mind. They are accountable for vitiating for Parinama

Table no. 4: Do’s and Don’ts for parents:

| Sr. No. | Do’s                                      | Don’t                                      |
|--------|-------------------------------------------|--------------------------------------------|
| 1      | Remove the bad habits by soft words time  | Punishment in front of others or be scolded|
|        | to time                                   | them for their mistakes                    |
| 2      | Try to excuse them for their mistakes.    | Rude or over excited, so strict or over    |
|        | First listen to them and then guide       | disciplined                                |
| 3      | Give affirmative instructions than        | Stick so much with your principles         |
|        | negative one.                             |                                            |
| 4      | Be relax and flexible according to        | Anticipate many task/ambitions at a time   |
|        | situation                                  |                                            |
| 5      | Motivate as per the child’s capability    | Compare with one child to another          |
| 4      | Avoid pampering, explain the reason of    | Fulfill their all desires otherwise they   |
|        | deny.                                     | will become impulsive                       |

Table no.5: Ayurvedic herbs and their role in psychological problems (15, 21, 31, 51, 52).

| SNo. | Botanical name & Sanskrit name | Mode of action             |
|------|-----------------------------|----------------------------|
| 1    | Mandukparni-                | Neuroprotective, brain     |
|      | Centellaasitica Linn.       | growth booster, Proven     |
|      |                             | memory, learning           |
|      |                             | enhancer, boost neuro-     |
|      |                             | development, stimulant      |
| 2    | Bramhi- Bacopa              | Memory enhancement,        |
|      | monnieri Linn.              | cognitive function,        |
| 3    | Madhyayasthi/               | Improves learning,         |
|      | Yashthimadhu-               | memory                      |
|      | Glycyrrhiza glabra Linn     |                            |
| 4    | Jatamansi-                  | Role in brain and memory   |
|      | Nardostachys               | disorders in the elderly.  |
|      | jatamansi (D. Don) DC.      |                            |
| 5    | Shankhpushpi-               | Nervine tonic,             |
|      | Convolvulus pluricaulis    | stimulant to nervous       |
|      | Chois.                     | system                      |
| 6    | Guduchi-                    | Anti-oxidant, nervecum      |
|      | Tinosporacordifolia Wild    | general tonic               |
|      | Miers.                     |                            |
| 7    | Ashwagandha-               | Anti-stress, anti-         |
|      | Withania somnifera Linn.    | anxiety, antioxidant       |
| 8    | Jyotishmati-               | Inhibition of Acetyl        |
|      | Celastrus paniculatus Wild  | choline                    |
| 9    | Vacha- Acorus               | Sharpens IQ, memory,       |
|      | calamus Linn.              | helps in neurodevelopment  |

Role of Panchkarma and Ayurvedic formulations:

Number of herbal & herbo-mineral formulations can be advised to curb the problems of children cited in Table no. 5 with their mode of action. Along with or without panchkarma, these medicines can work in this regard. Ashwagandha, Yashthimadhu, Guduchi, Mandukparni, Bramhi, Shankhpushpi, Jatamansi, Jyotishmati, Vacha.

Medhya medicines may regulate the neuropsychological process, stimulate alpha waves, sensory-motor centers of brain, and correct the mental disturbances.

Kalyanaka Ghrit, Panchagavya Ghrit, Smrutisagar Rasa Vati, Medhya Rasayana, etc (51). Ghrit kalpas play an important role in prevention and management of psychic, psychosomatic and CNS issues (53).

Number of research studies have proven that Panchakarma pre procedures, major procedures with Ayurvedic medication have good impact on conduct disorders by maintaining Dhruti and preventing ethics negligence. Doshik imbalance can be taken care with the help of panchkarma to detoxify toxins, facilitate adequate nutrition to Dhatus and balance equilibrium in brain. Stress plays a vital role for inequilibrium of Dhee, Dhruti and Smruti. Panchkarma, Pranayam (breathing techniques), Yogasanas (postures), Bandha-Mudras (postural relaxation and meditation ways) and medhya medicines relieve stress and maintain the proper function of neurotransmitters and in turn central nervous system.

Shirodhara results in vasodilatation, translucent penetration of oil, tactile and thermo-
receptors stimulation to nerve endings. It stimulates to Marmas (vital areas of the body) increases circulation and also enhances action of neurotransmitters like Serotonin, Nor-epinephrine and metabolism of Dopamine and catecholamines. Pressure of Dhara has an effect on impulse conduction, removes Aam/toxins, relieves Strotorodha (channels obstruction) and nourishes cells to feel relax and gives natural tranquilizing effect (33, 34). Shirodhara with Medhya dravya provides strength to Prana & Indriyas which are mainly Vata vitiated in case of psychological disorders- Shirodhara promotes a decrease of noradrenaline and exhibits a sympatholytic effect and immunopotentiation For enhancement in concentration, awareness and self-esteem levels, multi therapy approach is needed with good parenting which would provide a sigh of relief toward search of ideal treatment for behavioral problems in children (21, 54).

Limitation of this review is that there is no RCTs or not many clinical studies could be added as evidence to establish the role of Ayurveda principles except panchkarma procedures, yoga and few herbs. Although, principles (AR, SV, SC) are difficult to assess by scales to measure their efficacy therefore, need to focus on this area to conduct research.

Conclusion

Improvement of child behaviour is not completely depending on classroom educational teaching but mostly relies on good conduct, practical wisdom which is safe, can use long-term and of non-pharmacological approach, thereby apt to behave properly and tackle day to day problems with ease. Ayurveda can act as an excellent adjuvant in advanced stage or alone capable to deal with PD and BD with the help of Satravajay, Achharrasayan, Sadvritta. Yog and nootropic medicines with Panchkarma and its pre-procedures. It is imperative to direct them through elders to prevent behavioral and conduct problems with adoption of Ayurveda. Present study may prove as torchbearer for focusing the importance of Ayurveda in defeating the behavioral problems in children.

References:
1. World health report on mental disorders, available at http://www.who.int/whr/2001/mediacentre/press_release/en/. 2001last accessed on 22nd Jun 2019, 10 am.
2. Kathleen RM; Erin FM; Ronald CK, Epidemiology of mental health disorders & adolescents, Dialogues Clin Neurosci. 2009;11(1):7-20.
3. Sushma BV, Srinivasan V, Khyrunnisa B. Prevalence of Behavioral Problems among School Children and their Demographic Correlates. Guru J Behavioral and Soc Sci.2013;1(4): 203-212.
4. Elizabeth AS, Karen LB, Robert JMc. Parenting practices and child disruptive behavior problems in early elementary school. J Clin Child Psychol.2000;29(1):17–29.
5. Jason CH. Association between different parenting styles & Child behavior.2013; available at http://digitalcommons.pcom.edu/cgi/viewcontent.cgi?article=1261&cont ext= psychology_dissertations, last accessed on 22nd Jun 2019, 11 am.
6. Parthasarathy A, Menon PSN, Mahadeviah, M. Mehta. Indian Academy of Pediatrics, Childhood disabilities, Indian Psychiatry, Behavior therapy, Vol.2, Reprint edition, Jaypee publisher,2005; pp.1049, 1218-27
7. Charaka Samhita-Agnivesh-Vidyotini Hindi commentary, KashinathSastrti; G. Chaturvedi, 19th edition, Part 1, Sutrasthan, 7/54, Chaukhambha Bharati Academy, Varanasi, 1993, p.126.
8. Renu Rathi, Bharat Rathi, Dhijraj Sing Rajput. Behavioural Problems in Children – Methods to Prevent and Manage through Good Parenting and Ayurveda. J. Res. Tradit. Med 2017; (3:4): 117-122
9. Charaka Samhita-Agnivesh-Vidyotini Hindi commentary, KashinathSastrti; G. Chaturvedi, 19th edition, Part 1, Chikitsasthan, Rasyan adhyay (1/4:33), p.58, ChaukhambhaBharati Academy, Varanasi, 1993
10. Charaka Samhita-Agnivesh-Vidyotini Hindi commentary, KashinathSastrti; G. Chaturvedi, 19th edition, P a r t 1, S u t r a s t h a n , Indriyopakramaniyodhyay (8:18), p.123, Chaukhambha Bharati Academy, Varanasi, 1993
11. Charaka Samhita Agnivesh, Hindi commentary H.S.Kushvaha., 1st edition, Part 1, Sharirasthan, KhuddikamGarbhavkrantishariram(3:16), p.795, ChaukhambhaOrientalia, Varanasi, 2005;
12. Khatana Rakesh, Rathi Renu, Khatana A. Role of Ayurveda in Down’s syndrome- A case study. IJGHC-International journal of Green and Herbal Chemistry.2020;9(2):203-213
13. Rathi R. A Clinical study on GokshursiddhaYavagu and Dhtryavleha in fetus in cases of Toxemia of pregnancy, JNIMA; Mar 2013
14. Rathi R, Rathi B, Sharma S, Rajput DS. Management of childhood Protein Energy Malnutrition through Ayurvedic interventions. Joinsysmed2017, 5(3):196-202
15. Rathi R, Rathi B. Ayurveda perspectives towards Prevention and Management of Nicotine and Alcohol Dependence. J Indian Sys Medicine. 2020;8(1):14-28
16. Sushrut Samhita, Sushruta, Laxmikant Dwivedi, Edition 2nd, Sharirasthan, Garbhavkranti Shariaram, (3:17), ChaukhambhaSanskritseries, Varanasi, 2002, p.159
17. Mudzielwana NP, Makhwathana RM, & Mudau TJ. Managing A. Mul ovhedzi, Children’s Depression Behavior to Promote Mental Health Wellbeing in the Classroom. Journal of Psychology. 2016;7(2):86-92.
18. Banyard VL, Williams LM, Siegel JA. The impact of complex trauma and depression on parenting: an exploration of mediating risk and protective factors. Child Maltreat. 2003; 8(4):334-49.
19. Rathi Renu, Rathi B, KhatanBalance S, Sankh S. A case study on management of Retts syndrome by Wholistic approach. IJAM,2020;11(2):351-357
20. Mills PJ, Patel S. Advancing Research on Traditional Whole system Medicine Approaches.
Journal of Evidence based complementary & Alternative Medicine (JEBCAM)2017; 22:527–53022. Jyot ST. Dimensions of Satavajaya Chikitsa(Ayurvedic psychotherapy) & their clinical applications. J Annals of Ayu Med. 2012; 1(1):31-38.248.

21. Marjorie Smith. Good Parenting: Making a difference. J Early Human Development. (Early Hum Dev.)2010; 86(11):689-93. doi: 10.1016.

22. Gupta MC, Dhaked R. A critical review on Acharya Rasayana. IJAR. 2016;2(3):633-5.

23. Baumrind D. Effects of Authoritative parental control in child behavior & development. Child Development. 1966;37(4), 887-907.

24. Shilpa Sarpatdar. Palakansathi(Guidelines for development of good intelligence of children for Parents), Deep prakasan, Mumbai, 1st Edition, Feb. 1999; 22-48

25. Khedekar S, Rath R, Rath B. Rationale behind Ayurveda Codes of Conduct (Aachar Rasayana) in COVID-19 like new disorders - A critical review. Int J. of Research in Pharmaceutical Science-IJRPS.2020;11(3):1-6

26. Sharma P, Rath R, Sharma N, Rath B, Zadpe A & Jyotirani. A case study on prevention and management of Attention Deficit Hyperactive Disorder. Europian jr. of Biomedical and Pharmaceutical Sciences.2020;7(7):421-426

27. Negi K, Singh Y, Kushwaha K., Rastogi C., Rath R., Srivastava J., Asthana O., Gupta R. Clinical evaluation of memory enhancing properties of memory plus in children with attention deficit hyperactivity disorder. Indian J. Psychiatry.2000;42: (2)

28. Christine A. Conelea; Benjamin T; P. Tucker; Douglas W. Wods. A Handbook of Clinical Psychology Competencies- A comprehensive clinical assessment of Tics and Habit disorders in children. Springer publication. ISBN 0387097589,2007;1403-1428.

29. Singh R. Psychosomatic disorders and their Management in Ayurved, Ancient Science of Life. 1981; 1(1): 4148

30. Sharma A, Gotecha VK, Ozha N. A solution through Ayurved evidences In Dyslexia management: A Review.2012;33(4): 486-490

31. Rath R, Rath B. Chapter in Book on Best Practices in Panchakarma Chapter on Comparative efficacy of therapeutic Panchkarma procedures in children with Cerebral Palsy, ISBN: 978-93-5268-176-1Publisher-Registrar, DMIMS, 2017

32. Singh RH. Pancakrama Therapy, Edition Reprint, Chaukhamba Sanskrit Series Office Varanasi. 2007;184-199

33. Tiwari R.P., Dwivedi S.R. et al. Psychological disorders in children and their therapy as per Ayurveda, Int archieves of Integrated Medicine.2014;1(4):96-99.

34. Agnivesh, KashinathSastrl; G Chaturvedi Vidhotini Hindi commentary CharakSamhita 19th edition Part I1, Chikitsasthan Unmad Chikitsaadhyaya 9:5, Chaukhamba Bharati Academy, Varanasi, 1993; p-305

35. Agnivesh, KashinathSastrl; G Chaturvedi Vidhotini Hindi commentary, CharakSamhita. 19th edition Part 1, Sharir sthan Maheti Garbhavkranti adhyaya:36, p- 772 Chaukhamba Bharati Academy, Varanasi, 1993;

36. Sushrut, Dalhan. P.V. Sharma. SushrutSamhita, Vol.II Sharir sthan garbhavkaranadhyaaya 4/84-89, Edition Reprint, ChaukhambaVisvabharati, Varanasi, 2005; p-119.

37. Kashyap. P.V. Tiwari. Kashyapsamhita. 1st edition, Sutrasthan, lakshnaadhyaaya, 28:8-9, Chaukhamba Visvabharati, Varanasi, 1996; p-81.

38. Sushrut, Dalhan.V. Sharma Sushrut Samhita, Reprint edition, Sharirasthan, garbha vyakarana adhyaya:64, ChaukhambaVisvabharati, Varanasi; 2005: p-162.;

39. Sushrut. Sushrut Samhita. Sharirasthan, Sarvabhatcintaahadhyaya:20-21, Chaukhamba Visvabharati, Varanasi, Reprint edition, P.V. Sharma;2005; p-124-5

40. Naderi F, A. Heidarie, L. Bouron and P. Asgari. The Efficacy of Play Therapy on ADHD, Anxiety and Social Maturity in 8 to 12 Years Aged Clientele Children of Ahwaz Metropolitan

41. Kashyap. P.V. Tiwari. Kashyapsamhita. 1st edition, Khilsthan 8/12, Chaukhamba Visvabharati, Varanasi, 1996, p-281

42. Tara M. Hall, Charles E. Schaefer. Fairleigh Dickinson University, Heidi Gerard Kaduson-Play Therapy Training Institute,Fifteen effective play therapy techniques, Professional psychology: Research & practice, 2002;33(6):515-522

43. Behavioral-therapy-for-children-with-emotional-dissorders, available at http://www.kidsmentalhealth.org/ (Accessed on september 28, 2019.) Last accessed on 22nd Jun 2020, 10 pm.

44. Beck JS. Cognitive behavior therapy: Basics and beyond (2nd ed.). New York, NY: The Guilford Press,2011; 19–20

45. Charaka Samhita. Agnivesh., Kashinath Sastrl; G. Chaturvedi Vidhotini Hindi commentary, 2nd vol., Sutrasthan Triyeshaniya Adhyaya 11/54, Chaukhamba Orientalia, Varanasi.2nd edition 2008, p-184

46. Agnivesh, Dridhabala, Kashinath Sastrl; G. Chaturvedi. Charaka Samhita Vidhotini Hindi commentary 2nd edition, 2nd vol. Sutrasthan Indriyaupkarniyadhyaaya 8:16-33, Chaukhamba Orientalia, Varanasi, 2008; p-125-130

47. Agnivesh, Dridhabala, Kashinath Sastrl; G. Chaturvedi. Charaka Samhita, Vidhotini Hindi commentary, 2nd edition, Sharirasthan Kathidhapurshiya adhyaya 1:102,127 & Sutrasthan Triyashniyaadhyaaya1:54. Chaukhamba Orientalia, Varanasi.2008, p-994

48. Agnivesh, Dridhabala, Kashinath Sastrl; G. Chaturvedi. Charaka Samhita, Vidhotini Hindi commentary 2nd edition, 2nd vol. Sutrasthan Navegadhaniya adhyaya 7:54-65, Chaukhamba Orientalia, Varanasi. 2nd edition, 2008; p-119
49. Suman Ray, Asim Ray. Medhya Rasayan in brain function and Disease. Medicinal Chemistry. 2015; 5(12):505-511
50. Singh RH. Psychosomatic disorders and their Management in Ayurved. Ancient Science of Life. 1981; 1(1): 4148
51. Rathi B. Rajput, D. Wanjari A. Rathi R. Physico - Chemical Analysis of Purana Ghrita (Old Clarified Butter) with 294 special reference to. Fatty Acid Profile. J Ind Sys Med, 2018; 6(1):4–9.
52. Singh AK, Singh M, Gupta AK, Singh PK. Life Style disorders “A curse of Modern Society” and it’s management with Ayurveda. Unique Journal of Ayurvedic and Herbal Medicines. 2014, 02 (01): 1-5.

*****