

Reclaiming the Sacred Science of Garbha Samskara

The Adi Shaiva Tradition's Vision of Conscious Conception and Prenatal Care

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ABSTRACT

This paper examines Garbha Samskara practices described in the *Garbha Upanishad* within the Adi Shaiva tradition, exploring how ancient prenatal sciences cultivated cognitive development and spiritual consciousness in children. Drawing on original Sanskrit verses, the eNpregnancy program revived by Supreme Pontiff of Hinduism Sri Nithyananda Paramashivam (SPH), Akashic record readings, historical accounts of royal women who raised enlightened children, and testimonies of parents participating in the eNpregnancy program in modern times, the study demonstrates that pre-colonial Indian societies possessed advanced understandings of fetal consciousness and maternal–fetal bonding. It argues that modern Western educational paradigms and the contemporary expectations imposed on women have eroded access to these knowledge systems, leading to a disconnection from embodied feminine wisdom. Through analysis of ritual structures, philosophical foundations, and methodologies, the paper positions Garbha Samskara as an indigenous alternative to medicalized pregnancy and calls for epistemic justice and recognition of women’s traditional medicine as legitimate science.

Keywords: Garbha Samskara, Garbha Upanishad, Adi Shaiva tradition, prenatal communication, Indigenous knowledge systems, traditional medicine, maternal wisdom, cognitive development, spiritual consciousness

Introduction: The Erasure of Sacred Science

In modern times, pregnant women across the globe navigate pregnancy through a narrowly defined biomedical lens, experiencing their journey as a series of clinical checkpoints, ultrasound measurements, and risk assessments. This medicalization of pregnancy, while offering certain technological advantages,

comes at an incalculable cost: the systematic erasure of millennia-old wisdom traditions that understood pregnancy not merely as a biological process but as a sacred science of consciousness transmission. Among the most sophisticated of these erased traditions is the practice of Garbha Samskara, the ancient Indian science of prenatal education and spiritual cultivation found in the *Garbha Upanishad*.

The Garbha Upanishad, one of the minor Upanishads of the Krishna Yajurveda, presents a comprehensive understanding of embryological development intertwined with spiritual philosophy and practical methodologies for conscious pregnancy.¹ The Garbha Samskara component of this text outlines specific practices, rituals, and approaches that expectant parents—particularly mothers—were to undertake to ensure not only the child's physical health but also their cognitive, emotional, and spiritual capacities.² These practices were not peripheral folk customs but central components of dharmic life, understood as essential to the continuation of civilization itself.

His Divine Holiness Sri Nithyananda Paramashivam, in his extensive discourses on the science of conscious birth, has revealed that conscious birthing practices were implemented with remarkable sophistication in pre-colonial India.³ According to his revelations, these practices produced children with demonstrably higher cognitive abilities, enhanced intuitive faculties, and accelerated spiritual development. Historical accounts, including the story of Queen Madalasa, who systematically sang sacred verses and engaged in conscious communication with her children in utero, raising them to become enlightened beings, provide validation of these traditional methodologies.

However, today, this knowledge system remains largely unknown and inaccessible to contemporary women. The colonial disruption of indigenous knowledge and education systems, the privileging of Western biomedical models as

the sole legitimate framework for understanding pregnancy, and the contemporary restructuring of women's lives around industrial capitalism have combined to sever most women's connections to these ancestral wisdom traditions. Modern women face impossible expectations: to remain productive workers until the moment of birth, to minimize the disruption pregnancy causes to economic life, and to trust exclusively in technological interventions. At the same time, their own embodied knowledge is granted no legitimacy. This represents not merely a loss of cultural heritage but active harm through the deprivation of tools that could enhance both maternal well-being and prenatal child development.

This paper seeks to recover and articulate the Garbha Samskara tradition as a complete system of prenatal science, examining its philosophical foundations, ritual practices, and developmental outcomes. By placing this tradition in dialogue with contemporary research on fetal consciousness, prenatal psychology, and epigenetics, while simultaneously critiquing the colonial and patriarchal structures that have rendered this knowledge inaccessible, this research argues for the urgent necessity of restoring women's traditional medicine to

¹ Jasmine Gujarati and Ritesh Gujarati, "Garbha Samskara: Prenatal Education Concepts, Practice and Prospects," *Journal of Ayurveda and Holistic Medicine* 2, no. 1 (2014): 40–46.

² Kushboo Jha et al., "Garbhasanskara: A Miracle to Woman," *Ayushdhara* 8, no. 2 (2011): 3178–84, <https://doi.org/10.47070/ayushdhara.v8i2.715>.

³ Nithyananda Paramashivam, "Secrets of Conscious Birth with Bhagawan Sri Nithyananda Paramashivam 1," YouTube video, August 3, 2020, <https://www.youtube.com/watch?v=ra6kUsutJl4>.

its rightful place as legitimate, valuable, and scientifically sophisticated knowledge.

Author Positionality

The author writes from the position of a practicing Adi Shaiva, initiated into the Shaiva tradition for over two decades, where consciousness is not a conceptual framework but a lived, experienced reality. The author's understanding of birth, body, and life processes emerges from direct initiation by SPH, sustained spiritual practice, embodied discipline, and direct participation in a consciousness-based ecosystem that views life, pregnancy, and birth as deeply relational phenomena and sacred human experiences. This article is informed by the author's lived experience within this tradition, as well as her role as an observer/trainee in multiple eNpregnancy sessions—a structured, consciousness-centered approach to pregnancy preparation. The eNpregnancy acharyas⁴ from whom the author learned are also trained in Western medicine,⁵ providing a unique integration of traditional and modern approaches.⁶

While the author does not claim clinical or biomedical authority, she consciously situates this work outside purely mechanistic paradigms of childbirth. Instead, she offers experiential insights, observations, and interpretive reflections rooted in traditional knowledge systems derived from consciousness-based practices that prioritize human possibility, emotional maturity, and energetic integrity. This positionality shapes both what the author observes and how she interprets it. The author presents these perspectives

transparently to invite dialogue with a wider audience seeking to understand traditional, consciousness-based approaches to birthing beyond dominant medical narratives.

Theoretical Framework: Decolonizing Pregnancy Knowledge

Indigenous Epistemology and Women's Ways of Knowing

To approach the Garbha Upanishad and the Garbha Samskara tradition with intellectual integrity, one must first establish an epistemological framework that does not automatically privilege Western scientific materialism as the sole arbiter of truth. Indigenous knowledge systems, including the Adi Shaiva tradition, operate from fundamentally different assumptions about the nature of consciousness, the relationship between matter and spirit, and the sources of valid knowledge. Linda Tuhiwai Smith's seminal work on decolonizing methodologies emphasizes that research is not an innocent or distant academic exercise but an activity with something at stake, occurring within specific political and social conditions.⁷ The study of traditional prenatal practices cannot be separated from the colonial

⁴ eNpregnancyCare, "Why eN – Pregnancy Care," YouTube video, January 3, 2014, <https://youtu.be/cbq0MTYMsy0>.

⁵ KAILASA's eN-Pregnancy Care, "Miracles Experienced While Conducting Delivery of eN-Pregnancy Care Mothers," YouTube video, June 23, 2018, <https://www.youtube.com/watch?v=8p5X8CrkGPc>.

⁶ KAILASA's eN-Pregnancy Care, "A Pediatrician's Experience with eN Pregnancy Care," YouTube video, July 16, 2020, https://youtu.be/_YTXXOvXxsg.

⁷ Linda Tuhiwai Smith, *Decolonizing Methodologies: Research and Indigenous Peoples*, 2nd ed. (London: Zed Books, 2012).

histories that delegitimized these practices, nor from the contemporary power structures that continue to marginalize indigenous knowledge.

Engaging with Garbha Samskara requires what Shawn Wilson calls "relational accountability"—an understanding that knowledge is not extracted from communities but exists in relationship, carrying responsibilities to those knowledge holders and their descendants.⁸ Sandra Harding's work provides additional theoretical grounding by arguing that perspectives from marginalized positions—including women's experiential knowledge—can offer a more complete and less distorted understanding than supposedly neutral scientific positions that fail to examine their own assumptions and power relations.⁹ Pregnant women's embodied knowledge of their own gestational experiences, and the collective wisdom accumulated by generations of women supporting pregnancy and birth, constitutes a legitimate and valuable epistemic resource that Western medicine has systematically devalued.

The Adi Shaiva tradition operates on a non-dualistic philosophical foundation, understanding consciousness as primary and matter as its manifestation. This ontological position is not simply an article of faith but the foundation for a sophisticated set of practices and observations about the nature of reality, including fetal development. The tradition recognizes multiple valid sources of knowledge (*pramanas*), including direct perception, inference, testimony of realized beings, and direct revelation. SPH's access to the Akashic records—the subtle energetic repository of all events and knowledge—represents, within

this epistemological framework, a valid means of accessing historical information and technical details of ancient practices.¹⁰

Colonialism, Western Medicine, and the Erasure of Traditional Knowledge

The displacement of traditional prenatal knowledge systems did not occur through neutral scientific progress but through deliberate colonial policies and the imposition of Western biomedical models as tools of cultural domination. As postcolonial scholars have extensively documented, British colonial administration in India systematically worked to delegitimize indigenous knowledge systems, including Ayurvedic medicine and spiritual practices, as "superstition" requiring replacement by modern, rational, Western approaches.¹¹

This process was deeply gendered. Colonial administrators and missionaries were particularly concerned with Indian women's practices around pregnancy and childbirth, which they viewed as dangerously backward. The British implemented policies to train Western-style midwives and doctors while actively suppressing traditional birth attendants (*dais*) and the knowledge systems they carried. Claims of reduced maternal

⁸ Shawn Wilson, *Research Is Ceremony: Indigenous Research Methods* (Halifax, NS: Fernwood Publishing, 2008).

⁹ Sandra Harding, "Rethinking Standpoint Epistemology: What Is 'Strong Objectivity'?" in *Feminist Epistemologies*, ed. Linda Alcoff and Elizabeth Potter (New York: Routledge, 1993), 49-82.

¹⁰ Nithyananda Paramashivam, "How to Access Akashic Records," YouTube video, October 8, 2023, <https://youtu.be/zKJjOpmfp4Q>.

¹¹ Projit Bihari Mukharji, *Nationalizing the Body: The Medical Market, Print and Dakari Medicine* (London: Anthem Press, 2011).

and infant mortality justified this intervention. However, as historians like Maneesha Lal have shown, colonial health interventions were often more concerned with producing healthy colonial subjects and managing Indian population growth than with genuine care for Indian women's wellbeing.¹²

The loss of Garbha Samskara and related traditions was not the result of a single rupture but of a slow, cumulative erosion driven by colonial and postcolonial change. Western education systems established under British rule elevated European medicine, science, and philosophy as universal truths while casting Indian knowledge as backward superstition, a hierarchy that many Indian elites themselves came to internalize. At the same time, colonial economic restructuring dismantled village and household life—the very spaces where such practices were lived and transmitted—leaving women without the time, support, or intergenerational guidance needed to sustain them during their childbirth. In the meantime, pregnancy was increasingly medicalized, reframed as a condition requiring expert (and largely male) intervention rather than a natural process held within women's embodied knowledge. Ironically, reforms justified in the name of women's liberation often stripped women of authority, transforming them from knowledge-holders into passive patients. The decline of Sanskrit education further severed access to foundational texts, while missionary campaigns actively discouraged ritual practices as pagan. Together, these forces hollowed out the social, linguistic, and spiritual ecosystems that had

sustained Garbha Samskara, so that by the mid-nineteenth century, it survived only in isolated families, spiritual enclaves, or fragmentary folk forms, largely detached from their original depth and meaning.

The legacy of these colonial interventions persists in contemporary India and throughout the Global South, where Western biomedical approaches dominate institutional healthcare. At the same time, traditional practices survive primarily in rural areas or among communities with limited access to modern medical facilities—ironically rendering these practices as markers of poverty and backwardness rather than sophisticated alternatives. For women of Indian descent living in Western contexts, access to traditional prenatal knowledge has been even more thoroughly severed, as diaspora communities often assimilate into dominant medical cultures while losing connection to ancestral practices.

Contemporary Western obstetric practice, while claiming neutrality and scientific objectivity, embodies specific cultural values: the mechanization of the body, the privileging of efficiency and standardization over individual experience, the assumption that technological intervention improves natural processes, and the treatment of pregnancy as a medical condition requiring expert management rather than a normal life process. These values align

¹² Maneesha Lal, "The Politics of Gender and Medicine in Colonial India: The Countess of Dufferin's Fund, 1885–1888," *Bulletin of the History of Medicine* 68, no. 1 (1994): 29–66, <https://www.jstor.org/stable/44451545>.

with industrial capitalism's requirements for productive labor and the management of women's reproductive capacity in service of economic imperatives.¹³

For contemporary women—especially those in Western societies or global urban centers—the conditions that once made Garbha Samskara possible are largely absent. Economic pressures require most women to work full-time well into pregnancy, treating gestation as a brief interruption to productivity rather than a protected period of inward cultivation. Socially, the dominance of nuclear families has replaced the web of elder women and communal support that traditionally carried this knowledge, leaving many pregnant women isolated and without guidance. Pregnancy itself has become intensely medicalized and surveilled, with constant testing and risk assessment fostering anxiety and fear instead of the calm, trusting mental state that Garbha Samskara practices. Even when interest exists, most women lack the preparation to begin mantras, yogic practices, and Ayurvedic dietary principles, which require training and contextual understanding that are no longer commonly transmitted. This is compounded by cultural disconnection—diasporic Indian women may feel embarrassment or ambivalence toward traditions labeled “backward,” while women from other backgrounds hesitate out of concern for authenticity or appropriation. Underneath all of this lies a deeper problem: the absence of sacred time. Modern life offers no shared rhythms, household rituals, or social expectations that pregnancy deserves withdrawal, reverence, and sustained spiritual attention.

The result is a profound loss—women are denied access to tools that could enhance their own experience of pregnancy and potentially optimize their children's development. This denial is compounded by the fact that most women do not even know such tools exist, so thoroughly has the erasure been completed.

The Garbha Upanishad: Textual Foundations

Historical and Philosophical Context

The Garbha Upanishad belongs to the minor Upanishads and is classified as a Samanya Upanishad (general Upanishad) that deals with philosophical and yogic topics. The Upanishad is structured as a dialogue, following the classical Upanishadic format in which a seeker approaches a teacher for knowledge. In this case, the text addresses fundamental questions about the nature of human embodiment: How does the body form? What is the relationship between consciousness and the developing embryo? What factors influence the child's nature and capabilities?

The philosophical framework of the Garbha Upanishad operates within a broader Vedantic understanding that sees individual existence (*jivatman*) as fundamentally connected to universal consciousness (*paramatman*). However, the text is not merely philosophical speculation but presents a precise developmental embryology intertwined with spiritual psychology.

¹³ Robbie Davis-Floyd, *Birth as an American Rite of Passage*, 2nd ed. (Berkeley: University of California Press, 2003).

It describes the week-by-week development of the fetus, identifying when consciousness enters, when various faculties develop, and how the experiences and actions of parents—particularly the mother—shape the incarnating soul's trajectory.¹⁴

A crucial verse from the text states:

*Shukra-shonita sambhutam bijabhaga-
vashena tu*

*Yoni-samskara sambhavam garbha-
vyadhi-samudbhavam*

"Born from the union of seed and ovum, influenced by the characteristics of the seed portions, shaped by the conditioning of the womb, the embryo becomes subject to various conditions."

This verse encapsulates several key principles: the biological basis of conception from male and female contributions, the genetic or karmic inheritance contained within the seed (*bija*), the profound importance of the uterine environment (*yonisamskara*), and the various influences that can affect development. The term *yonisamskara* is particularly significant—*samskara* means both "conditioning" and "refinement" or "purification," suggesting that the womb is not simply a passive container but an active environment that can be consciously shaped to influence developmental outcomes.

The Architecture of Consciousness in Fetal Development

The Garbha Upanishad presents a detailed timeline of fetal development that is remarkable for its precision and for its integration of physical

and conscious development. While Western embryology focuses exclusively on physiological changes, the Upanishadic framework tracks the gradual involvement of consciousness with the developing form.

According to the text, the embryo is in a fluid state (*kalala*) in the first month after conception. During the second month, it solidifies into a firmer mass (*ghana*). By the third month, limbs and organs begin to differentiate. The text identifies the fourth month as crucial—this is when consciousness becomes more firmly established, and the child begins to develop awareness in the womb. The specific verse states:

*Caturthan tu masa praptah sanjayate
sarva cetana*

"Upon reaching the fourth month, all consciousness becomes active."

This understanding aligns intriguingly with contemporary research in developmental neuroscience, which identifies the second trimester as the period when neural structures develop sufficiently for organized brain activity.¹⁵ However, the Upanishadic framework operates from a different ontological base—namely, that consciousness emerges from neural complexity. However, that consciousness increasingly engages with the developing nervous system as the

¹⁴ Pankaj Sharma et al., "A Comparative Exploration of Garbhopanishad in the Purview of the Brihatrayee: A Review," *International Journal of Research in Ayurveda and Pharmacy* 15, no. 5 (2024): 155–61, <https://doi.org/10.7897/2277-4343>.

¹⁵ Bill Hathaway, "Mid-Pregnancy May Be Defining Period for Human Brain," *Yale News*, October 4, 2021, <https://news.yale.edu/2021/10/04/mid-pregnancy-may-be-defining-period-human-brain>.

physical substrate becomes capable of supporting it.

The text continues to detail development through subsequent months, noting that by the fifth month, the child develops awareness of hunger and thirst; by the sixth month, organs are fully formed; by the seventh month, the child is enveloped by the vital airs (*prana*); by the eighth month, all consciousness is complete (*sarva-tattva-sampurnata*). Most significantly, the Garbha Upanishad describes how the child in the eighth or ninth month develops memory of previous births and karmic patterns:

*Aneka-janma-sambhutam karma-
avaranat smrtih*

"Memory arises of many births, covered by the veil of karma."

This understanding presents pregnancy not as the creation of entirely new consciousness but as providing embodiment for consciousness that carries its own history and tendencies. The role of the mother, therefore, becomes not simply to grow a body but to provide the optimal environment for this consciousness to manifest its highest potential while potentially clearing or minimizing karmic obstacles.

Garbha Samskara: The Practice of Conscious Pregnancy

Philosophical Foundations of Prenatal Care

The samskaras in Hindu tradition are the sacraments marking major life transitions,

beginning before birth and continuing through death. Garbha Samskara is thus not simply prenatal care but a sacred process of purification and conscious shaping that begins at conception—or ideally, even before.

The underlying philosophy recognizes several crucial principles:

1. Consciousness precedes conception:

In the Adi Shaiva tradition, viewed from the quantum field perspective, consciousness is the fundamental reality. It is omnipresent and cannot be created or destroyed. It is the underlying characteristic that unites all life. A child is not a blank slate or a consciousness emerging from biological complexity, but is an existing conscious entity seeking embodiment. This consciousness brings karmic tendencies, capabilities, and spiritual evolution from previous existences. The fetus is already the quantum field itself, the unit that measures the entire universe. Nurturing the space before birth means awakening the inherent quantum qualities.

2. Garbha Upanishad principles - Nurture begins at conception: While the physical contributions come from both parents, the mother's body, consciousness, emotions, thoughts, and spiritual state constitute the entire world for the developing child. Her experiences become the child's experiences; her consciousness shapes the child's developing consciousness.¹⁶

¹⁶ Nithyananda Paramashivam, "How You Cognize You Comes from Mother," YouTube video, May 12, 2023, <https://www.youtube.com/shorts/VsJJRgPCgDg>.

3. *Life is not measurable - Start BEING the measure:* The moment of conception is not biological alone—it is spiritual. The jiva brings its karmic blueprint, and the parents' consciousness becomes the first classroom. In the Western paradigm, children are treated as objects to be measured, shaped, and educated. The Adi Shaiva tradition believes that the fetus is already an enlightened consciousness waiting to remember itself. Prenatal nurture is a means of helping it remember, not programming it like software.¹⁷

4. *Critical developmental windows:* Specific periods during pregnancy represent optimal times for specific developmental influences. Just as the physical body develops in stages, so too does the capacity for various forms of learning, emotional patterning, and spiritual awareness.¹⁸

5. *Intergenerational transmission:* The practices of Garbha Samskara were understood as creating not just individual development but intergenerational patterns. A mother who engaged in consciousness-based practices was not simply improving her own child but establishing patterns that would influence how her children approached their own future pregnancies.¹⁹

Preparatory Phase: Garbhadhana Samskara

The Adi Shaiva tradition, as elaborated by SPH, emphasizes that Garbha Samskara properly begins before conception, recognizing that the sacrament of conception itself is sacred. Conscious preparation by both parents is a requirement before they create the new life form, as the circumstances, consciousness, and

intentionality surrounding conception profoundly influence the kind of soul drawn to the parents and the capacities that soul can express through the resulting embodiment.²⁰

According to traditional practice, conception was approached as a sacred ritual, not a casual or merely biological event. The couple would prepare through:

1. *Purification practices:* Both partners would engage in physical purification (bathing, fasting, dietary preparations) and spiritual purification (meditation, mantra recitation, completion and release of negative patterns). The aim is to purify the consciousness of their partners through initiated practices so the quantum field they create becomes a manifestation channel for the descent of higher consciousness.²¹

2. *Timing:* Conception was timed according to astrological considerations, the woman's menstrual cycle, and planetary positions considered favorable qualities in the child.²² The tradition holds that conception at different times produces different capacities—certain periods favored intellectual development, others spiritual

¹⁷ Nithyananda Paramashivam, "The Human Brain Can Do This... If You Just Change Your Breathing," YouTube video, August 30, 2025, <https://www.youtube.com/shorts/XVfC-ZYePB8>.

¹⁸ Jha et al., "Garbhasanskara."

¹⁹ Nithyananda Paramashivam, "What Is the DNA of Enlightenment," YouTube video, May 13, 2014, <https://youtu.be/ovg9zEOafv0>.

²⁰ Nithyananda Paramashivam, "Guidelines to Husband and Wife before the eN-Pregnancy Program," YouTube video, August 21, 2020, <https://www.youtube.com/watch?v=s-65Ykd7Cck>.

²¹ Paramashivam, "Guidelines to Husband and Wife."

²² Nithyananda Paramashivam, "Open the Door and Let the Breeze Enter | Part 28," YouTube video, January 26, 2026, https://youtu.be/QL_tsc7pDIY.

sensitivity, others physical strength. With proper preparation, birthing can lead to enlightenment.²³

3. *Conscious intentionality*: At the moment of conception, both partners hold clear intention and visualization regarding the type of birth, the nature of the child they want to conceive. This was understood not as imposing ego-desires upon the child but as sending an invitation into the cosmos for a soul with particular qualities and purposes.

4. *Invocation*: Specific mantras and prayers would be recited to invoke divine blessings and to call a soul of high spiritual evolution.²⁴

Daily Practices During Pregnancy

Once pregnancy was confirmed, the mother entered a disciplined yet nurturing rhythm of daily practices intended to support her well-being and the child's holistic development. These practices functioned as an integrated system, addressing the physical, emotional, mental, and spiritual dimensions of gestation.

Physical Practices

Each day began with the Morning Revolution Protocol, in which the mother rose during the sacred *Bramha Muhurta* window (4 a.m. to 6 a.m.) and began the day with deep, conscious breathing. This breathing was understood as a direct means of witnessing and experiencing cosmic presence across multiple dimensions,²⁵ cultivating the inner stability, energy, and patience needed for daily life. Alongside this, a specialized pregnancy diet evolved across

trimesters to meet the changing developmental needs of the fetus, emphasizing sattvic foods—fresh fruits, whole grains, ghee, and milk—while avoiding rajasic and tamasic substances, and incorporating specific herbs and preparations to support healthy growth.²⁶ Gentle movement and yoga were also integral, with carefully selected asanas focused on spinal health, pelvic flexibility, and optimal fetal positioning, practiced with an emphasis on breath awareness rather than exertion. Daily dental care²⁷ and oil massage (abhyanga) with prescribed herbal oils further supported the mother by easing physical discomfort, preventing stretch marks, and fostering an intimate, appreciative connection with her transforming body, turning bodily care itself into a quiet ritual of awareness and reverence.²⁸

Mental and Emotional Cultivation

With so many events and happenings within the body while nurturing a child in the womb,

²³ Nithyananda Paramashivam, "Akashic Readings: Death 1," YouTube video, September 27, 2012, <https://youtu.be/nPIFdHlg0fc>.

²⁴ Nithyananda Paramashivam, "Putra Kameshti Yaga: Hindu Science of Bearing Divine Children," YouTube video, October 23, 2017, <https://youtu.be/98kfWkv1u4k>.

²⁵ Nithyananda Paramashivam, "Trinetra Kumbhaka – Breathing Technique to Attain the State, Space, & Powers of Mahadeva," YouTube video, April 23, 2018, https://www.youtube.com/watch?v=G_9a90zgrZk.

²⁶ Nithyananda Paramashivam, "Sure Ways to Weight Loss | Patanjali Yoga Sutras 137," YouTube video, March 24, 2011, https://www.youtube.com/watch?v=kfUbG3o3_NY.

²⁷ Nithyananda Paramashivam, "This Ancient Powder Heals Teeth, Gums & Gut," YouTube video, September 16, 2025, https://youtu.be/dexj_fIG358.

²⁸ Nithyananda Paramashivam, "The Cosmic Womb: How Your Soul Grows in Silence," YouTube video, September 25, 2025, https://youtu.be/ZIJM_8fAB9c.

mothers were taught to practice stillness and to witness themselves to maintain perspective. Through constant practice, it is possible to experience a state of conscious awareness without thoughts or the need to verbalize. It is the experience of cosmos flowing through oneself.²⁹

The pregnant woman was encouraged to cultivate specific chants that negate the harsh emotions, conflicts, violent imagery, and distressing experiences, which were to be avoided or minimized. This stabilizes the prana.³⁰ The expectant mother would spend time with her husband to establish a deeper connection with realized beings, wise elders, and spiritually evolved individuals.³¹ Their presence and conversation were understood to elevate the consciousness in the ecosystem she thrives in and thereby influence the child.

Sound Practices: The Heart of Garbha Samskara

The most distinctive and powerful aspect of Garbha Samskara involves the systematic use of Nada, sound. SPH's revelations emphasize the power of sound in transmitting enlightenment, and 'Nada' sound is a principle (tattva) through which conscious experiences can be transmitted.³² Aligned with this, practices such as mantra recitation and devotional singing (*bhajan and kirtan*) can be used to establish direct communication with the child in utero. Each mantra carries specific vibrational patterns that can influence physical development, consciousness, and spiritual protection. Specific mantras were recited with the understanding

that they would create an energetic protective shield around the developing child and maintain the mother's consciousness in a state of divine connection.

The Extraordinary Case: Queen Madalasa and the Enlightened Children

Historical accounts preserved within the Adi Shaiva tradition, and corroborated by SPH's access to the Akashic records, describe a remarkable case that demonstrates the full potential of Garbha Samskara practices: a queen in ancient times who raised multiple children to enlightenment through the systematic application of these methods. When she became pregnant with her first child, she resolved to observe the entire Garbha Samskara tradition with absolute dedication. SPH reveals the technique for harnessing the child's high prana energy.³³

Her daily routine, which SPH gives to all mothers, became:

1. *Morning*: Energy activation through deep breathing to receive cosmic transmission.

²⁹ Nithyananda Paramashivam, "Nirvikalpa Samadhi is the Source of all Knowledge!" YouTube video, February 16, 2020, https://youtu.be/BaDG3w_nKiE.

³⁰ Nithyananda Paramashivam, "Sound of Prana: The Subtlest Mantra Versus Mantra Chanting." YouTube video, August 14, 2008, <https://www.youtube.com/watch?v=WqZJKynQWz0>.

³¹ Nithyananda Paramashivam, "How the Institution of Marriage Affects the Length Breadth & Depth of a Person?" YouTube video, July 2, 2019, <https://youtu.be/pLUm3cLx24E>.

³² Nithyananda Paramashivam, "Nada Tattva – The Power of Sound!" YouTube video, January 26, 2020, <https://www.youtube.com/watch?v=cfvXFsgwAb4>.

³³ Nithyananda Paramashivam, "Nurturing Enlightenment: The Story of Queen Madalasa," YouTube video, December 16, 2024, <https://youtu.be/4oSyM3MYPfs>.

2. *Noon*: Consciousness maintenance through sacred practices such as japa and music.
3. *Evening*: Divine download through samadhi meditation as the fetus and mother prepare to sleep.

Throughout the day, the queen maintained constant awareness of her thoughts and emotions, immediately noticing and redirecting any negative mental states, understanding that every thought created an imprint on the developing child's consciousness. Most remarkably, the accounts describe how the queen developed such sensitivity that she could feel the child's consciousness responding to different practices. She noticed, for instance, that when she recited verses from the Upanishads, the child would become very still, as if in deep attention. When she sang devotional songs in praise of Shiva, the child would become active, as if dancing. She used these responses to tailor her practices, developing what amounted to a two-way communication with her unborn child.³⁴

Skeptics might dismiss such accounts as mythology or hagiography. However, SPH's detailed revelations from the Akashic records provide specific information about the practices, to be used, the timing of practices coordinated with the child's developmental stages, and the phenomenology of the consciousness-to-consciousness communication she cultivated.³⁵ These details are consistent with the systematic knowledge preserved in the Garbha Upanishad and other Sanskrit sources, suggesting not mythology but historical documentation of

practices that produced replicable results. The results shared by the participants indicate successful experiences.³⁶

Scientific Correlates: Contemporary Research on Prenatal Consciousness

While the epistemological frameworks differ fundamentally, contemporary research in multiple scientific fields has begun documenting phenomena that the Garbha Samskara tradition has recognized for millennia. This convergence does not validate the ancient tradition—which stands on its own authority—but provides a bridge for modern audiences to consider these practices seriously.

Fetal Auditory Development and Sound Perception

Developmental biology has established that the auditory system begins functioning in the second trimester. By weeks 18-20 of gestation, the fetus can detect sounds, and by 24-26 weeks, auditory responses are well-established.³⁷ Ultrasound studies have shown that fetuses respond to external sounds by increasing heart rate and altering movement patterns.

³⁴ Nithyananda Paramashivam, "Your Body's Silent Language: The Cosmos Responds," YouTube video, September 29, 2025, <https://www.youtube.com/watch?v=QHgvKivNGLU>.

³⁵ KAILASA's eNpregnancy Care, "Chant Your Way To Discover Your True Nature- Mantra Pushpam," YouTube video, July 15, 2020, <https://youtu.be/LL92N5hZEc>.

³⁶ eNpregnancyCare, "Experiences Jagatpreeti Australia," YouTube video, March 14, 2014, <https://youtu.be/B-S-a3v4CyI>.

³⁷ Stanley N. Graven and Joy V. Browne, "Sensory Development in the Fetus, Neonate, and Infant: Introduction and Overview," *Newborn and Infant Nursing Reviews* 8, no. 4 (2008): 169–72, <https://doi.org/10.1053/j.nainr.2008.10.007>.

More remarkably, research has demonstrated that fetuses develop the ability to recognize specific sounds, particularly the mother's voice, and retain this recognition after birth. Newborns show clear preference for their mother's voice over other female voices, for stories read repeatedly during pregnancy over new stories, and even for specific musical pieces heard frequently in utero.³⁸ This research validates the Garbha Samskara emphasis on the mother's voice as the primary sonic environment and on repetitive exposure to specific beneficial sounds.

Studies on prenatal music exposure have shown measurable impacts on postnatal brain structure and function. Children whose mothers listened to music regularly during pregnancy show enhanced auditory processing, earlier language development, and, in some studies, higher scores on measures of cognitive function.³⁹ While this research uses Western classical music rather than the specific mantras and ragas prescribed in Garbha Samskara, it demonstrates the principle that organized sound during gestation has formative impact.

Maternal Stress, Emotion, and Fetal Programming

The emerging field of fetal programming, or developmental origins of health and disease (DOHaD), has documented extensively how maternal stress, nutrition, and emotional states during pregnancy have lasting effects on a child's physiology and psychology.⁴⁰ Maternal cortisol (a stress hormone) crosses the placenta and influences fetal brain development, particularly in regions involved in the stress response and

emotion regulation. Children whose mothers experienced high stress during pregnancy show altered stress response systems, increased risk for anxiety and depression, and, in some studies, reduced cognitive function.⁴¹

Conversely, positive maternal emotional states, social support, and practices like meditation have been shown to optimize fetal development. Research on mindfulness meditation during pregnancy demonstrates reduced maternal anxiety and depression, improved birth outcomes, and enhanced maternal-infant bonding.⁴² Studies of yoga during pregnancy show similar benefits.⁴³

These findings validate the Garbha Samskara emphasis on cultivating positive emotional states, avoiding stress and conflict, and engaging in spiritual practices. The tradition understood intuitively what is now being demonstrated empirically: the mother's consciousness directly

³⁸ Anthony J. DeCasper and William P. Fifer, "Of Human Bonding: Newborns Prefer Their Mothers' Voices," *Science* 208, no. 4448 (1980): 1174–76, <https://doi.org/10.1126/science.7375928>.

³⁹ Minna Huotilainen and Simo Pakarinen, "Music Perception in the Human Brain: Learning and Individual Differences," *Annals of the New York Academy of Sciences* 1423, no. 1 (2018): 104–12, <https://doi.org/10.1111/nyas.13655>.

⁴⁰ Peter D. Gluckman and Mark A. Hanson, *Developmental Origins of Health and Disease* (Cambridge: Cambridge University Press, 2006).

⁴¹ Elysia P. Davis and Curt A. Sandman, "The Timing of Prenatal Exposure to Maternal Cortisol and Psychosocial Stress Is Associated with Human Infant Cognitive Development," *Child Development* 81, no. 1 (2010): 131–48, <https://doi.org/10.1111/j.1467-8624.2009.01385.x>.

⁴² Larissa G. Duncan and Nancy Bardacke, "Mindfulness-Based Childbirth and Parenting Education: Promoting Family Mindfulness during the Perinatal Period," *Journal of Child and Family Studies* 19, no. 2 (2010): 190–202. <https://doi.org/10.1007/s10826-009-9313-7>.

⁴³ Kwon, Rachel et al., "A Systematic Review: The Effects of Yoga on Pregnancy," *European Journal of Obstetrics & Gynecology and Reproductive Biology* 250 (2020): 171–77, <https://doi.org/10.1016/j.ejogrb.2020.03.044>.

shapes fetal brain development and the child's lifelong psychological patterns.

Epigenetics and Environmental Programming

Perhaps most striking are findings from epigenetics—the study of how environmental factors influence gene expression without altering the underlying DNA sequence. This research has demonstrated that maternal experiences, behaviors, and exposures during pregnancy can activate or silence specific genes in the developing fetus, creating lasting changes that can even be transmitted across generations.⁴⁴

Maternal nutrition, stress exposure, and even social experiences create epigenetic marks that influence the child's metabolism, stress response, immune function, and neurological development. Diet, emotional states, and environmental exposures—all factors addressed in Garbha Samskara protocols—have now been shown to induce molecular-level changes with lifelong consequences. While Western epigenetics focuses on biochemical mechanisms, and the Vedic tradition speaks of subtle energy and karmic patterns, both recognize the same fundamental principle: pregnancy is not simply the unfolding of a genetic program but a dynamic process where maternal consciousness and environment actively shape developmental outcomes.

Prenatal Communication and Consciousness

The most controversial area of contemporary research—and the most directly relevant

to Garbha Samskara claims—involves fetal consciousness and the possibility of genuine communication between mother and unborn child. Conventional developmental neuroscience has been reluctant to attribute consciousness to fetuses, given the difficulty of defining and measuring consciousness even in adults.

However, researchers working in prenatal and perinatal psychology have documented phenomena that challenge materialist assumptions. Studies show that fetuses respond differently to the mother's voice versus other sounds, that patterns of fetal movement correlate with maternal emotional states in ways that suggest responsiveness rather than mere physiological connection, and that some mothers report experiences that seem to involve genuine communication with the fetus—receiving information about the child's needs, preferences, or even future characteristics.⁴⁵

The field of prenatal and perinatal psychology, pioneered by researchers like Thomas Verny and David Chamberlain, has collected extensive evidence that contradicts the assumption of fetal unconsciousness. Adults under hypnosis, in therapeutic settings, have reported apparently genuine memories from the womb and

⁴⁴ Maurizio Meloni and Ruth Müller, “Transgenerational Epigenetic Inheritance and Social Responsibility: Perspectives from the Social Sciences,” *Environmental Epigenetics* 4, no. 2 (2018): 1–10, <https://doi.org/10.1093/eep/dvy019>.

⁴⁵ William A. McCarty, “Infant and Early Childhood Communications: Exploring the Foundations of Knowing,” In *The Embodied Mind: Understanding the Mysteries of Cellular Memory, Consciousness, and Our Bodies*, ed. Thomas R. Verny (New York: Pegasus Books, 2021), 89–124.

birth, including details later verified with medical records or parental testimony. While methodological questions remain, the volume and specificity of such accounts challenge the default assumption that consciousness is absent until late in development or after birth.⁴⁶

Reclaiming and Adapting Traditional Practice

Movements for Revival

In recent decades, movements to revive and restore traditional Indian knowledge systems have emerged, including efforts to restore Garbha Samskara practices:

The work of SPH and the eNpregnancy program guided by SPH has been central to this revival. Through extensive research into Sanskrit texts, revelations from the Akashic records, and the revival of traditional practices, SPH has worked to make these teachings accessible to contemporary practitioners. The establishment of gurukuls (traditional spiritual schools) where Vedic sciences are taught in living tradition rather than as academic subjects has created new pathways for transmission.

Organizations focused on traditional childbirth practices, such as the Traditional Birth Attendants' associations in various Indian states, have worked to document and preserve indigenous knowledge. While often focused on birth attendance rather than prenatal practices specifically, these movements represent recognition of the value of traditional knowledge.

The global yoga movement, despite its commercialization and frequent disconnection from traditional contexts, has made some prenatal yoga practices widely available. While these often lack the integration with mantra, ritual, and spiritual philosophy that characterized traditional Garbha Samskara, they represent at least a partial opening.

Adaptation for Contemporary Contexts

Reviving Garbha Samskara in contemporary contexts requires both faithful preservation of essential principles and creative adaptation to current realities.

Essential practices that can be maintained:

- Daily mantra recitation, even if limited to 15-20 minutes
- Regular meditation and conscious breathing
- Direct communication with the unborn child
- Maintenance of positive emotional states and conscious avoidance of harmful influences
- Dietary attention to sattvic principles within available resources
- Regular exposure to sacred music and texts

Necessary adaptations:

- *Time compression:* While traditional

⁴⁶ David B. Chamberlain, *The Mind of Your Newborn Baby*, 3rd ed. (Berkeley, CA: North Atlantic Books, 1998).

practice assumed hours per day, adapted practice might focus on consistent shorter sessions, perhaps 30-60 minutes of formal practice supplemented by integrated awareness throughout the day.

- *Community building:* Since traditional extended family structures are largely unavailable, creating alternative communities—pregnancy circles, spiritual practice groups, online communities—that can provide knowledge sharing, support, and collective practice.
- *Technological supports:* While traditional practice emphasized live sound, recordings of mantras and classical ragas can provide some benefit when live music is unavailable. Online resources can make teaching accessible where physical teachers are not.
- *Partner involvement:* In traditional practice, the husband's role was often peripheral except at conception. Contemporary practice can benefit from fully involving partners in prenatal communication and from creating couple practices of meditation and mantra.
- *Integration with medical care:* Rather than positioning traditional practice in opposition to medical care, finding ways to integrate—sharing practices with supportive healthcare providers, using medical appointments as opportunities to practice awareness rather than anxiety.
- *Cultural translation:* For practitioners

not from Indian backgrounds, finding authentic transmission while also making necessary cultural translations. This might involve learning about the philosophical foundations while also connecting practices to one's own spiritual tradition or understanding.

Research Imperatives

For Garbha Samskara practices to gain wider acceptance and accessibility, several research directions are essential:

1. *Documentation:* Systematic documentation of traditional practices as they are still maintained by traditional practitioners, particularly in rural India and within specific spiritual lineages. This includes video documentation, detailed textual analysis, and oral history collection.
2. *Phenomenological research:* Qualitative research with women who practice Garbha Samskara, documenting their experiences, perceived benefits, challenges, and outcomes. This research should be designed by and with community members rather than imposed by outside researchers.
3. *Clinical trials:* Well-designed studies comparing developmental outcomes in children whose mothers practiced Garbha Samskara versus control groups. Such research faces methodological challenges because randomization is difficult, confounding variables are

numerous, and truly measuring "higher consciousness" is perhaps impossible in materialist frameworks. However, even limited outcome studies (measuring cognitive development, emotional regulation, attachment security, etc.) could demonstrate benefits.

4. *Neuroscience studies*: Brain imaging research examining how specific practices (mantra recitation, meditation, devotional singing) affect maternal brain patterns and stress physiology during pregnancy. While this does not capture the tradition's full philosophical framework, such research could demonstrate mechanisms of effect.
5. *Longitudinal studies*: Following children whose mothers practiced Garbha Samskara into adolescence and adulthood to assess long-term developmental trajectories.
6. *Cross-cultural comparison*: Examining whether traditional prenatal practices in other indigenous cultures show similar patterns and outcomes, which would suggest universal principles rather than culture-specific phenomena.

Broader Implications: Women's Medicine and Epistemic Justice

Garbha Samskara within the Landscape of Traditional Women's Medicine

The Garbha Samskara tradition represents one expression of a global heritage of women's traditional medicine—knowledge systems developed by women, for women, addressing

women's specific health needs, and transmitted primarily through female lineages. Across cultures, women developed a sophisticated understanding of fertility, pregnancy, childbirth, postpartum care, and child-rearing, systems that were marginalized or destroyed through similar processes of colonization and medicalization.

Traditional African midwifery practices, Indigenous American pregnancy customs, and European folk medicine traditions around childbirth have all faced similar delegitimization. The pattern is consistent: knowledge developed through generations of careful observation and experimentation, knowledge that served communities effectively, was dismissed as superstition and replaced by supposedly universal medical knowledge that has often served women poorly.

The revival of Garbha Samskara is thus not merely about one specific tradition. However, it represents a larger movement for epistemic justice—recognition that traditional and indigenous knowledge systems constitute legitimate science, sophisticated understandings developed through valid methodologies, and deserve preservation, respect, and integration into contemporary practice.

The Politics of Reproduction Knowledge

Control over reproductive knowledge is fundamentally political. Who defines what pregnancy means, what constitutes appropriate prenatal care, what outcomes matter, and whose knowledge counts? These questions determine women's autonomy, their bodily sovereignty, and

their power within society. The displacement of traditional prenatal knowledge represented a transfer of power from women and communities to medical institutions and professionals, from local, diverse practices to standardized protocols, and from holistic understanding to reductionist frameworks that industrial medical systems could manage.

Reclaiming traditional prenatal knowledge is thus inherently feminist, even when originating in traditions that were themselves patriarchal in many ways. It represents women reclaiming authority over their own bodies and reproductive experiences, insisting on the validity of their experiential knowledge, and refusing to be reduced to passive patients requiring expert management. However, such reclamation must be undertaken with care to avoid simply romanticizing tradition or creating new forms of pressure on women. The goal is not to mandate that all women practice Garbha Samskara but to make this knowledge available as one option among many, restoring choices that have been taken away.

Implications for Human Potential

If the claims of the Garbha Samskara tradition are even partially accurate, these practices can enhance cognitive development, accelerate spiritual evolution, and help children manifest higher capacities—with profound implications. We may have systematically denied multiple generations access to tools that could have significantly enhanced human development.

The contemporary crisis in child and adolescent mental health, the struggles with

meaning and purpose many young people experience, the feeling of disconnection from something deeper—⁴⁷ these may be partially attributable to the loss of practices like Garbha Samskara that would have established stronger foundations of consciousness and connection from the beginning of life.

From the perspective of the Vedic tradition, we are consciousness seeking expression through form. The quality of that expression depends significantly on the conditions provided during the formative period of gestation and early development. By optimizing those conditions through conscious practice, we may enable higher expressions of human capacity—not creating superiority but allowing each soul to manifest more fully its inherent nature and capabilities.

This is not eugenic thinking, which seeks to create superior humans by selecting certain genetic lines while eliminating others. Rather, it is a democratic spirituality that provides tools available to any pregnant woman to help any child, regardless of caste, class, or inherited characteristics, manifest their fullest potential.

Conclusion: Toward a Future of Restored Wisdom

The Garbha Upanishad and the Garbha Samskara tradition represent a sophisticated science of human development that was nearly lost to history, its erasure a consequence of

⁴⁷ Nithyananda Paramashivam, “Secrets of Powerfulness – Grow Beyond Lust, Addiction, Teenage Violence, Confusion,” YouTube video, July 31, 2017, <https://www.youtube.com/watch?v=iahH46687uo>.

colonial domination, medical imperialism, and the systematic devaluation of women's traditional knowledge. However, this knowledge persists—in Sanskrit texts, in the memories of traditional practitioners, in the revelations accessed through consciousness by beings like SPH, and in the living results visible in those few families who have maintained these practices.

The evidence, both traditional and contemporary, suggests that prenatal consciousness and development are far more complex and consequential than reductionist biomedical models acknowledge. Fetuses are not passive, unconscious organisms simply following genetic programs but aware beings, responsive to their environment, capable of learning, and profoundly influenced by maternal consciousness, emotional states, and intentional practices.

The queen who raised enlightened children through the systematic application of Garbha Samskara principles demonstrates what is possible—not as mythology but as documented achievement, replicable by those willing to engage with the same dedication and conscious intentionality. Her story serves not to create unrealistic expectations but to expand our sense of human possibility, challenging the assumption that our current level of human consciousness and capacity represents a fixed ceiling.

For contemporary women, the real challenge is finding ways to access and live out this knowledge within the pace and pressures of modern life. This means making traditional wisdom easier to learn through education and translation, creating

social and economic support so pregnant women can sustain spiritual practice, and rebuilding community support systems that once came from extended families. It also involves adopting these practices thoughtfully, so they remain true to their core principles while aligning with today's realities, investing in research to document their benefits, and encouraging medical systems to recognize and respect the value of traditional approaches.

More broadly, the recovery of Garbha Samskara represents a necessary correction to centuries of colonial knowledge suppression. It calls us to recognize that indigenous and traditional knowledge systems constitute legitimate, valuable science, often more sophisticated in certain dimensions than Western alternatives. It demands epistemic humility from Western-trained professionals and institutions, acknowledgment that their frameworks may be limited or distorted.

For women specifically, reclaiming traditional prenatal knowledge is an act of resistance against the medicalization and depersonalization of pregnancy, an insistence on autonomy and authority over our own reproductive experiences. It is recognition that our bodies carry wisdom, that our ancestors' knowledge matters, and that we have the right and capacity to shape our children's development through conscious practice.

The path forward requires both recovery and innovation, the faithful preservation of essential knowledge, and creative adaptation to new contexts. It requires building bridges between

traditional wisdom and contemporary science, not to validate one through the other but to allow each to inform and enrich the other. It requires global cooperation as different indigenous traditions share their own forms of pregnancy wisdom, finding common principles while respecting unique expressions.

Most fundamentally, it requires a shift in consciousness—from viewing pregnancy as a medical condition requiring management to recognizing it as a sacred opportunity for conscious participation in the emergence of new life. It requires understanding that those nine months of gestation are not merely waiting time before "real" life begins, but a crucial formative period when foundations are established that will influence an entire lifetime and potentially generations to follow.

As we face unprecedented challenges—environmental crisis, mental health epidemics, disconnection from meaning and purpose—we need every tool available to enhance human consciousness and capacity. The revival of Garbha Samskara offers such a tool, tested by millennia of practice, validated by emerging science, and waiting to be reclaimed by those courageous enough to trust in ancient wisdom while adapting it for contemporary needs.

The future of human flourishing may depend on our willingness to learn from the past, to restore what was lost, and to ensure that future generations have access to the full inheritance of human knowledge about how to support consciousness in manifesting its highest potential from the very beginning of embodied life.

REFERENCES

- Chamberlain, David B. *The Mind of Your Newborn Baby*. 3rd ed. Berkeley, CA: North Atlantic Books, 1998.
- Davis, Elysia P., and Curt A. Sandman. "The Timing of Prenatal Exposure to Maternal Cortisol and Psychosocial Stress Is Associated with Human Infant Cognitive Development." *Child Development* 81, no. 1 (2010): 131–48. <https://doi.org/10.1111/j.1467-8624.2009.01385.x>.
- Davis-Floyd, Robbie. *Birth as an American Rite of Passage*. 2nd ed. Berkeley: University of California Press, 2003.
- DeCasper, Anthony J., and William P. Fifer. "Of Human Bonding: Newborns Prefer Their Mothers' Voices." *Science* 208, no. 4448 (1980): 1174–76. <https://doi.org/10.1126/science.7375928>.
- Duncan, Larissa G., and Nancy Bardacke. "Mindfulness-Based Childbirth and Parenting Education: Promoting Family Mindfulness during the Perinatal Period." *Journal of Child and Family Studies* 19, no. 2 (2010): 190–202. <https://doi.org/10.1007/s10826-009-9313-7>.
- eNpregnancyCare. "Experiences Jagatpreeti Australia." YouTube video, March 14, 2014. <https://youtu.be/B-S-a3v4CyI>.

———. “Why eN – Pregnancy Care.” YouTube video, January 3, 2014. <https://youtu.be/cbqoMTYMsyo>.

Gluckman, Peter D., and Mark A. Hanson. *Developmental Origins of Health and Disease*. Cambridge: Cambridge University Press, 2006.

Graven, Stanley N., and Joy V. Browne. “Sensory Development in the Fetus, Neonate, and Infant: Introduction and Overview.” *Newborn and Infant Nursing Reviews* 8, no. 4 (2008): 169–72. <https://doi.org/10.1053/j.nainr.2008.10.007>.

Gujarati, Jasmine, and Ritesh Gujarati. “Garbha Samskara: Prenatal Education Concepts, Practice and Prospects.” *Journal of Ayurveda and Holistic Medicine* 2, no. 1 (2014): 40–46.

Harding, Sandra. “Rethinking Standpoint Epistemology: What Is ‘Strong Objectivity’?” In *Feminist Epistemologies*, edited by Linda Alcoff and Elizabeth Potter, 49–82. New York: Routledge, 1993.

Hathaway, Bill. “Mid-Pregnancy May Be Defining Period for Human Brain.” *Yale News*, October 4, 2021. <https://news.yale.edu/2021/10/04/mid-pregnancy-may-be-defining-period-human-brain>.

Huotilainen, Minna, and Simo Pakarinen. “Music Perception in the Human Brain: Learning and Individual Differences.” *Annals of the New York Academy of Sciences* 1423, no. 1 (2018): 104–12. <https://doi.org/10.1111/nyas.13655>.

Jha, Kushboo, K. Bharathi, and Sonu. “Garbhasanskara: A Miracle to Woman.” *Ayushdhara* 8, no. 2 (2011): 3178–84. <https://doi.org/10.47070/ayushdhara.v8i2.715>.

KAILASA’s eN-Pregnancy Care. “A Pediatrician’s Experience with eN Pregnancy Care.” YouTube video, July 16, 2020. https://youtu.be/_YTXXOvXxsg.

———. “Chant Your Way To Discover Your True Nature- Mantra Pushpam.” YouTube video, July 15, 2020. <https://youtu.be/LL992N5hZEc>.

———. “Miracles Experienced While Conducting Delivery of eN-Pregnancy Care Mothers.” YouTube video, June 23, 2018. <https://www.youtube.com/watch?v=8p5X8CrkGPc>.

Kwon, Rachel, Kelly Kasper, Sue London, and David M. Haas. “A Systematic Review: The Effects of Yoga on Pregnancy.” *European Journal of Obstetrics & Gynecology and Reproductive Biology* 250 (2020): 171–77. <https://doi.org/10.1016/j.ejogrb.2020.03.044>.

Lal, Maneesha. “The Politics of Gender and Medicine in Colonial India: The Countess of Dufferin’s Fund, 1885–1888.” *Bulletin of the History of Medicine* 68, no. 1 (1994): 29–66. <https://www.jstor.org/stable/44451545>.

McCarty, William A. “Infant and Early Childhood Communications: Exploring the Foundations of Knowing.” In *The Embodied Mind: Understanding the Mysteries of Cellular Memory, Consciousness, and Our Bodies*, edited by Thomas R. Verny, 89–124. New York: Pegasus Books, 2021.

Meloni, Maurizio, and Ruth Müller. “Transgenerational Epigenetic Inheritance and Social Responsibility: Perspectives from the Social Sciences.” *Environmental Epigenetics* 4, no. 2 (2018): 1–10. <https://doi.org/10.1093/eep/dvy019>.

Mukharji, Projit Bihari. *Nationalizing the Body: The Medical Market, Print and Dakitari Medicine*. London: Anthem Press, 2011.

- Paramashivam, Nithyananda. "Akashic Readings: Death 1." YouTube video, September 27, 2012. <https://youtu.be/nPIFdHlgofc>.
- . "This Ancient Powder Heals Teeth, Gums & Gut." YouTube video, September 16, 2025. https://youtu.be/dexj_fIG358.
- . "The Cosmic Womb: How Your Soul Grows in Silence." YouTube video, September 25, 2025. https://youtu.be/ZIJM_8fAB9c.
- . "Guidelines to Husband and Wife before the eN-Pregnancy Program." YouTube video, August 21, 2020. <https://www.youtube.com/watch?v=s-65YkD7CCK>.
- . "How to Access Akashic Records." YouTube video, October 8, 2023. <https://youtu.be/zKJjOpmfp4Q>.
- . "How You Cognize You Comes from Mother." YouTube video, May 12, 2023. <https://www.youtube.com/shorts/VsJJRgPCgDg>.
- . "How the Institution of Marriage Affects the Length Breadth & Depth of a Person?" YouTube video, July 2, 2019. <https://youtu.be/pLUm3cLx24E>.
- . "The Human Brain Can Do This... If You Just Change Your Breathing." YouTube video, August 30, 2025. <https://www.youtube.com/shorts/XVfC-ZYePB8>.
- . "Nada Tattva – The Power of Sound!" YouTube video, January 26, 2020. <https://www.youtube.com/watch?v=cfvXFsgwAb4>.
- . "Nirvikalpa Samadhi is the Source of all Knowledge!" YouTube video, February 16, 2020. https://youtu.be/BaDG3w_nKiE.
- . "Nurturing Enlightenment: The Story of Queen Madalasa." YouTube video, December 16, 2024. <https://youtu.be/4oSyM3MYPfs>.
- . "Open the Door and Let the Breeze Enter | Part 28." YouTube video, January 26, 2026. https://youtu.be/QL_tsc7pDIY.
- . "Putra Kameshti Yaga: Hindu Science of Bearing Divine Children." YouTube video, October 23, 2017. <https://youtu.be/98kfWkv1u4k>.
- . "Secrets of Conscious Birth with Bhagawan Sri Nithyananda Paramashivam 1." YouTube video, August 3, 2020. <https://www.youtube.com/watch?v=ra6kUsutJl4>.
- . "Secrets of Powerfulness – Grow Beyond Lust, Addiction, Teenage Violence, Confusion." YouTube video, July 31, 2017. <https://www.youtube.com/watch?v=iahH46687uo>.
- . "Sound of Prana: The Subtlest Mantra Versus Mantra Chanting." YouTube video, August 14, 2008. <https://www.youtube.com/watch?v=WqZJKynQWzo>.
- . "Sure Ways to Weight Loss | Patanjali Yoga Sutras 137." YouTube video, March 24, 2011. https://www.youtube.com/watch?v=kfUbG3o3_NY.
- . "Trinetra Kumbhaka – Breathing Technique to Attain the State, Space, & Powers of Mahadeva." YouTube video, April 23, 2018. https://www.youtube.com/watch?v=G_9a9ozgrZk.

———. “What Is the DNA of Enlightenment.” YouTube video, May 13, 2014. <https://youtu.be/ovg9zEOafvo>.

———. “Your Body’s Silent Language: The Cosmos Responds.” YouTube video, September 29, 2025. <https://www.youtube.com/watch?v=QHgvKivNGLU>.

Sharma, Pankaj, Suhas Kumar Shetty, Sanyogeeta A. Dixit, Vaishnavi G. Kulkarni, and Shedbale Susmita Devagonda. “A Comparative Exploration of Garbhopanishad in the Purview of the Brihatrayee: A Review.” *International Journal of Research in Ayurveda and Pharmacy* 15, no. 5 (2024): 155–61. <https://doi.org/10.7897/2277-4343>.

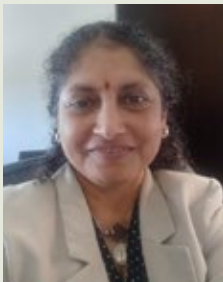
Smith, Linda Tuhiwai. *Decolonizing Methodologies: Research and Indigenous Peoples*. 2nd ed. London: Zed Books, 2012.

Wilson, Shawn. *Research Is Ceremony: Indigenous Research Methods*. Halifax, NS: Fernwood Publishing, 2008.

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