

# USING BOWEN THERAPY TO IMPROVE STAFF HEALTH

## BOWEN THERAPY.

This interesting therapy is very much a modern discovery. The technique was developed by Tom Bowen (1916-1982) in Geelong Victoria. After serving in World War II he became interested in healing and noticed that certain moves on the body had profound effects. While working as an industrial chemist Bowen developed his technique independent of any medical or other modality training. He stated his work was 'simply a gift from God'. He developed his gift into a system of using thumbs and fingers to make gentle but precise movements over specific points in the body.

In 1975 the Victorian Government inquiry into alternative health care studied his practice and verified that Bowen was seeing 13,000 patients a year. Because of systematic pauses between moves he was able to work on many patients at the same time. During his career Tom taught only a few therapists. In 1974 he met Oswald Rentsch, an osteopath and natural therapist who studied with him for 2 ½ years. Over this time Rentsch and his wife Elaine documented Bowen's technique, as he himself did not work from notes, charts or manuals. Bowen had requested that his technique not be taught until his death. The first seminar was held in 1986 and since then has spread to 16 countries. Teacher training commenced in 1992 and advanced training has been available since 1998. While a broad range of moves is available to address a wide range of problems there are many more moves still to be incorporated into the teaching regime.

## HOW IT WORKS.

As with many other complementary therapies the exact mechanism of action is unknown. Tom Bowen never wrote anything about his work or left any explanation as to why it worked so well. Several theories exist as to the technique's actions.

Rentsch explains that a balance and stimulation of energy occurs, resulting in a deep relaxation. The healing process begins once the body is relaxed. The Bowen moves are a system of gentle but precise mobilisations applied over muscles, tendons, nerves and fascia. The moves are performed using thumbs and fingers in a rolling motion. Moves are made over the sites of Golgi and spindle cell receptors (Rousselot,2000). These receptors are stimulated during the moves and change the stimulus received by the nervous system. Moves around joints stimulate proprioceptors, which transmit to the central nervous system. The slower vibrations over nociceptors may mimic the healing phase of the body giving profound relief of pain. Rousselot indicates Bowen most important effect is to catalyse a shift in the autonomic nervous system from sympathetic to parasympathetic dominance. This shift releases stress at a deep level. He also states that Bowen technique relaxes fascia, triggers segmental viscerosomatic spinal reflexes, clears trigger points, stimulates acupuncture points and meridians and regulates the lymphatic system by stimulating neuro lymphatic points.

## RESEARCH.

Studies are just starting to emerge about the efficacy and action of this technique. Whittaker and Marlow have found that Bowen Therapy has a positive effect on fibromyalgia patients. Another study by Whitaker, Gilliam and Seba demonstrated that Bowen Technique affects the autonomic nervous system by shifts in Heart Rate Variability, also giving considerable relief in fibromyalgia. Pritchard showed that Bowen Technique reduced subjects' level of anxiety and enhanced their positive feelings. Bauman assessed the effect of TMJ treatment on masseter tension with 1/3 of patients experiencing significant improvement in symptom relief. Kinnear and Baker demonstrated an increase in range of movement in chronic shoulder pain and shoulder stiffness after treatment. Lund found a profound benefit in the treatment of Lymphodema using Bowen Therapy. Data from Crean has demonstrated efficacy of the treatment through case study and comparison data collection while Biroac has found Bowen Technique effective in the treatment of Restless Leg Syndrome. Figov has encouraging results from a pilot study using Bowen on patients with Blepharospasm. Norman studied the overall efficacy of the therapy from practitioner and patients point of view. While Tom Bowen himself had an efficacy rate of 88%, Norman found similar results. Practitioners reported >80% efficacy while patients rated the efficacy from 77-100%. A National Survey of Bowen Therapists in 1999 found that >80% of problems were relieved in 1-4 treatments.

## CONTRAINDICATIONS.

There are no contraindications for use but one move is avoided on patients in pregnancy

## APPLICATION.

Bowen technique can be used for a wide range of conditions as it works to stimulate the body to heal itself. Application is beneficial for, but not limited to acute pain states. It will not interfere with any other medical treatment. As it is gentle, it can be safely used in acute pain, pregnancy, for the elderly and newborns.

Conditions that patients have found relief from is endless but include:

ankle sprains, arthritis, bedwetting, breast tenderness, lactation, engorgement, PMT, carpal tunnel syndrome, RSI, chest pain, chronic pain syndrome, coccyx pain, fibromyalgia, hamstring pain, knee pain, migraine, back pain, colic, pelvic imbalances, rotator cuff problems, sciatica, hammer toes, hallux valgus, plantar fasciitis, shin splints, stress, TMJ pain, overcrowding of teeth, asthma and infertility. Chronic disease sufferers with conditions such as multiple sclerosis, Parkinsons and Chronic Fatigue Syndrome have reported symptom relief.

## POST TREATMENT INSTRUCTIONS.

Patients are instructed to increase their water intake post treatment to aid lymphatic drainage and excretion of toxins. To support the new body movement patterns patients are advised not to stand or sit for longer than 1 hour on the day of treatment, to avoid body contact sports or vigorous exercise. Other forms of bodywork are contraindicated 5 days before or after treatment and return visits are 5-10 days apart, although often 1 treatment is sufficient to correct a problem. Some treatments require follow up exercises to be performed.

## BOWEN 'ON THE RUN' IMPROVES STAFF HEALTH.

Working in the Community Health setting the author gave many of the staff brief Bowen interventions for minor ailments. 21 staff at Byron Bay and Mullumbimby Community Health were known to have received Bowen Therapy from 1 of 2 Bowen Therapists on staff in the past 12 months. These were largely once off sessions performed 'on the run'. These staff were surveyed by questionnaire.

18 staff responded to a questionnaire -a response rate of 86%

Problems treated were:-

|                     |   |
|---------------------|---|
| Headache            | 4 |
| Shoulder pain       | 6 |
| Back pain           | 6 |
| Respiratory problem | 1 |
| Sore neck           | 5 |
| Stress              | 5 |
| Ankle pain          | 1 |
| Other               | 1 |

Staff were asked if treatment improved their ability to work that day.

|        |    |     |
|--------|----|-----|
| Yes    | 14 | 78% |
| No     | 1  | 6%  |
| Unsure | 3  | 18% |

Did the treatment provide significant relief?

|                   |    |     |
|-------------------|----|-----|
| Short term relief | 6  | 89% |
| Long term relief  | 10 | 56% |
| No relief         | 2  | 12% |

It is to be noted that this efficacy rate of 89% compares favourable with Tom Bowen's own results and those confirmed by Norman's research and the national Practitioner survey of 1999.

All respondents said they would accept a Bowen treatment at work for a similar or other problem.

Some of the comments received were: "surprised that so little movements provided such relief", "kept me at work -without treatment may have gone off on sick leave", "saved a workers comp. claim", "I was surprised how effective it was". One staff member who felt on the edge of a 'mini' collapse wrote "the lightness in my back and limbs was amazing. I felt like I could leap and recalled this is how I felt in my 20s -I am now 42- so a great outcome for me was to have my body NOT collapse and to experience a 'flashback' of how a well maintained healthy me could feel". This was astounding feedback from brief treatments that in many cases took about 7 minutes.

## BODY AND SOUL PROJECT

The encouraging results of this survey led to a proposal to commence a Health Promotion project for staff. This was called BODY & SOUL. The program was widely advertised and any staff working for the Byron Bay and Mullumbimby Health Service were invited to book in for treatments. Two therapists worked out of the physiotherapy room from 8-8.30am Monday to Friday. The program started on December 11<sup>th</sup> 2000 and ran for 6 weeks. The project was run as a formal health promotion project with the objective of lowering staff stress levels. however it was also hoped that some physical problems would also be alleviated during the treatment process.

Staff were asked to fill out a questionnaire detailing any health problems and a self evaluation of where they felt their stress levels were on a scale of 1-10. Treatments were offered weekly. At each presentation staff were asked to evaluate the effects of the last treatment.

Over the 6 weeks there were 30 staff treated with 90 treatments being given. Some people had 1 treatment, some had 6. The minimum number of people being treated a day was 1 and maximum was 6. Treatment times were strictly adhered to because of the physiotherapists needing the room straight after the session. Treatments took 20 - 30minutes. Clothing was not required to be removed which was useful to hospital staff who were often being released in working time. Other staff came before work or on their days off.

Again the program was enthusiastically received with the majority of staff members reporting a beneficial effect of some sort. It has certainly got some Health Managers thinking about the benefits of a staff program such as this as staff are feeling valued and happier.

Evaluation surveys are now being written up and returned.

There is plenty of anecdotal evidence to prove that this project was a success. One staff member who rated himself with a stress level of 10 out of 10 felt that the treatment reduced his stress level to zero - a fact happily noticed by work colleagues! Most staff reported a marked drop in their stress levels and an improvement in their physical problem. As an aging work force there were plenty of physical problems reported that were not being actively treated. Comments received during the course of the 6 week program and in the early survey returns were evangelistic in their praise of how personal stress levels had dropped. Most staff felt the program to be a great morale booster and a team building exercise. The benefits of quiet reflective time and non sexual touch are an area that warrants more thought. While the program was a big commitment for the 2 Bowen Therapists, both felt incredibly energised after each session and well prepared for the day ahead.

## WHAT NOW?

Where to from here? Once the evaluation of the Body and Soul project has been completed, a long term program should be considered.

This is quite a cheap program to run, able to treat several people at a time, needing only beds and a therapist, but producing maximum results. It could be a significant tool in keeping an aging health workforce on it's feet. One does not have to have a physical problem to enjoy the benefits as has been clearly demonstrated by this project.

## VISION FOR THE FUTURE.

Bowen Therapy is cheap to learn and cheap to administer. You can do no harm with Bowen, everybody can benefit from it and anyone can learn it. What a powerful therapy to teach to people in countries with few resources. What a wonderful tool to work with when treating the elderly and chronically ill. What a help for parents to keep their children healthy. What a simple way to aid in stress management. With the

health sector employing an aging workforce and the recruitment and retention of nurses being a current major issue, a staff support program of Bowen Therapy may be an imaginative way to prevent burnout and energise staff. This sort of program could also be taken into the corporate sector as an occupational health initiative.

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