Homoeopathy & Bowen

by Simone Guest SRN MCCH MARH MBTER

The spur to writing this article was attending a meeting with some 25 homeopaths recently. I volunteered to be a guinea pig in an audience participation exercise exploring homeopathy and the treatment of asthma. When my turn came to speak, I said that my first line of treatment would be to use the Bowen Technique because it has such a good success rate. Presented with someone with asthma, I would use Bowen for the first two or three sessions and watch what happened. Then I would add homeopathy (if necessary and, yes, it can be IF!).

The "if" seemed to take the audience by surprise! During the lunch break, three homeopaths approached me to ask for more details. I left out some leaflets concerning Bowen – and all these were taken. I then realised that there is a great deal of interest in the Bowen Technique among homeopaths yet little knowledge which seems a pity when the two therapies are very compatible, either in tandem or given at separate sessions.

My Introduction to the Bowen Technique

Homeopathic training completed, I was starting to practise and seeing some patients with musculo-skeletal pain which did not always respond to homeopathy. There is a growing awareness amongst some experienced homeopaths that homeopathy does not always have all the answers, that sometimes other things are necessary. Indeed, Hahnemann wrote in The Organon of the need for good diet, exercise, massage and baths. Here I must emphasise, however, that Bowen is not a form of massage.

With my own experiences of acute and severe back pain for which I sought and gained relief from physical treatment, I wanted to be able to offer other sufferers of musculo-skeletal pain rapid and effective relief. I began to wonder what hands-on therapy could be learned reasonably quickly and remembered hearing about the Bowen Technique, which I started to follow up.

Investigation revealed that the Bowen Technique is gentle, non-invasive, effective and holistic. Just as has been accepted by some homeopaths that homeopathy and flower essences combine well, so homeopathy with Bowen can work very well. Bowen also uses the principle "less is more" and has been likened to "physical homeopathy" – minimal hands-on contact and the effect can be profound. The training consists of five modules (14 days in all) and can be completed within a year. Treatment is suitable for all ages and most conditions. It has the advantage of usually being done through light clothing.

Treatment is also largely straightforward and practical. If working homeopathically, an appropriate remedy, potency and frequency of repetition has to be chosen. If choosing to work with Bowen, the treatment options are weighed up from the history and observation and sometimes palpation. The patient is often surprised that so little is done, that it is pleasant to experience and usually yields positive results. The may make Bowen sound simple and boring to do. Rest assured that it is fascinating and can be complex!

While it's easy to think that Bowen is only useful for musculo-skeletal symptoms, it is a wonderful therapy for almost any condition: physical or emotional and any age. Therapists running children's clinics report favourable results with conditions such as cerebral palsy, dyspraxia, ADHD and autism. Studies of asthma, frozen shoulder and migraine have shown Bowen to give very good results.

What is the Bowen Technique?

The Bowen "move" looks so simple to watch but it does take a while to learn. Using something called "skin slack", "rolling moves" – using fingers and thumbs at specific – are made over muscles, tendons and ligaments. Each move causes a slight disturbance within the body tissues, thus starting a cascade healing response. The moves are generally given in certain sequences. No massage or hard tissue manipulation is used. It dies not force but offers the body a chance to realign itself/sort itself out/mend.

During the first days of the Bowen training, the first "moves" that we had to learn were demonstrated on a student volunteer. What followed was memorable. After a few moves around her shoulders, the volunteer became tearful. At the time, this didn't register with me at all: I simply thought that she must be overtired or upset about something. She was taken care of and the training session continued. I'll return to this incident later.

Tom Bowen

At this point it may be relevant to know a little about Tom Bowen after whom the technique is named. He was born in 1916 to English parents who emigrated to Australia. He enjoyed the outdoor life and participated in many sports - cricket, swimming and, later in his life, bowls.

Tom was never medically trained or qualified but was a friend of Ernie Saunders, a well-known bodyworker. He also learned from other therapists and from books. He had great perception and a real gift and started to

develop his own technique. Tom worked at Geelong Cement Works in the 1950s and '60s. Many of the workers there had musculo-skeletal problems and he began to help them. He set up a clinic which he ran from a friend's house in the evenings after he had finished work. Because of his lack of qualifications, he couldn't advertise but news of his successful treatments spread quite quickly. Tom eventually stopped daytime work and concentrated on his clinic. He treated all kinds of conditions. It was remarkable that many people only needed to come for treatment a couple of times.

It was established in the early 1970s that Tom, aided by an assistant, was doing an estimated 280 treatments a week (13,000 per year). 80% of these were first or second treatments.

Tom taught his methods to six men (his assistants) over the span of his therapeutic work. He developed and hones his techniques over the years, as most practitioners do, and therefore each of the men Tom taught learned his work from a slightly different viewpoint and at a different stage in Tom's career. Following his death in the 1980s, each of these men has continued Tom's work in a different way. It continues to be developed by others, which explains why internationally there are various approaches using the Bowen Technique.

Working at Skin Level

Important factors in working at skin level (even with a clothed patient) are that the skin is the largest organ of the body and also the largest sensory organ. Skin is richly endowed with nerves and blood; nerves fire the endocrine system and blood is the endocrine transport system. Deane Juhan's intriguing in-depth book, Job's Body, a Handbook for Bodywork, explains the embryonic tie between the central nervous system and the skin which we develop from three embryonic layers of cells. Endoderm develops into internal organs. Mesoderm develops into connective tissue' the bones and skeletal muscle. Ectoderm develops into skin and the nervous system. The building blocks for skin and brain are integral at that early stage of development. Juhan continues by saving that the most superficial and the deepest parts of us spring from the same tissue and further on he states that:

"...it is the chemical and sensory make-up of the skin which provides the 'template' for the connections and reflex patterns within the brain, not the other way around."

After some illumination regarding the importance of a mother's touch, he continues:

"By virtue of the skin's close association with the central nervous system, this cutaneous stimulation is literally awakening organic functions in the newborn's internal organs."

Fascia runs throughout the body providing a connecting web for every part and aspect of our being. Superficial fascia lies just beneath the skin. It connects skin to adjacent parts, helps movement of the skin and is a slithery medium interlaced with nerves and blood vessels. Deep fascia is inelastic and forms sheaths for muscles (and gives them a broad area for attachment to bone surfaces). It helps the muscles in their action by the amount of tension and pressure they exert on their surfaces. There is no divide between superficial and deep fascia. It's like a spiders' web – one string affects the whole structure. An event in one part is noticed by the whole.

Bowen moves create a slight disturbance of the body tissues which trigger the healing response, allowing the body the opportunity to realign and rebalance. Often, patients will experience, for example, a tingling sensation or a feeling of warmth in a part of their body that may or may not have been treated. It can be as extreme as work on the head resulting in sensations in the feet! Seemingly unrelated areas are demonstrably intimately connected.

Emotions and Feelings

Our emotions and feelings cause chemical reactions. Candace Pert's book The Molecules of Emotion goes into this in detail. Take a very basic example. Sudden fear or shock will cause the adrenal glands to release adrenaline which then has its well-known effects for "fight" or "flight". All emotions are felt somewhere physically (even though we may not be aware of it) and body tissues memorise their effects.

To return to the weeping student who was demonstrated on, her shoulders clearly "held" emotions which were touched upon during the gentle Bowen moves performed that first morning.

Many of us are unaware of where we physically hold our tensions/emotions. However, during a course of treatment, we may become conscious of tender or painful areas and our emotional and physical memory can be awakened. Over a span of treatment, an arm can become troublesome and then a long-forgotten accident is recalled, for example a childhood accident falling out of a tree or off a bike. We can also become more in touch with our emotions. There is the opportunity to treat emotional issues which may become apparent, with homeopathy alongside Bowen. It goes without saying that this can benefit the physical symptoms as well.

You may ask why Bowen is necessary if homeopathy can resolve the emotional aspects with the knock-on of also resolving the physical ones. My answer to that is that people come for physical treatment usually not realising that their emotions may be involved. Treating with Bowen initially gives the practitioner the chance to assess the physical and emotional content/possible causes. Homeopathic treatment can be suggested which the time seems right. Meanwhile Bowen has generally already started a healing process. If the patient declines homeopathic treatment (rare in my experience), Bowen alone can still work wonderfully at an emotional level. This approach could be viewed as a tandem bicycle ridden by either two people or only one person. The bike will probably get there with only one but it may be harder work, especially on hilly terrain!

What People Can Expect

When people book for Bowen Therapy, they need to think in terms of having three treatments at weekly or two-weekly intervals to give themselves and the treatment the best chance. During treatment, changes in muscle alignment may be observed by the practitioner and sometimes felt by the patient. A state of deep relaxation in the patient is very common. Signs of improvement are often noticed following the first treatment. However, sometimes long-standing and deep-seated symptoms may require further sessions before improvement is experienced.

Following taking a case history, the patient is asked to lie on the couch and made comfortable. Few Bowen moves are made at a time. The patients is then left covered for approximately two minutes between each sequence to allow their body to register the treatment. These breaks are very important. They can be lengthened as necessary when it is essential to lengthen them.

Very unwell or depleted patients need minimal treatment - possibly only two or four moves in total - with long breaks between

Depending upon circumstances, the practitioner usually leaves the room during breaks or sits quietly to allow the patient to rest peacefully.

Immediate responses to treatment vary enormously. Here are some:

- Warmth
- Tingling
- Twitching
- Reddening of the skin visible during treatment (even though the touch is gentle)
- Emotional release
- Perspiration
- Great relaxation (even to the point of sleep)

That evening and/or the next day the patient may feel more tired than usual.

Following treatment, the person is asked to drink plenty of water, for example 2-3 pints daily long term, is usual for most people. If we become dehydrated, it is much harder for all the chemical processes and detoxification to take place. Just increasing the water intake of a virtual non-water-drinker can make quite a difference to their health. Tea and coffee are diuretics so minimising these is important.

Among other post-treatment requirements, avoiding strenuous exercise is recommended for four days or so. If people feel much better, they are warned not to overdo things – it can be very tempting to try to do the things that their symptoms have formerly prevented them from doing. Most Bowen practitioners give their patients a printed post-treatment sheet to persuade them to take responsibility for their aftercare.

It is widely accepted among Bowen therapists that 80% of those seen gain positive results. Some of the 80% will be startling results and some will need further treatment. Chronic illness and maintaining causes may make this necessary. However, even in these instances, if benefit results from the first three treatments a person may opt to continue treatment at more widely spaced intervals enabling them to keep their symptoms more manageable.

Many people have regular top-ups every eight to twelve weeks; some come just twice a year. They report suffering fewer colds and feeling generally better more of the time.

Pain obliges people to find a therapy to relieve it. As with my own experience of acute back pain, people often want physical therapy for "structural" pain. The first three appointments for Bowen treatment are usually given at on- or two-weekly intervals. People understand that quite frequent treatment is the best thing at the outset, especially if the "three treatments and then let's see" framework is put to them.

Also, there can be occasions when a homeopath feels that something other than a remedy is needed and Bowen fills this need admirably. The two therapies work very well together.

Case taking is different for the two therapies and can be achieved at separate sessions. Sometimes, enough information is gleaned while taking a case history for Bowen for a homeopathic first aid remedy (mental or physical) to be given alongside Bowen. Bowen case-taking concerns mainly the physical aspects of a person. However, I find that in listening to what people say, an insight into their mental state can be gained. Some non-homeopathically trained practitioners use flower essences for the mental aspects of healing (as do some homeopaths). Each

practitioner needs to find their own way to deciding what is best for the patient seated before them. That includes whether to see them for separate Bowen and homeopathy sessions or whether to combine sessions on occasions.

I find the Bowen Technique a joy to use and never cease to be amazed at what it can achieve. When I started training, I had no idea that it can be as broad and deep in its effects as homeopathy. Together homeopathy and Bowen are a wonderful double act.

About the author: Simone graduated from the Contemporary College of Homeopathy in 1999 following a four-year part-time course. After a post-graduate year, Simone trained in the Bowen Technique with the European College of Bowen Studies, completing in July 2001. She practices in Wellington, Somerset using homeopathy and the Bowen Technique. Simone is a member of the Bowen Therapists' European Register (BTER).

References

Baker, J (1998) European College of Bowen Studies Manual, Somerset, UK; ECBS Blakey, W (1994) Stretching without Pain, Stafford, Twin Eagles Education & Healing Institute in association with Bibliotek books Juhan, D (1987) Job's Body; a Handbook for Bodywork, NY: Barrytown/Station Hill Press Inc Pert, CB (1997) Molecules of Emotion, UK: Simon & Schuster