



# CORE CURRICULUM FOR THE BOWEN TECHNIQUE

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*The Bowen Technique is a light touch therapy with gentle moves applied with the fingers and thumbs over soft tissue areas of the body. It is non-invasive and can be used to treat people from neonates to the elderly. Indeed, the Bowen Technique can be used to treat a wide variety of conditions.*

*Bowen therapists, unless specifically qualified to do so, do not diagnose conditions, nor do they prescribe or advise patients to alter medication.*

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The objective of this Core Curriculum is to lay down some recognised standards and subjects for Bowen teachers. This will ensure that trained therapists offer treatment of an appropriate standard so that members of the public, who seek a treatment in the Bowen Technique, receive a treatment they recognise and not a hybrid version which could be the subject of disagreement and dispute. This is a Core Curriculum for the regulated therapy.

This Bowen Core Curriculum has been developed with information and advice from Bowen training establishments in the UK and based on the Bowen National Occupational Standards (NOS).

The document is split into two main sections. The first lists the key generic skills required of any complementary practitioner in a regulated environment and the second lists the key Bowen skills required to practice in the UK. These sections are cross referenced with the relevant competencies in the Bowen National Occupational Standards.

This is meant to be a concise guide for trainers, students, reviewers, examiners and practitioners in the regulated environment.

At the end of this document there are some references to websites and documents for more detailed study. And, although not included here, the teaching materials provided by the Bowen schools in the UK are invaluable.

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## INTRODUCTION TO BOWEN NATIONAL OCCUPATIONAL STANDARDS

NOS are statements of the skills, knowledge and understanding that define the outcomes of competent performance according to the Qualifications and Curriculum Authority (QCA). They are national standards that reflect good practice.

Bowen NOS highlights areas of expertise and will lead to a consistent approach to the training of Bowen Technique. The Bowen National Occupational Standards will also give a framework to interpret the core curriculum through a portfolio of evidence. Mapping the NOS to the core curriculum will lead to national recognition and the safeguarding of the Bowen Technique Training.

There are currently five mandatory standards that need to be completed by each student to achieve registration and national recognition through accreditation. These are BH 1 – 5, plus the Health and Safety standard HSC 32. Evidence for recognition will be compiled to demonstrate the experience gained through Performance Criteria (PC) that reflects *what the student can do*. And through underpinning Knowledge Specifications (KS) that reflects *what the student should know*.

Methods of collecting evidence for the portfolio can be through various means such as:

- **Direct observation** from an assessor.
- **Work product**. For example: referral form, record of assessment plan or record of treatment.
- **Witness statement**. For example: a record from a trained person who has observed the student during working practice
- **Self reflective account**. For example: a student's own written interpretation of the work carried out.

- **Simulation.** For example: a simulated situation observed by an assessor when there has been no opportunity to observe a real work carried out on a client.

The five mandatory standards cross referenced in this document are:

**BH 1 - Evaluate and process requests for Bowen health care**

**BH 2 - Assess the client**

**BH 3 - Plan the Bowen treatment programme with the client**

**BH 4 - Treat the client**

**BH 5 - Evaluate the effectiveness of the Bowen treatment**

and

**HSC 32 - Promote, monitor and maintain health safety and security in the working environment**

The full Bowen NOS document can be found by searching under 'Bowen' at [www.ukstandards.org.uk](http://www.ukstandards.org.uk) and should be available at all Bowen training courses.

## **KEY GENERIC SKILLS**

### ***Anatomy & Physiology***

In most training establishments Anatomy and Physiology are pre-requisites to practising rather than pre-requisites for undertaking training. However, it makes sense to have undertaken A&P training before or during training to be a Bowen therapist.

As an integral part of Bowen treatment A&P is essential to the understanding of the following bodily systems:

- |                           |            |
|---------------------------|------------|
| • <b>Circulatory</b>      | <b>BH2</b> |
| • <b>Immune</b>           | <b>BH3</b> |
| • <b>Musculo-Skeletal</b> | <b>BH4</b> |
| ○ <b>Skeleton</b>         | <b>BH5</b> |
| ○ <b>Organs</b>           |            |
| ○ <b>Muscles</b>          |            |
| • <b>Respiratory</b>      |            |
| • <b>Nervous System</b>   |            |

- **Gastro-intestinal Tract (digestive system)**
- **Renal/Urinary System**

## ***Communication***

Assimilating communication skills is vital for all practitioners. A student will need to demonstrate awareness of various methods of communication as well as barriers to communication. Including:

- **Body Language**
  - **Listening skills**
  - **Facial expressions**
  - **Movement**
- **Verbal Communication**
  - **Appropriate language – no jargon, colloquialisms**
  - **Clear speech – neither aggressive no familiar**
- **Written Communication**
  - **Clear and easy to understand**
  - **Factual and concise**
  - **Avoid colloquialisms, spelling errors, poor grammar**

***BH1***

## ***Confidentiality***

It is essential that practitioners observe the Data Protection Act just as is expected of any professional. Often, Bowen therapists are recommended by word of mouth (family and friends, for instance). This does not give a therapist licence to discuss, share or reveal personal details of clients - whoever they may be - or under any circumstances, except to other health care professionals in accordance with Health Services guidance and with the client's written permission.

Those practitioners who intend working with children and vulnerable adults must familiarise themselves with the code of practise and regulations specific to these clients; this is vital not only for the protection of children and vulnerable adults but also for protection of practitioners themselves.

***BH1***

## ***Health & Safety***

Health and safety awareness is required to demonstrate awareness of safe practices, including

- **Body Posture**
- **Equipment Safety**
- **First Aid**
- **Infection Control**
- **Safe Working Practices**

***BH1***

## *Legislation*

An understanding of current legislation will protect both clients and practitioner, including

- **Anti-discriminatory Practices**
- **Data Protection Act** - see Confidentiality section above.
- **Diversity, Equality and Rights**
- **Health and Safety Legislation**
- **Professional Ethics**
- **The Human Rights Act**

*BH1*

## *Professional Standards*

The need for keeping to professional standards in both dealing with clients, potential clients and fellow therapists should be emphasised throughout the training. Included would be cleanliness, avoidance of cross infection, comfort during treatment, an understanding of health and safety requirements when dealing with members of the public and the need for professional boundaries.

*BH1 - 5*

## *Record Keeping*

Keeping and referencing relevant records of client information and practitioner treatment is essential. From the initial completion of a client record and through all treatments clearly documented records are essential to maintaining a trusting relationship between client and practitioner, to being able to choose the right treatment on subsequent visits. In the unlikely event of a dispute, appropriate records enables the key parties to be clear what treatment was undertaken and how the client said they responded, including what recommendations were made in terms of after care or referral to another appropriate medical practitioner or hospital.

However the records are kept, either on paper or on computer, the practitioner should always remember that confidentiality is paramount and, if in doubt, refer to the Data Protection Act.

*BH1 - 5*

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## **BOWEN TECHNIQUE SPECIFIC SKILLS**

The number of hours required to cover the Bowen curriculum will depend upon whether the teaching is of students new to Bowen or CPD courses. The hours recommended below are for students new to Bowen.

The minimum classroom hours to cover the Bowen curriculum for new students should be 128 hours to include revision days and exams. In addition at least ten case studies should be reviewed to an acceptable standard covering three treatments as a minimum per client.

Training hours can be broken up as follows:

- **Face to face teaching** - 112 hours, including minimum 14 days in classroom (8 hour days) plus two days of revision, making 128 hours in all.
- **Private study for students** – should be around 40 hours
- **Tutorial/supported study hours** – via email and telephone and varies from student to student
- **Practical sessions** – at least 30 hours of case studies, plus their hands on practice which should be in excess of another 100 hours

## **Key Features**

There are a number of key features of the Bowen Technique which characterise a treatment.

### ***The Move***

A typical Bowen move consists of placing the hands on the body, taking skin slack, applying varying and appropriate amounts of light pressure for a few seconds to the client's comfort whilst 'challenging' the tissue and then making a rolling type move. These moves are performed at key points in the body and are made over muscles, tendons, joints, ligaments, fascia or nerves.

**BH3  
BH4**

### ***The Bowen Technique is Gentle***

The Bowen Technique involves no forceful manipulation of the body. Most Bowen moves use light pressure that is relaxing and pleasant to receive. No Bowen moves or procedures should result in lasting discomfort. Only in rare situations might a slightly stronger pressure be used during a procedure. However, this is always negotiated with the client. Reactions to the treatment, such as mild muscle stiffness are not uncommon but should normally last no more than 48 hours after a treatment. The client can be advised of this to avoid undue concern.

**BH4  
BH5**

### ***Stoppers and Holding Points***

Stoppers are moves that contain and amplify the effect of Bowen work in areas of the body that need attention. Holding points divert or maintain energetic

impulses created by the move and enable the practitioner to feel responses as they work.

**BH3**  
**BH4**

### ***The Breaks***

The ‘Two Minute Break’ between sets of moves is a key feature of the Bowen Technique. After a certain number of moves, the therapist allows the body a period of time, usually a minimum of two minutes, to allow the body to make adjustments by absorbing, assimilating and taking on board the moves. Usually the therapist will leave the room to allow the changes to take place without distraction.

**BH3**  
**BH4**

### ***Clothing***

It is a key feature of the Bowen Technique that it can be administered through light clothing so clients do not have to remove clothes. However, it is usual during training that demonstrations and practical work are performed on skin wherever possible, so that students can understand the effect of the treatment they are giving. Clients may be asked to remove clothing to their own comfort; however, they should not be required to undress.

**BH2**

### ***Using Other Therapies***

Clinical experience suggests that other therapies can interfere with the way the body responds to Bowen. Therapists may feel it is appropriate to advise clients to allow at least 5-7 days between different forms of therapeutic bodywork treatment to allow the body to take on the work and completely assimilate the information the treatment has provided.

**BH2**

### ***The Basic Remedial Moves***

Sometimes referred to as BRMs 1, 2 and 3 or Pages 1, 2, 3 these ‘procedures’ or sets of moves provide the base work and some pre-requisites for some of the specific Bowen procedures.

### ***Specific Procedures that address the following areas and systems of the body***

They should include:

~Anatomy addressed in A&P training

- ~Common conditions addressed by the procedure; both chronic and acute
- ~Remedies associated with treatment
- ~Practical application
- ~Reasons for the moves
- ~Advice on avoiding 'over-treatment'

**BH3**  
**BH4**  
**BH5**

**The following are names of procedures, not conditions to be treated:**

- Ankle
- Chest and Breast area
- Coccyx
- Cranium
- Elbow and forearm
- Hamstrings
- Kidneys
- Knee
- Liver and Gall Bladder
- Lymphatic procedures
- Pelvis
- Respiratory and Diaphragm
- Sacrum
- Shoulder
- Thoracic cavity
- Upper respiratory tract and temporo-mandibular joints (TMJ).

Training will also be given on how to treat babies and children, and how to address specific conditions such as bedwetting, bursitis and fertility problems. Different methods for treating people on a treatment couch, a bed, and in a chair will be covered as appropriate.

**BH2**  
**BH3**

### ***Case Studies***

At least 10 Case Studies should be completed to a satisfactory level to demonstrate a competent, professional approach and a good understanding of the role of a Bowen Therapist. Case Studies of 5-10 days apart are recommended. A template is recommended although it is best that students design their own method of presenting their cases studies. Case studies should account for one third of all marks allocated in the final assessment, with the rest of the assessment comprising a written examination and practical examination.

**BH1 - 5**

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## REFERENCES

- [www.bowenforum.org.uk](http://www.bowenforum.org.uk)
- **Bowen National Occupational Standards in full:**  
[www.ukstandards.org.uk](http://www.ukstandards.org.uk)
- [www.lifelonglearninguk.org](http://www.lifelonglearninguk.org)
- **Witness:** [www.popan.org.uk](http://www.popan.org.uk)

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DRAFT