



# CORE CURRICULUM FOR THE BOWEN TECHNIQUE AND BOWEN THERAPY

---

Bowen Therapy is a holistic approach based on the work of the late Thomas Bowen that encourages the body to reset and heal itself. The treatment consists of a series of moves applied to specific areas of the body including muscles, tendons, ligaments, fascia, joints and nerves. The Bowen therapy is extremely gentle and is considered suitable for everyone from pregnant women to newborn babies, the frail and the elderly.

Bowen therapy involves no forceful manipulation, uses light pressure and is relaxing and pleasant to receive. By combining sets of moves both in placement and sequence, the practitioner is able to address the body as a whole and/or target a specific problem. It can assist recovery from many conditions, from traumatic injury to chronic illness, depending on the individual's capacity to recover health and vitality.

The calm, measured process of a treatment session fosters an opportunity for the release of pain and stress and enables the person to remember what it feels like to be relaxed and comfortable. The sense of more physical ease can be associated with regaining more emotional and mental wellbeing.

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

---

The objective of this Core Curriculum is to lay down some recognised standards and subjects for Bowen teachers, practitioners, therapists and students. 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 and Bowen Therapy, 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 prepared by Skills for Health, April 2009, specifically the following documents:

- Complementary and Natural Healthcare NOS Principles of Good Practice (CNHPPG)
- Complementary and Natural Healthcare NOS Explore and Establish the client's needs for complementary and natural healthcare (CNH1)
- Complementary and Natural Healthcare NOS Develop and agree plans for complementary and natural healthcare with clients (CNH2)
- Complementary and Natural Healthcare NOS Provide Bowen Therapy to clients (CNH5)

This document is divided into two main sections. The first lists the key generic skills required of any complementary practitioner in a regulated environment (CNHPPG, CNH1, CNH2) and the second lists the key Bowen skills required to practise in the UK (CNH5). 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. Users of this document will need to ensure that practice reflects up to date information and policies.

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 various Bowen schools in the UK are invaluable.

---

## CONTENTS

**Introduction to Bowen National Occupational Standards**  
**Key Generic Skills**  
**Bowen Technique Specific Skills**  
**References**

---

## INTRODUCTION TO BOWEN NATIONAL OCCUPATIONAL STANDARDS

National Occupational Standards (NOS) are statements of the skills, knowledge and understanding that define the outcomes of competent performance according to the UK Occupational Standards Board. They are national standards that reflect good practice.

Bowen NOS promote the expertise required and will lead to a consistent approach to the training of Bowen Technique. The Bowen National Occupational Standards also

provide a framework to interpret the core curriculum through a portfolio of evidence. Mapping the NOS to the core curriculum is intended to lead to national recognition and the safeguarding of the Bowen Technique and ensure high standards of 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 CNHPGP, CNH<sub>1</sub>, CNH<sub>2</sub>, CNH<sub>5</sub>, plus the Health and Safety standard HSC 32. Evidence for recognition will be compiled to demonstrate the experience gained through Performance Outcomes (PO) that reflects *what the student is able to do*. And through underpinning Knowledge Specifications (KS) that reflects *what the student needs to know and understand*.

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:

1. **Complementary and Natural Healthcare NOS Principles of Good Practice (CNHPGP)**
2. **Complementary and Natural Healthcare NOS Explore and Establish the client's needs for complementary and natural healthcare (CNH<sub>1</sub>)**
3. **Complementary and Natural Healthcare NOS Develop and agree plans for complementary and natural healthcare with clients (CNH<sub>2</sub>)**
4. **Complementary and Natural Healthcare NOS Provide Bowen Therapy to clients (CNH<sub>5</sub>)**
5. **HSC 32 - Promote, monitor and maintain health safety and security in the working environment**

The full Bowen NOS document can be found 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:

- **Circulatory**
- **Immune**
- **Musculo-Skeletal**
  - **Skeleton**
  - **Organs**
  - **Muscles**
- **Respiratory**
- **Nervous System**
- **Gastro-intestinal Tract (digestive system)**
- **Renal/Urinary System**

CNHPGP1, CNH1 K15, CNH5 23, 36 A-Q

## *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 nor too familiar**
- **Written Communication**
  - **Clear and easy to understand**
  - **Factual and concise**
  - **Avoid colloquialisms, spelling errors, poor grammar**

CNHPGP3, 6, 7 CNH1 K2, K6, K7, K16, 4 5 6 7 CNH2 5

## *Confidentiality*

It is essential that practitioners observe the Data Protection Act, 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 practice 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.

CNHPGP 2, 3, 4, 7, CNH1 K16, 10, CNH2 K11, 6

### *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**

HSC 32. CNH1 3

### *Legislation*

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

The current legislation is as follows:

- Equal Pay Act 1970
- Sex Discrimination Act 1975
- Race Relations Act 1976
- The Disability Discrimination Act 1995
- The Employment Equality (Sexual Orientation) Regulations 2003
- Employment Equality (Religion or Belief) Regulations 2003
- European Convention of Human Rights\*
- UN Convention on the Rights of the Child\*
- Data Protection Act 1998
- Health and Safety at Work Act 1974

It should be noted that at this time the Equality and Human Rights Bill is passing through Parliament with the latest reading having taken place in August this year, the Equality Act 2006 only set up and outlined the powers of the new Equality and Human Rights Commission

\*Both incorporated into domestic legislation depending of country of implementation

In addition the following polices should be followed:

- Equality and Human Rights to ensure anti discriminatory practices are adhered to
- Professional Ethics
- Protection of Children and Vulnerable Adults to ensure that those working with children and vulnerable adults have been appropriately vetted\*
- The Care Standards

\*the legislation covering this is based on the UN convention of the Rights of the Child but does differ from home nation to home nation

CNHPGP 2, 4, CNH1 K16, 10, CNH2 K11, 6

### *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.

HSC32, CNHPGP 4, 10 CNH1 K6, K9, 3,

### *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.

## **BOWEN TECHNIQUE SPECIFIC SKILLS**

The number of hours required to cover the Bowen curriculum will depend upon whether the teaching is to 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

The hours stated in relation to ‘teaching or training hours’ under current legislation (October 2009) is now referred to as ‘Learning Time’ which comprises:

- Structured learning eg classes, training sessions, coaching, seminars and tutorials
- Practical work in the workplace
- Information retrieval in learning resource centres, libraries or other locations, in other words undertaking research
- Expected private study and revision
- Work-based activities which lead to assessment
- Practice, gaining, applying and refining skills to achieve threshold level of competence
- Relevant ICT activities
- All forms of assessment
- Programme planning

- Educational support and mentoring

*It excludes learner initiated private study over and above that expected within the defined terms.*

## **Key Features**

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

CNH5 17 a - d

### ***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.

CNH5 17 a

### ***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.

CNH5 17 a, c, 20, 29

### ***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.

CNH5 23, 24

### ***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.

CNH5 17 b

### *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.

CNH5 17 d

### *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.

CNH5 16, 30

### *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'

**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

CNH1 K15, CNH5 14, 15, 18 , 19, 24, 30, 36

### ***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.

CNHPGP 9, CNH1 K8, K16, 9, 10

---

## **REFERENCES**

- The Bowen Forum [www.bowenforum.co.uk](http://www.bowenforum.co.uk)
- The Complementary and Natural Healthcare Council [www.cnhc.org.uk](http://www.cnhc.org.uk)

- The Prince's Foundation for Integrated Health [www.fih.org.uk](http://www.fih.org.uk)
- Bowen National Occupational Standards in full: [www.ukstandards.org.uk](http://www.ukstandards.org.uk)

7<sup>th</sup> October 2009

Ref: BF Bowen Core Curriculum - with NOS ref 11 Dec 2009 F