BOWEN ASSOCIATION UK





Summer 2017 – Issue 75



EVERY BODY IS BETTER WITH BOWEN

Editor's Column

As you can see from the front page, the AGM was a great success, enjoyed by all. Our first time in Glasgow, and a good turn out by the Scottish contingent, well done!

Throughout this newsletter, you'll see information from the AGM, and you can find more on our website in the Practitioners' areas.

Sadly, Isobel had to stand down due to poor health. We wish her well and a speedy recovery to good health. Taking her place, at very short notice to run the AGM was Vice-Chair Fiona Webb, who subsequently agreed to become the new Chair and continue Isobel's work.

You'll also notice a few new names on the Committee, which is great to see. All these changes added to the buzz at the AGM, and I foresee a good future and an injection of energy into making progress over the next few years.

We continued our new tradition of breaking into groups to discuss specific topics, and break the ground for this year's projects. I could hear lively debate and discussion on all the tables, and look forward to seeing the write ups for each topic.

It seems to me that we're standing at the beginning of a period of time that will define whether, in the UK, we get to become formally accepted within the NHS and medical world. It's definitely within our grasp and to achieve it in the next few years we have to ask ourselves each day, "what have I done today to make that happen?" – let me know what you have done, won't you?

Within the BA UK we have increasingly more members with experience working within the NHS and with Doctors. Across all the UK associations there is similar experience, and working together we can make good inroads into working with the medical profession in a complementary fashion.

To do this, we have to be seen to be professional and useful. We have to make it easy for the medical world to accept us, and in turn we have to understand how the doctors and NHS staff tick – what are their day-to-day concerns, how are they measured, how do they know they're doing a good job? Only when we all understand the answers to these questions, can we position ourselves to help them.

And I mean "help" them, not compete with them. If we do not show an interest in their world, and communicate in their words, then they will not show an interest in us.

So, make sure you know your medical terms, your anatomy and physiology, how to write to a doctor using those terms, how to show you're here to help relieve them of their stressors.

Newsletter Prize

The "contribution to the newsletter" prize for this edition will have a choice of:

- 1. Name Badge, or
- 2. Marketing Leaflets

Each worth about £10. If you haven't seen the name badge yet, here's an example.



Of course, you'll have your own name on the badge ☺

And finally...

The AGM generated a lot of enthusiasm in the way forward for the Association. With the new look committee in place, it's a great time to build on top of all the hard work from previous committees to get us to this place, and make a significant step towards being considered as the "Go To" therapy of choice.

But the Association needs you to get involved to make it happen. Let us know how you can help, and get involved in the projects.

Dave Riches

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Bowen Association Chair Report

Dear Members,

As announced, I have agreed to take over the position of Chair of the Bowen Association UK from Isobel Knight who has stood down. I thank Izzy for her hard work over the last year and wish her well.

I have been thinking about some of the attributes of a chair...and decided the two most important ones are "Balanced" and "Supportive." This is what I aim to be for all of you, as your Chair of BAUK.

I feel a huge sense of responsibility, and know I have the resources available to help move the Association onwards and upwards. As we know in our work as Bowen therapists, nothing happens in isolation. The synergistic effect of elements coming together to achieve more than they could separately is mirrored in our Association with a dedicated and highly motivated Committee working on your behalf.

I have inherited wonderful team players in Sheila, Rob, Marco, Veena, Camelia, Loraine, Angela and Dave, as well as recruiting Gillian, Paul and Shirley. I am particularly delighted and very grateful to Shirley, whose "In for a Penny, In for a Pound" attitude meant she joined the Committee and agreed to be my Vice Chair in one fell swoop! All contribute their enthusiasm and skills to help move the Association forward, both in their client work and their Committee work.

It doesn't stop at the Committee, of course all of you have your part to play every day in the work you do with your clients and in helping to promote the benefit of Bowen in so many ways - individually, in local talks, at national shows...

We had a wonderful Training Day & AGM at the Pond Hotel in Glasgow. Half the attendees were grateful Scots, relieved not to have to trek south across the border for once. But many trekked north too and were appreciative of the warm Scottish welcome, while much of England blistered in the heat! Inspirational talks by Dr Neil Milliken, Rosemary MacAllister and Ann Winter focussed a lot of thought on how to integrate Bowen with the NHS. Interestingly, Neil opened his presentation with the words that things will change when people vote with their feet - so our focus must be on the public above all else.

After the formal AGM proceedings, we had 4 break-out sessions, facilitated by Committee members. These looked at Values & Mission, Website, Research, and Marketing. The output from these was shared amongst the Committee in a meeting at the end of the day and a summary report written for each group. The Committee Project teams will be progressing these areas and we will let you know, either through the newsletter, or by direct email, where we want information or input from yourselves. There are other areas being looked at and we will keep you informed about these as well.

One area we definitely want your input is for more stories about your clients. EVERY SINGLE ONE OF YOU HAS A SUCCESS STORY!!!! Maybe it only involved one treatment. Maybe it was your own success story from receiving Bowen. Perhaps you just did a few moves for someone and hoped...and it worked! Articles can just be a paragraph, or more. There is no right or wrong here, only what worked for a fellow human being or an animal companion.

You will be aware that I have submitted several articles over the years and these all stem from reading another practitioner's article in the newsletter and Bowen Hands. When we share something, we give permission for others to share too, and in so doing, you help many more.

At Trevor Griffiths' training and the AGM the next day there was a real sense of positivity, enthusiasm and motivation. I feel Bowen is on the brink of a big step forward into the public domain and I look forward to helping BAUK lead the way.

Fiona Webb Chair of BA UK



Committee Report

This edition's report focuses mainly on the reports and activities from the AGM. But first, before we get on to those, an announcement:

David Driver – Retirement!

Yes, he is! and we wish him well. David has been the interface between the Association and Strategy Plus (website developers) for many years, providing them with all the updates you ask us to make in your personal details, adding new practitioners to the therapist list and providing new article updates to the website.

The Association has presented him with a specially engraved bottle of Scotch Whisky in grateful thanks for his work supporting our website and therefore us as members.

The interface work has temporarily passed to Sheila and Angela in the office, who will assess whether it fits with their work or whether we request a replacement for David.

Please join us in wishing David well in his retirement – I'm sure he won't need our help with his Whisky though ☺

AGM Committee Elections

At the AGM in June it was announced that Isobel Knight had stood down from the role of Chair of BAUK and from the Executive Committee. We all wish her well and thank her for her hard work, much of it behind the scenes, over the last year.

Fiona Webb was elected and, having been Vice-Chair to Isobel and also Acting Chair the past few weeks, has agreed, to take on the role of Chair with plans to continue for 2 years.

At the AGM, members also agreed to amend the Constitution to increase from 9 to 10 the number of Executive Committee members allowed. As a result, 3 new members have joined the Executive, filling an existing vacancy, the vacancy left by Isobel, and the additional space created by the increase. All other existing committee members were reelected having agreed to serve a further year. The committee members and their roles are shown below.

Treasurer's Report - Year Ended Dec 2016

The full report was presented to the AGM by Marco Ferro, on behalf of Rob Godfrey, who was unable to attend.

Summary points are:

1. Membership has increased the last 2 years and income from membership has therefore increased in line with this to just under £32k.

2. Reducing the number of prints of the magazine to 3 saved £900 last year. Website costs, approx. £2.2k pa, will be reviewed as part of the revamp project. Insurance costs are £500 lower as we were reimbursed an un-authorised direct debit to Aviva.

3. Net position is an increase in income after expenses of $\pounds 1.5k$.

"On a financial basis the Association is looking healthy and we hope the slowly increasing membership numbers will enable us to continue to grow and provide much needed resources to invest in promoting the Bowen Technique." Rob Godfrey.

Office Report

The full report was presented to the AGM by Fiona Webb, on behalf of Sheila Whyles, who was unable to attend.

The office covers many activities, below are the main ones:

- Handling public enquiries, complaints
- Day-to-day administration, twice-yearly renewals process
- Merchandise
- Maintaining database, updates
- Arrange assessment of courses for CPD
- Prepare AGM reports, paperwork
- Validation of members for CNHC membership
- FREE Press release writing service
- Website checking service for ASA compliance

Complaints - there have been a couple of issues to handle this year, the moral of which is "do not put yourself in a position that could be misunderstood"! How you are perceived is often an issue, rather than any intent you might have had. Always notify your insurance company if you think there might be a complaint against you and keep the office informed.

Personal details - please ensure the office has your most up-to-date contact details and also that these are shown correctly on your own and the BAUK website.

Vision & Mission Statement

Dave Riches, Fiona Webb

While not a specifically designated project prior to the AGM such as the ones below, this was chosen specifically because we felt it important to start the process to capture these as an association. Clear and agreed vision and mission statements are essential for any organization to provide unanimity of purpose to itself and imbue its members with a sense of belonging and identity.

Vision and mission statements guide strategy development, help communicate the organization's purpose to the public and its members, and provide a way to determine whether its progress is on track.

Companies such as the NHS or Insurance, for example, will check these statements to assess the professionalism of an organization that has approached them.

The discussion was structured around the following considerations:

- Vision a statement of how/what we would like to see in the world
- Mission how the BA UK will be perceived and be commonplace in this world
- Strategy what we will do to make that happen
- KPIs how we will know we are progressing/succeeding in doing so
- Values how we will behave
- Goals measurable goals to report progress on throughout the year and at each AGM.

The group produced useful ideas and general consensus on a number of the above; and was a great start to the work that needs to be done here. A survey will soon appear for members to conclude on this discussion, and the resulting statements will define the image and direction of the Association.

The projects below and any new ones will then have a common frame of reference to follow thus ensuring consistency of purpose throughout any work that we carry out as an association and individually.

We have created a survey to ask for your comments and agreement on the Vision & Mission statement. You can find it at the following link, and it will be open for a month but don't delay, answer now!

https://www.surveymonkey.co.uk/r/DSGS QCD

Website Project

Marco Ferro, Shirley Strickland, Fiona Webb

All the current documents within the website - public and members' pages - have been reviewed and a preliminary restructure of the site pages drafted. Fiona and Shirley have attended webinars on Search Engine Optimisation, Essential Ingredients for a Successful Website, and Contact/ Conversion Improvement to learn more about what to consider when creating a proposal for web design companies.

The way people search on the internet has changed over the last few years, for example many now search as they would speak, rather than using just key words - this must be accounted for in the content used. We have been requesting from clients and nonclients what phraseology they would use to search the internet for a specific problem/condition and also what they would want to see in a practitioner's biography.

Speed of download is very important - 3 years ago 8 seconds was considered ok, now it is only 3 seconds - primarily on phones. Videos and images slow downloads considerably.

The current website was assessed as "reasonably good for a 10-year-old site".

Project aims are to remain in the top 2 on searches, simplify the site, maintain administrative requirements, enhance the "Find a Therapist" search, be easy to navigate and encourage action. Testimonials & case studies help increase ranking so we need more of these, while being mindful of ASA requirements.

Discussion in the Website break-out group at the AGM produced some specific requirements and good ideas to consider. For instance, it was agreed that the website needs to be more concise to facilitate ease of use for both therapists and the public. Members area to be much easier to log in there is a concern many are not accessing the resources available to them.

Research Project

Gillian Rhodes, Paul Dunn

Research is essential to gain recognition within the health arena and the public. There is a need to explore potential research areas in more depth - e.g. identifying current health priorities, economic benefits and so on. In the long term the aim is to produce publishable studies, however, financial restraints, the time required and accessing academic institutions needed for ethical approval make this difficult.

In the breakout group at the AGM there was agreement that field studies should ensue and be disseminated in health-related publications and in the form of presentations to potential stakeholders. It was discussed that it would be beneficial if the whole Bowen community becomes involved in research on some level.

Points raised included:

- Gaining access to participants was identified as a barrier in research and support groups were suggested as a suitable avenue to gain access to suitable people.
- Treatment protocols need to be standardised across all therapists giving treatments. There was also discussion that standardised protocols, whilst more highly regarded in the research community, do not allow for individual needs and may not produce the most effective results for clients.
- There was consensus that objective outcome measures (quantitative research) are important to produce good quality research. Suggestions included the use of a goniometer to measure range

of movement, and ways to measure physiological changes were discussed, e.g. blood pressure, blood test and urine analysis. Pain assessment was identified as being subjective as there is no clinical assessment, therefore might not be the best outcome to measure. However, VAS (Visual Analogue Scale) scales have previously been used to measure pain in research. Measuring changes in the use of analgesics used by participants was also suggested. Qualitative and mixed methods were not discussed.

- The therapeutic relationship was discussed as an area which could influence treatment outcomes. This would vary between therapists and is a consideration when developing the methodology.
- The importance of having well-considered inclusion and exclusion criteria are important to ensure the reliability and validity of research and to minimise other factors that might affect treatment outcomes, e.g. compliance of doing exercises as part of aftercare, or co-occurring conditions that might affect outcomes.
- There will be practical challenges in conducting studies:
 - financial burden for therapists providing treatments - fund raising is needed, crowd funding was an idea and should be explored
 - ensuring standardisation in treatment application
 - time (1) for therapists, and especially (2) for the person writing up the study
- o data analysis (employing an analyst)

Marketing Project

Camelia Pop

There is some crossover here with the website project as this is our marketing/ promotional window. Testimonials are key ones from high-profile/celebrities are useful from a marketing perspective. Public ones are vital from an informative, connecting perspective. Marketing events can be done at an Association level, such as at the Back Pain Show in Birmingham in May, or at an individual/group level, as demonstrated by Catherine Hazeldine, Silvia Claudia Starczewski and Camelia Pop at the Om Yoga Show in Manchester in May.

Output from the break-out group at the AGM included the following points, ideas:

- Website & leaflets to have same design/ theme.
- Videos of celebrities/testimonials
- Produce short video about Bowen Therapy that can be used by members.
 - Can John Wilks' video be used by members in their marketing?
 - \circ $\;$ Tutorial of how to do a video
- Introduce Bowen day events with tasters, presentations.
- Blog on website; maintain presence on Facebook and Twitter.
- Investigate NHS Personal Health Budgets.

CPD - full Committee

As agreed at the 2016 AGM, CPD requirements are to be reviewed regularly and we are in early discussions to assess a couple more non-Bowtech courses to add to the list. Other aspects of CPD which were highlighted at the AGM will also be reviewed.

Renewing First Aid Certificate

Three years passes quickly; suddenly it is time to renew your First Aid Certificate. And of course, the first port of call is often one of the well-known providers, such as The St. John's Ambulance or Red Cross.

Sometimes though, distance can be an issue for people, as well as finding the time. The Bowen Association UK offers you an interesting and very affordable Online First Aid course to help you get your renewal done without having to find a course near you. This course is for first-aid renewal purposes only, so remember you must have done a 'hands-on' first aid course before.

'ProTrainings' is an international online course provider and members of The Bowen Association UK get a very special rate for its First Aid Plus Course – this is the course you may use for your First Aid Certificate renewal if you decide to try our online route. You will get 6 CPDs for updating, and we think you will agree that at only £14.95 plus VAT it is excellent value. You also get a comprehensive manual to download, a certificate, and discounts on other 'Protrainings' courses. And because the course runs online on a module basis, you can do it whenever suits you.

Here's a list of what is included in the course:

- Introductory First Aid Training
 - Fears of First Aid
 - Asking Permission to Help
 - o Scene Safety
 - Chain of Survival
 - o ABCD's
 - Initial Assessment
 - Stop Think Act
 - Infant Recovery Position
 - o Barriers
 - Face Shields
 - o Adult Bag Valve Mask (optional)
 - o First Aid Kit
- Cardiac Arrest
 - o Adult, Child, Infant CPR
 - Adult CPR Hand Over
 - Compression Only CPR
 - o AED
 - Heart Attack and Stroke
 - Heart Attack
 - o Stroke
- Choking Training
 - o Conscious Adult, Child, Infant Choking
 - Unconscious Adult, Child, Infant Choking
- Bleeding Control
 - Types of Bleeding
 - Serious Bleeding
 - o Plasters
 - Other Injuries
- Secondary Care Ongoing Assessments for Injury and Illness
 - Illness Assessment
 - o RICE
 - Adult Fractures
 - Paediatric Head Injury
 - Eye Injuries
 - o Spinal Injury
 - Anatomy of an Injury
 - o Allergies
 - o Burns

- Heat and Cold Emergencies
- o Shock
- o Dental Injuries
- o Diabetes
- o Asthma
- o Epilepsy
- Adult Seizures
- Febrile Convulsions
- Electrocution

Paul Dunn

Of course many will still prefer to renew their certificate at an 'in person' course, but if online appeals to you, all you need to do to access this deal and take the ProTrainings First Aid Plus course for your First Aid renewal, is go to <u>www.profa.co.uk</u> and register.

When you register, enter the "corporate discount code" which you can obtain by emailing us here at the office, <u>office@bowen-technique.co.uk</u>.

Bowen Association Executive

Fiona Webb Shirley Stricklan	- Chair d - Vice Chair,
	Website Project
Rob Godfrey	- Treasurer
Loraine Ireland	- Secretary
Sheila Whyles	- Arbitration and
	Complaints Officer
Veena Lidbetter	- AGM Coordinator
Marco Ferro	- Website Project
Camelia Pop	- Marketing Project
Gillian Rhodes	- Research Project

- Research Project

Lucky Prize Winner...

...is Alice Birt who will receive her prize very soon. Contribute an article to the next edition and you'll be in with the chance of winning.

Revision and Assessment

I attended Trevor Griffiths' Revision and Assessment Skills training the day before the AGM. This was normally a 2-day course and Trevor decided to focus on what he thought were the most important elements from which we would benefit in one day.

We started with standing observation assessments and then the Thomas and Patrick Tests on the couch for hip flexor restrictions. First for our attention was Psoas; Trevor showed a couple of variations for a tight psoas or a weak psoas. He talked about issues with the psoas likely being involved in many issues, but not necessarily the cause.

The next muscle for attention was Multifidus. Trevor talked about how this seemed to be implicated for many back issues. We felt for heat as we do for kidneys and treated these areas. I was particularly excited by what Trevor spoke about as it sounded the same theory as Jean-Luc Cornille talks about regarding lameness in horses - namely incorrect use of multifidus prevents the back working correctly, which inhibits the correct biomechanical movement in the horse. Jean-Luc attributes issues such as' kissing spines' and navicular disease to this situation. Trevor was pleased to hear about this as it endorsed his own findings.

We finished by reviewing the Respiratory procedure. Because we sit so much it may be the majority of people have a partial hiatal hernia, which can impact the vagus nerve and may be the cause of MANY issues for people. We learned a variation of the supine moves to help the body begin to resolve any problems attributable to a hiatal hernia.

Trevor encouraged us to be confident doing less by targeting key structural points within the body likely to be implicated in many issues. We didn't have a lot of work done so I was interested to see what I might notice in myself.

Having a couple of days with Shirley Strickland in Oban after the AGM meant I wasn't back into my normal routine straightaway. Reading in the B&B lounge on Sunday night I suddenly became aware of my big toes! "Hello, Toes" I thought in acknowledgement as they flexed up and down a couple of times then pressed into the carpet. Something felt nice in this and I was more aware of all my toes being flatter on the carpet.

The next morning as we walked into Oban I thought my back felt a little freer, though with a rucksack on I wasn't sure. In the evening, we climbed the steep ascent to McCaig's Tower and I became aware of my inner thigh muscles engaging, particularly my right leg, with a straighter knee action as I climbed. Returning home, I was aware of a deeper, more secure seat when riding and certain poses in yoga and pilates improved without practise!

I thoroughly recommend Trevor's course - it will hone your attention & assessment, while increasing your trust in the "Less Is More" principle. By addressing the areas we focused on, we may give the body even greater opportunities to address causal issues.

When riding my pony the last 4 weeks, as well as working on being very present with him, I have focussed on imagining our multifidus muscles working correctly. When treating him afterwards I send my intention to the multifidus as they are too deep to affect directly in an EMRT treatment.

Teddy and I had our first lesson in 10 weeks on 17th July, i.e. first time working in an arena, rather than hacking/schooling in a field. He amazed me and my trainer by maintaining a steady rhythm through the whole lesson in trot and canter, including over poles. This is a huge leap forward in our training. I believe Trevor, with humans, and Jean-Luc Cornille with horses, are really onto something regarding multifidus.

Fiona Webb, Hants

Meet the Committee

With all the changes in the committee roles and its members, we thought it a good idea to introduce them to you over the course of the next few editions. Up first are:

- Marco Ferro Website Project
- Shirley Strickland Vice Chair & Website Project

Marco Ferro

How long and where do you practise?

 I qualified in 2010 and have been practising for 7 years. I practise in Wivenhoe, a small village



near Colchester and Essex University.

What got you into Bowen?

• A chronic lower back (sacroiliac) pain for which I had years of chiropractic treatment with little success, until I discovered Bowen. Bowen finally resolved my problem, changing my life for the better in just a few weeks of treatment. I decided that Bowen was very, very special and I needed to train myself to help others with similar problems or conditions that conventional medicine was unable to address.

Best advice/tip you received about Bowen?

• "Trust your intuition" and "The body will tell you what it needs". I think you can guess that this advice could only have come from Nicola Hok, my exceptional tutor, with whom I trained in Hammersmith.

Best Bowen moment?

• Receiving a phone call from my ex-wife the day after I treated her for her painful shoulder. She was delighted to see that, for the first time in 6 months, she could finally lift her arm up to her ear. Before the treatment she could only abduct her arm to 90 degrees.

Favourite Bowen move?

• My favourite Bowen move is Prone Sacral, part of SBP2. I've had amazing results with this advanced yet simple procedure.

What's your wish for Bowen over next 10 years?

- I wish Bowen was better known to the public and routinely recommended by GPs. It might take a few more years but that day will come.
- I also wish that a celebrity with millions of followers would praise Bowen over the media channels, recommending the technique to everyone. This would give Bowen a massive popularity boost.

Shirley Strickland

How long, where do you practise?

• I qualified in 2009 and have been practising since then. Gosh, 8 years, how time flies when you are enjoying yourself. I practise from a



treatment room in my home in Caversham - the other side of the river from Reading in Berkshire.

What got you into Bowen?

- Having been a massage therapist for 3 years I was finding time and again that although I could get results, they didn't hold so I was looking for something more.
- I read an article about Bowen with animals and thought - if it can work on animals that have no pre-conceived ideas about what is happening then there must be something to this. And there was!

Best advice/tip you received about Bowen?

 'Less is more' - I'm still working on that one!

Best Bowen moment?

- So many to choose from that's what I love about Bowen! I think it has to be a fairly recent one though. Pat came to me after her niece had some treatment in Australia and wondered if it could help her.
- Pat had a stroke 9 years ago losing the use of her right arm and leg. Since then she has had extensive physiotherapy and more recently has been seeing a massage therapist weekly. She can walk with the aid of a 'buggy' and a brace but was desperate to be able to dorsiflex her foot.
- Pat reluctantly stopped her massage although she wasn't seeing much in the way of improvement there was always the possibility that it might happen the next time. Pat arrived for her 3rd Bowen session and excitedly showed me how she could not only raise and lower her foot but also drink out of her water bottle using her right arm - something she hasn't been able to do for 9 years.
- A testament to both Bowen and an amazing lady who has never given up hope.

Favourite Bowen move?

• It's got to be the Psoas move that Trevor Griffith covered during his inspiring AGM workshop. I have used it so many times since then with great results. Thank you, Trevor!

What's your wish for Bowen over next 10 years?

- I think it's probably the same as most Bowen therapists, that it will be accepted by GPs and the NHS. There are so many people out there that could benefit from Bowen if only they were given the chance. We, as therapists must find ways to make this happen.
- So, I guess my wish is for more people to train in this amazing therapy so they can add their voices to ours, because the louder we shout, the more chance we have of being heard.

Reflecting on the Back Pain show

I am sure you are wondering how things went at the Back Pain show in Birmingham on Friday and Saturday, 19th/20th May 2017, so here's a brief review.

It all began in October last year, when the Bowen Association UK office had a call from the Back Pain show organisers, inviting health professionals to take a stand at the St. Andrews Football Stadium in Birmingham.

The show was to be a 'one stop shop' focusing on Back pain and The Bowen Association UK Committee agreed to fund the $2 \ge 2$ mtr stand at just over £1000. In the new year, we invited Bowen Training UK and Helen Perkins, with her Bexter products to share the stand space and cost with us.

Our stand gave plenty of visual information on Bowen, with banners, leaflets, and Bexter colourful products. Helen Perkins and I were kept very busy sharing Bowen stories and information about the Bowen technique. There were few other 'hands on' therapies, only one each of osteopaths, shiatsu, yoga, sports massage, plus ourselves, all the other stands were what I call 'gadgets' Stands, back pain relief chairs, beds, pads to sit on, shoes to wear, bags to carry, basically a really good mixture but lots of high price items.

Bowen Association UK leaflets were distributed and as we had internet access, our Practitioner details were found on the Bowen Association UK website.

We were delighted to learn that visitors to our stand came from as far away as Hampshire, East Sussex, Dorset, throughout the midlands, Wales and Scotland and many of course from the Birmingham area. I hope some of you will have been contacted already.

The Bexters soda crystals and Bowtech Ease colourful packs and reasonable prices supplied by Helen attracted the public to our stand. Visitors were keen to understand how they could ease their back pain at home alongside their Bowen treatments.

We gave out Bowen training information to potential new students, including physios, occupational therapists, beauticians, massage therapists from all around the country, keen to extend their skills.



Bowtech trainer, Nickatie Dimarco came in each day to give a brilliant presentation to the public in one of the Theatres whilst we took email addresses of anyone interested in training, and the good news is that Nickatie is planning to put on a course in the Birmingham area. The Bowen Association thrives on new members and new students become new members. The more members we have the more we can spend on promoting Bowen to the public and bringing in business for our Full members.

We were really delighted with the level of interest in the Bowen Technique, and felt that this particular show had been very beneficial in getting the Bowen message out to those suffering back pain. By making new connections both with the public and professionals and by sharing the cost, the planning and the manning of the stand meant the return should be positive for all concerned. It was interesting to note that although we let all the BAUK members know about the show, there was only one Bowen Association practitioner who visited this free show. We would love to hear your comments on this.

Angela Cannon, BTAA BAUK Itec.CNHC

AGM Presentations

Challenges with Bowen and the NHS

Dr Neil Milliken gave a very insightful presentation into the world of the GP to help us understand their mindset. He is renewing his training as a GP, having focused on Bowen and other therapies for a number of years. Here are some key points:

- Doctors not open to alternative forms of healing, defending years of effort and energy training.
- They are not taught about the healing capacity of the body.
- Talk in their language scientific terms golgi cells, contra-indications - seduce into thinking same training as them. Not 'energy' but neural signals. Studied A&P "appropriate to my training."
- Doctors' first priority is to protect themselves, then patient. Fear delegation because of comeback.
- Speaking with Practise Nurses may be better approach.
- Before speaking with GPs engage with pre/anti natal clinics, district nurses, Patient Associations, Hospices, Elderly Day Care, Chronic Pain clinics, Mental Health Associations.
- Approach in person show share same values as Dr aim to share workload of healthcare, free up workload by taking stress patients, elderly, chronic pain etc.
- Understand what GP mind is, what their world is. Must be interested in THEM first. "How can I help you do your job better?" Share responsibility of care, rather than taking it from them.

• Can't change resistance by logic - have to go to emotional side of Dr.

Bowen Therapy for Children with Bowel Problems

Rosemary MacAllister was a nurse for 45 years before learning Bowen in retirement. She helped set up a project within occupational health in Lanarkshire, using Bowen to help people get back to work and children suffering from bowel issues.

NICE suggests that 30% of children suffer constipation. As well as the physical issues for the child, Rosemary highlighted the impact on the family - belief of being alone, a 'bad' parent, costs of disposable items, difficulty socialising, impact on work for appointments, lack of understanding by teachers. She took us through several case studies, with some wonderful testimonials from the children themselves.

A Retrospective View of Bowen Research in Lanarkshire

Ann Winter was an NHS nurse for over 30 years and worked with Rosemary at the OH Centre. She took us through the research findings of Bowen within the OH team, the structure of tests, data gathered and results presentation. It shows how a structured approach and accurate records are vital to demonstrating evidence of efficacy of Bowen Therapy.

Letters to the Editor

"Today is one of my happiest days, 'coz I've got a client - a lady in her mid-50s with a diagnose - "Frozen shoulder".

Don't know how she found me, but I assume - it's because of BAuk Official Webpage and your efforts to make me one of your Team.

She was in pain, so I did only BRM1 (1 and 2), BRM2 (1 to 8b) and "Shoulder". There were significant reactions - ticklings, spreading heat and sense of a "Heavy arm".

Shoulder exercises have been given accordingly and the charge was 50 pounds.

Now, 10 pounds I'm sending you via Post cheque - those are for BAuk and another 10 pounds for BABT (Bulgaria Bowen Association)

This is my way to say: "THANK YOU" to both Organizations, 'coz You have done a lot for me.

Sincerely

Petar Tenev"

CELEBRATING MY BOWEN HANDS AS AN AID TO CONCEPTION

October 2010 and now a qualified Bowen Therapist full of trepidation, equalled with wonderment with what I was about to embark upon, nestling my new learned array of skills the Bowen procedures at my fingertips, which may just be the answer to the prayers of the many who are suffering in one form or another either mentally or physically from acute and or chronic ailments.

On starting out with my new learned knowledge my precious tools; my hands and 10 fingers loaded to the max with BRM's etc. and raring to go, raring to go heal those in need of a helping hand ... A Bowen Hand! Sore backs, knees, shoulders, ankles, the various ailments as and when presented.

My first ever experience of someone to enquire if Bowen Therapy could help them with fertility issues came about following me treat the mother of the enquirer, she, the mother, had been asking me a lot of questions about Bowen and I was keen to convey and spread the word on the many health issues that Bowen may help with and fertility was one that I had mentioned based on my training and nothing more - I'd had no experience and if completely honest was somewhat uncertain about this particular prospect of Bowen Work.

I'd learned through Bowen training that the treatment of Bowen balanced the body and how the body's innate ability is evoked to which the various systems of the body function more efficiently as a response to this magnificent hands on stimuli. Therefore, where someone may have been having problems getting pregnant perhaps through some physical visceral abnormality or a mental block sometimes worrying, thinking too much about the situation ... people asking when you're going to have children feeling pressured can also upset the apple cart so to speak. And through balancing the body with Bowen work we may just ignite the body's own natural healing mechanism to regulate the body systems including the reproductive system and in turn aiding with fertility issues. At least this is how I understand it and relay it.

She was my first ever client who came for Bowen Therapy for to help solely with conception and much to my amazement after just two months of weekly treatments and stopping only for her to complete her monthly cycle. I was called 2 weeks after the completion of the 2nd month to hear from my client, saying she knew it was early days but her period hadn't come and she'd taken a test and it was positive!

I really don't know who was most over joyed the new mum to be or me - I was so pleased for the client as having worked with her for approximately two month we'd built an understanding, a rapport. I understood completely what this meant to her. Now I felt great, through my new skill, not only had I experienced helping a sore back, neck, knee, stress, fibromyalgia to mention but a few! But now an aid to increasing the chances of conception.

The early stages of my Bowen career the results to date now giving me more confidence in my field. Within a matter of a couple of weeks a friend of a friend of the girl who had got pregnant after her Bowen therapy had come to me for treatment, treatment again to help her get pregnant like the friend of her friend!

The power of Word of Mouth!

Each and every time I've had someone come along for this very purpose, to-date 85% have had a successful POSITIVE result.! I'm currently working on 2 girls and waiting patiently to hear from another who has just finished her second monthly session...that's how it works just like any problem we work on with any client we look forward to hearing they've got relief that they now feel much better.

It's great to hear things like...thank you I can go back to work, thank you my neck feels a lot better...but there is something extra special about when someone who has been trying for years calls to say thank you so much I'm going to be a mum!!!

The positive affect that a Bowen Therapy has on our bodies is evident when not only does it seem to aid with pain relief, relax the body calming the mind and increase fertility success rates as a result of relaxation, stimulation and peace of mind. Whatever the changes that take place albeit we may not be able to claim that it's actually the Bowen therapy that makes these changes, that result in pain relief or a positive result in a pregnancy test. Word gets around and we should all continue our work with the confidence that this is a unique and potent therapy that the clients themselves will recognise as an aid in helping them with their problems physical and mental... their opinions and referrals are what will bring Bowen therapy from strength to strength.

To date since commencing my career as a Bowen Therapist I've personally had 13 ladies come to me between the ages of 29 & 37 only two of which did not fall pregnant. These two ladies one brought her partner along for one visit the other never did although this is something that is encouraged from day one and again if they get to the third month and they have still not conceived I would try encourage that the partner come along for the latter month. This advice is given to every client when coming along for conception purposes however only 3 partners out of the 13 girls I've treated for this reason have come for therapy, but I will always suggest partners come along for a course as an option and before I had experienced my own clients getting a positive result I would refer to the fact that other Bowen therapist had experienced positive results as we would do with other health issues relay others stories until you have your own.

Also, when a client comes along for conception purposes and because we

initially advice they need to commit to a 3 month course if necessary. I always ensure they know what my normal fee is and that because of their commitment to the regular weekly therapy I am offering them a discount which makes it more affordable. Ideally paying up front one month at a time although I am personally not too strict with that policy.

And now I'm happy to report that I'm now able to quote that I have had clients come for this very reason and have fallen pregnant time and time again.

One client after the first month found herself pregnant, the majority within two month and a couple have completed the course of 3 month. And the word continues to spread and still I explain to every single client that there are never any guarantees however I talk to them about how Bowen has helped so many in their pursuit of health and if it can work for others there's no reason why it can't for them.

And may I add that although I've never participated in any official studies however as an observation from all the ladies that I've treated for conception purposes the only two who never actually fell pregnant were the only two who had previously had IVF. Whether this had any effect on the results there's no way of knowing without research and studies. I am currently treating a girl who has had a course of IUI earlier this year and I'm certainly staying positive and looking forward to a successful outcome as she and her partner have been all checked out at the fertility clinic and told that there's no reason why she shouldn't be able to conceive - she has just become a little despondent after trying for 3 years...so fingers crossed!!

But it does inspire me to encourage if someone is to try any aid to assist with fertility to try something more natural and less invasive first, like Bowen Therapy.

Alice Birt, Bristol



Bowen Therapy at the Om Yoga Show in Manchester

Bowen Therapy was present this May at one of the largest Yoga events in the world, at the Om Yoga Show & Body Mind Soul Experience in Manchester. It was our colleague Catherine Hazeldine's initiative, who decided to buy a stand and be there for the around ten thousands of visitors who would walk in for the 3 days event.

Then Catherine asked Silvia Claudia Starczewski and me to join her. It was a brilliant idea as we shared the price and at any moment there was one of us at the stand. You can imagine such a big show had many interesting stands and vegan food area and in the quieter times we could visit them relaxed as we knew that someone of us, a Bowen therapist is always at the stand.



Each of us had her own poster and fliers, designed with Canva or Vistaprint. I agree that Canva is the easiest to use design program in the world, and it's free to use.

Just click on canva.com and you'll be amazed.

The Bowen Association sent us 50 leaflets for each of us to support our exhibition and we gave them to people who weren't from the Manchester area. We've talked with people from all over the country, so again we raised the Bowen awareness. Also, many people asked info about training to be a Bowen therapist.

Some of the people passing the stand were so tired, they have seen hundreds of stands, did yoga workshops, overwhelmed with information. When asking Do you want to know about Bowen Therapy? I was not surprised to see many of them saying no. But the funny thing is that I recognised people who after a few minutes they came back to us open to hear what Bowen is. They were just too tired and said no, but in a few minutes it clicked in the brain why not?

When we had quieter times we also put a note with free Bowen testers and immediately we became so busy. Later we took it off; the day was too intense. So if you ever go to a show and it's not busy, just put a note with free testers, be prepared to do one – two moves on them and you become busy. We also asked them to fill in a form prior to perform on them.

Personally, I left there so enthusiastic, it was a great weekend, people usually interested on what is it, and I am confident I can go exhibit at any show now, but I will look also at smaller local shows as people are not that tired and overwhelmed.

If you want to know more details on our exhibition, how it looked with our leaflets, please feel free to call any of us. I can also tell you how I cured in less than 30 minutes my old fear of speaking in public, all with the help of a therapist at a neighbor stand (2)!

Camelia Pop, Manchester

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Send your articles to <u>dave.riches@bowen-technique.co.uk</u>

We are always eager to hear from you, for example interesting case studies, ways you have found to run your business, charity work you may be involved in, unusual circumstances you have done Bowen in, work on animals or children, events or shows you have been to – also please send in your pictures or post information on our Facebook site.

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