



Emma Linaker, Equine Bowen Therapist

As we ask for greater performance from our horses, so we are finding they need help to keep them as stress and injury-free as possible. Certified Equine Bowen Therapist (EBT), Emma Linaker, explains to Sally Taylor how this gentle technique can have remarkable results.

Emma is a qualified BHS instructor and has her own competition horses – eventers and show-jumpers. She is confident that the Bowen treatment she is qualified to administer is of benefit to all horses, driven or ridden, whether their work is competition or more leisure-based.

When I googled Equine Bowen Therapy I found the descriptions of what it involves somewhat woolly. Can you tell us more precisely what it entails?

EBT is a gentle, subtle and relaxing hands-on treatment. The therapist uses thumbs or fingers to make a series of precise, rolling-type moves over muscles, tendons and other soft tissue. There is no 'crack-crunch' and regardless of the problems presented we would always do a full body treatment as the site or manifestation of pain is not always where the problem is. Because EBT is a gentle treatment it is particularly suitable for nervous or sensitive horses.

Uniquely the treatment includes short rest breaks – these allow the horse's body to respond to the moves performed and they are also important because they give the body time to start make the subtle and fine adjustments brought about by the moves. The body is also kept focused on that area, helping it to start to re-balance and relieve tension.

The theory is that by keeping everything soft and free in this way, the horse is best able to work to its optimum. However, it is not massage therapy as a lot of people believe.

Is re-balancing and relieving tension essentially what Bowen seeks to do?

We are trying to make a difference to what is there. Like people, most horses carry areas of tension, stiffness or tightness which can create

soreness. It often occurs from compensating around a specific problem. The body always wants to go back to neutral, where it knows it should be, but sometimes it cannot free itself to do so. This is where EBT steps in. If all the soft tissue – tendons, ligaments, muscles – is pliant and flexible as it should be, the bones of the skeleton are better able to realign correctly so the body is more able to get back to neutral. EBT, therefore, comes from a different direction to therapies which attempt to settle things down by manipulating bones. The moves are never forced – they are only as big as the tightness will allow; if the area is very tight we would make a small move initially, waiting until it releases allowing further moves to be done.

I understand the technique began in Australia?

It did, with Tom Bowen in the 1970s. He did his

own type of treatment, initially on racehorses and greyhounds, which later became known as The Bowen Technique. He moved on to working with people too, treating a huge number and achieving notable success and recognition, including with disabled children.

How did you come to it?

I was always looking for something along the lines of physio/osteopathy, but wasn't sure which way to go. In my teaching, I could often see when a horse was struggling and even though I could locate a problem, I didn't know what to do to treat it. I stumbled across Bowen when someone used me as a case study while she was doing her human Bowen training. I was doing a lot of riding at the time, often on big horses, so had the usual odd ache and pain – nothing that I really recognised as a problem. However, the day after treatment, I realised how much better I felt, even though I hadn't thought anything was wrong before.

What is the training?

First you have to train as a human Bowen Practitioner and there are a few places where you can do this, notably the European College of Bowen Studies (ECBS). The course is modular and the training is very much hands-on practical as well as embracing theory. It includes doing two lots of ten case studies, in which you treat each person three times and then have to write up detailed case notes. When you have completed all the parts there is a written exam (requiring 75% or above to pass); it will have questions on anatomy and physiology among other topics as well as a practical test. Your final set of case studies is also part of the overall assessment.

The equine training follows on after the human qualification – The European School of

Above: Manipulating the neck area.

Below: Horses often reciprocate the attention they receive with a mutual massage session.



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Equine Bowen Therapy (ESEBT) is attached to the ECBS. You have to be able to give evidence of experience with horses before you will be accepted on the course, which then follows the same type of modular system. Again you have to do two lots of 10 case studies (three treatments per horse), but it is more involved because you have to look at the horse's conformation with before and after photos as well as writing up about the actual treatments. For two of your final case studies you have to treat both horse and rider. They can, after all, have a considerable effect on one another – a crooked rider makes a crooked saddle makes a crooked horse and vice versa. You need to treat both to address the problem.

The final examining body consists of a vet, a BHSI and Beth Darrall, head of the ESEBT, and the exam consists of a written paper and a practical. You have to assess a horse before going on to treat it and then you are asked to assess the static and dynamic conformation of two horses. Several assignments have to be done during the

course and the marks from these, as well as your second lot of 10 case studies, are also included in the final grade of pass you are given. It is very exacting – happily I was rewarded for my hard work by gaining a distinction.

Are there problems that respond particularly well to Bowen therapy?

It can be really good for a wide range of problems such as sore backs, tight hamstrings, muscle atrophy, loss of elevation and length of stride. Below is also a list of some of the benefits:

- Relieving tension and easing stiffness
- Alleviating pain with released endorphins (body's own morphine)
- Increasing blood circulation and distributing oxygen and nutrients
- Assisting lymphatic system
- Increasing range of efficiency of movement which enhances performance

If a horse has been labelled with a specific condition, we would not put that to one side, but by treating the animal as a whole, we may well come up against – and be able to rectify – other problems. So much is about compensation; take a horse that has a sore back – he will compensate to alleviate that pain so that the soreness is likely to spread to his quarters and he begins to get problems in the hamstrings too. He is still trying to push from behind, but can't because of the pain so he ends up pulling himself along which he is not built to do, so he becomes tight in the shoulders. This shows how problems can build and transfer. The longer the problem has been there the more he will have compensated and it can take some time to find the original soreness or injury.

It also works well as a preventative – if everything in the body is staying loose and soft and without tension, the likelihood of pulling a ligament or straining a muscle when under stress lessens. I treat a number of competition horses on a 'maintenance' regime to achieve

MEET THE CRAFTSMAN

this and also because they are expected to work at their optimum for more of the time.

How do you make a diagnosis or judge a horse's pain?

It is hard because, like us, they will have different pain levels – a quiet horse might not give as big a reaction as a more sensitive one. A human therapist will ask for pain levels on a 1-10 scale, known as markers, or there are specific conditions – frozen shoulder, tennis elbow, locked knee – which, even though they will still treat you as a whole, give them some ideas of where extra to work.

I will always ask to see the horse walked and trotted up initially, but then I have to start to check for areas of tension or soreness, of course discussing these with the owner. I often have to gauge more on his reaction to what I do – signals from his head, ears and eyes, whether he moves away or leans into me all help to build up a picture of how he is feeling – and to what I can feel under my fingers. The more you treat the more you know what you are looking for. It is hard to put into words, but what I want to achieve is the same 'soft' feeling right along the back and into the quarters.

A treatment will take 45 minutes to an hour and the first one is particularly important as



you are trying to gauge the horse's reactions to the treatment and the resulting endorphin release which can make him sleepy. During the treatment I make notes on a form where I find problems, which makes it easier at the end when discussing with the owner what I've found, and recommending a suitable work regime. The form is kept as a record for comparison on future treatment(s).

Above: Emma is looking for the same 'soft feeling' right along the back and into the quarters.

Below: Endorphins can make a horse sleepy.

Is it becoming more widely known?

Happily yes – if you say Equine Bowen Therapy to a vet they are beginning to say, 'Oh yes, I've heard good things about that' where sadly GPs in the main just don't want to know about it for people.

- Contact Emma on 01580 891776/ 07939 465608

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EBT FACT FILE

According to British Law it is an offence for any therapist or practitioner – EBT, physio, chiropractor, osteopath etc – to treat a horse without the permission of the owner's vet. This is usually given to the owner when they make a phone call to their surgery but it must be signed for as such on Emma's form on each horse she treats.

To train as an EBT, it is necessary first to qualify as a human Bowen Practitioner. Applicants for EBT must be able to show credentials of a level of aptitude in working with horses (for eg, BHS Stage I and II of ABRS Level I and II)

The only place linked to ECBS to gain the EBT qualification is at the European School of Equine Bowen Therapy which uses facilities at Hartpury. See link from www.equinebowentherapy.com.

When registered, therapists may use the letters MBTER (Equine) after their name. To remain on the register, two Continuous Professional Development (CPD) days must be completed per year as well as holding a first aid certificate and appropriate insurance.