



Rosen Method Bodywork

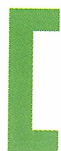
Study Points to Benefits of Integrative Program

BY MARACIE WILSON AND SYLVIA NOBLEMAN, WITH HELEN MORGAN

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osen Method bodywork was an integral component of a 12-week Executive Wellness pilot program conducted by Synergy, A Medical Fitness Center in California's Napa Valley, and its parent medical facility, Queen of the Valley Medical Center.

This article is based on a case study of the pilot program, with special reference to Rosen Method and its ability to promote transformations.



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WHAT IS ROSEN METHOD?

At the heart of Rosen Method is the belief that chronic muscle tension comes from the suppression of feelings. Practitioners are trained to develop a listening touch that bypasses the intellect and goes straight to the muscle tension. In a bodywork session, practitioners meet the tension with their hands and stay present, allowing for clients' long-held, unconscious feelings and memories to surface and release—for barriers to dissolve.

The work includes dialogue, which increases awareness of what is occurring. Awareness is the key to the process: helping people unlock and explore the unconscious allows them to become aware of choices they made early in life around which they have unconsciously shaped their lives. Through the Rosen Method, clients often discover more aliveness, new possibilities for freedom of movement, more authentic self-expression, and the ability to make new choices, as well as decreased pain, greater mobility, and easier breathing.

Marion Rosen, PT, one of the pioneers in the German tradition of psychosomatic healing, developed Rosen Method in the 1970s in Berkeley, California, and started her first school there. At age 96, Rosen still has a private practice and teaches Rosen Method around the world. This work, she says, is ultimately about transformation.

SPREADING WELLNESS

The Executive Wellness Pilot Program housed at Synergy was developed to monitor an integrative approach to achieving sustained changes in health and wellness, and was tested by objective and subjective outcome measurements. The program aimed to test the assumption that if the individual executive could experience a state of personal wellness and



Author Sylvia Nobleman practices Rosen Method's listening touch. Tom Scheibal photos.

optimum health as a result of program participation, he or she would be much more likely to support and endorse allocation of resources to an employee wellness program.¹ A review of the literature supports a strong associative relationship between the level of executive leadership support, the promotion of employee health initiatives, and the amount of employee engagement and positive outcomes.²

Increasingly, businesses are finding ways to encourage employee wellness through employee health promotion programs and policies. Such programs make good business sense because workers with healthy behaviors are, on average, more productive at work and incur lower health-care costs than workers with less healthy behaviors. This contributes to a more sustainable business model as less money is spent on unhealthy and underproductive employees.³

The pilot program was conducted in 2008 within Synergy's integrative wellness and medical fitness facility, which is a freestanding primary and secondary disease prevention service

center on the campus of its parent medical center, Queen of the Valley. Synergy's mission is to integrate medical fitness, primary and secondary disease prevention, complementary and alternative modalities, and rehabilitation programs into one facility. Queen of the Valley is part of a larger Catholic health-care system made up of 14 hospitals and health-care facilities throughout the region. Participants in the pilot group included nine executives from the sponsoring medical center and the local community who were randomly selected out of a larger pool of potential candidates.

Historically, primary prevention wellness programs have consisted of fitness and dietary support components. The success of these programs has been adequate; however the long-term sustainability of the results has been unsatisfactory. Individuals might participate and have the desired outcome of weight loss and improved functional capacity, but as the program concluded and time elapsed, weight was regained and continued exercise habits slowly dissolved.⁴

For the Synergy study, a more comprehensive approach was anticipated to achieve lasting results. Key components of the program were dietary counseling, stress mastery sessions, Rosen Method bodywork, massage, personal fitness training, wellness and health guidance coaching, and independent exercise. Also included in the 12-week experience was a membership to the medical fitness center. Health education classes, meditation, yoga, and many other group exercise classes were offered to participants. Each individual's experience and components were customized to their identified needs. Frequent support, coaching, and contact were maintained by the RN program coordinator to allow early identification of roadblocks to progress and for encouragement toward the individual's personal goals.

An integral part of this pilot program was a comprehensive health risk assessment (HRA) at the beginning and end of the program. The assessment included biometric measurements, blood pressure and resting heart rate, laboratory blood studies, and functional capacity measurement using the Duke Activity Status Index. The psychological assessment utilized the Beck Depression Index and the Beck Anxiety Inventory. Quality of life was evaluated using the Dartmouth COOP Charts.⁵ The purpose of the HRA process was to establish a baseline to measure improvements, also enabling identification of key issues of focus for the individual participant. The unique results of each participant guided the custom design of their 12-week wellness program.

ROSEN AND MORE

Understanding the benefits of the mind-body wellness approach of Rosen Method and integrating it into the mainstream healing work of the traditional health-care community has been a slow but steadily progressing journey at the Synergy facility. In

January 2007, as interest in the work grew, Rosen Method workshops were initiated on a bimonthly basis. Later, complimentary 15-minute sessions were also offered so that staff and members could experience a "taste" of the bodywork.

The nine participants in the Executive Wellness Pilot Program were offered biweekly Rosen Method sessions of 50–60 minutes in length during their 12-week program. Most of the participants had no previous knowledge of this discipline, however each was willing to try at least one session to evaluate its benefits. During the intake interview, the majority of the participants reported they had busy and/or stressful jobs. After their first Rosen Method session, the participants seemed to experience varying degrees of relaxation. For some, their diaphragms relaxed, and their color became rosier; there was a sense of inhabiting their bodies in a new and conscious way as they shared their feelings and thoughts during the sessions. Afterward, some participants seemed astonished by their unexpected experiences and had many questions. With other participants, muscle tension eased moderately, their breath deepened and slowed, and they reported feeling refreshed and more relaxed.

After the participants' initial session, four opted not to continue. This transformational work with its gentle touch does not, perhaps, suit everyone, or at least not at particular times in their lives. For instance, one of the participants presented with tension in his tensor fasciae latae, his hips, between his shoulder blades, his diaphragm, and his chest. When he completed the initial session, some general ease came into his body and he would occasionally allow himself to close his eyes. During the ensuing discussion, he said it wasn't a good idea for him to "melt his body armor" as he needed his competitive edge to do his

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work effectively. His final evaluation confirms this: "Rosen Method was not the type of recovery or healing I prefer for massage. I am more of the aggressive, deeper tissue massage-type."

In a Rosen session, people need to be willing to connect deeply with themselves and take responsibility for their own experience and healing. Rosen Method is not something that is "done" to people, nor is it a method for "fixing" people. Some people are in tune with the Rosen methodology and others may prefer different types of bodywork or massage. As a result, five of the nine participants reported a favorable initial experience with Rosen Method bodywork. The remaining participants elected to pursue traditional therapeutic massage during their program.

PARTICIPANT INTERVIEWS

Upon completion of the program, all participants were interviewed in an attempt to measure their satisfaction and recommendations for future program revisions. Evaluations by the Rosen Method practitioner and some of the participants are summarized below.

AN OASIS FROM THE GRIEF

At her first Rosen Method session, one 81-year-old participant in excellent health was fairly flexible from her hips to her feet. It was noted that her diaphragm and chest, particularly her heart area, was contracted. During her sessions, she talked about her husband's unexpected death the previous year and how difficult the suddenness of his passing had been for her. She did not speak at great length about it; in fact she and the practitioner had minimal dialogue, but gradually, after each of the four sessions, her diaphragm moved more, her sternum area and upper chest softened so that the movement of the breath could be felt in the upper regions of her lungs, and the intercostal muscles softened. After her sessions, she looked more relaxed, and in her concluding evaluation, she shared the

following: "I found your sessions very relaxing ... almost like a meditation. I did not have any previous body or mind complaints before the sessions, so I cannot judge it for its physical healing ... only that the overall effect of your warm, soft hands was like lying on a sunny beach with warm water flowing over my body ... very soothing. It is a bit like 'stop the world I want to get off' if only for an hour. I was, of course, dealing with deep grief as a result of my husband's sudden death a year before. I think that your hour gives grief-stricken people an oasis that is very beneficial. The entire pilot program should be advised for anyone who is grieving over a lost loved one ... every part of the program was beneficial."

"I BECAME CONSCIOUS"

Another program participant tilted somewhat forward as she seemingly ran to her appointments. She remarked that her pace was always like that because she had so much to do and never enough time to accomplish everything. Her whole body was tight like a metal coil, but the diaphragm and heart area seemed to call out the loudest for attention. Over the course of three sessions, as she expressed her thoughts and feelings in a full, unrestrained way, she shared that the heavy burden of responsibility she felt in her job and from her early family experiences seemed to weigh her down and to "run" her, and that she herself came last on the long to-do list. These challenging situations, past and present, didn't always coincide with the wishes of her heart.

This appeared to be a profound realization for her. As she became aware of the tight places in her body (ankles, legs, hips, lower back, chest, neck, and occiput), felt the subsequent release in many of those places, and simultaneously felt her breathing become deeper, she gained an increased sense of body awareness. She shared

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pilot program participant



the following: “The [Synergy Wellness Center] highly values the connection between body, mind, and spirit. The Rosen Method is an excellent tool to help achieve this goal. When I personally experienced [Rosen Method], I became conscious of areas of tension in my body that helped me to become aware of that connection within me.”

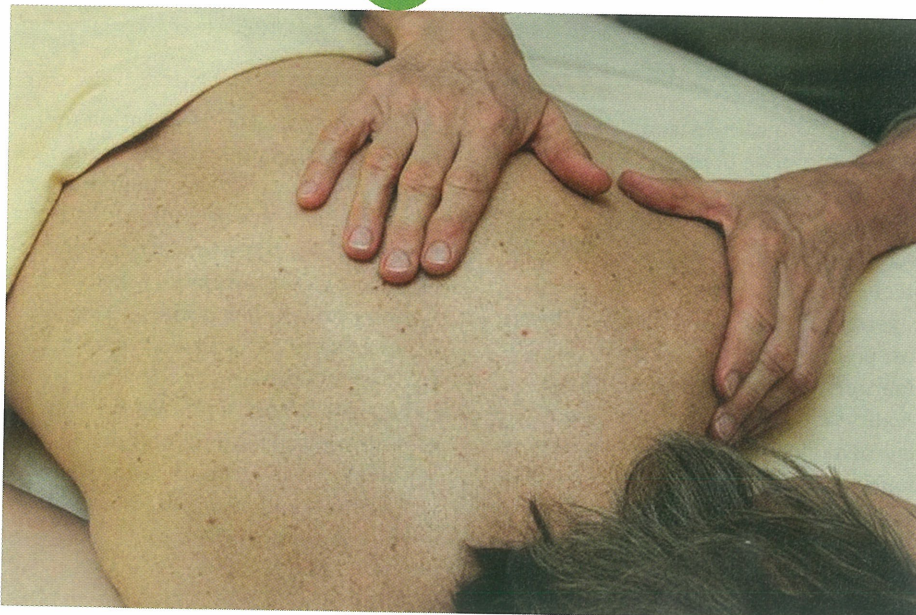
APPRECIATING THE BODY

Tight in her fasciae latae, gluteus muscles, sacrum, diaphragm, and behind her heart and chest, one participant spoke about the psychological traumas she had experienced. After her Rosen sessions, she often asked questions about the theory of Rosen Method, and if the body holds down past experiences that couldn't be handled at the time. After three sessions, her hips felt more pliable, her diaphragm started to let go, and at various times she would comment that she felt a loosening of her hips or legs or that she could breathe more easily.

Marion Rosen often says that the session begins when the client gets off the table, and this client is a good example of that. She gained important

insights after her sessions. In her evaluations, she said she had relied on her body to physically support her with little or no maintenance on her part. Her life had been full of traumatic emotional experiences and demanding situations. During the span of 56 years, she had always taken her physical health for granted. As a result of her Rosen Method experience, she came to understand and have a new appreciation for the strength of her body and a sense of needing to “repay” it for its support throughout her life. Thus, she became very committed to her physical wellness.

This participant's body image was also affected by her Rosen Method sessions. She became much more aware of her mind-body connection over the course of several sessions. Having felt she could never achieve the “ideal physical look,” she had never tried. She hated her body. After three sessions, she said she finally appreciated her body for what it had done for her, and she could now view herself differently. She came to the realization that the physical and mental parts of her self were designed to support each other. As a result of her Rosen experience, she understood that she had used her physical self to care for her mental self without any reciprocity. The relationship had been parasitic, to the detriment of her physical self. Her transformative experience led her to consciously refocus her mental self into caring for her physical self through lifestyle changes and health-promotion activities. She appreciated how supportive and unfailing her physical self had been and wanted to start appreciating it with care and attention. She discovered that having good physical health did not mean achieving a pleasing weight and form to suit her desires, but rather achieving balance and high functioning to support her mind.



FINAL OUTCOMES

At the conclusion of the Executive Wellness Program, the nine participants were re-measured with the HRA protocol. Final outcomes were collected and compared to the pre-program measures. The positive health changes in the group were dramatic. All of the health indices of the HRA changed for the positive. Due to the relatively small sample size and the variability of the data across participants, not all of these positive changes were statistically significant. Until this study can be replicated with a larger sample, we can at least say that statistically significant changes were found for blood pressure, functional capacity, weight loss, body fat percentage, and quality of life.

The relatively small sizes of the subgroups that participated in Rosen Method bodywork versus traditional massage also did not permit statistical testing. The subjective reporting from the Rosen participants described earlier implied that they were more heavily invested in their future health promotion and that they had psychologically progressed further in a behavior change model. Future research with larger samples can test for quantitative differences between these groups. Ideally, there should be random assignment of Rosen Method or massage to the client groups. This could create bias, however, as a strong dislike for a program component could derail the intervention and defeat its purpose.

Six months after the pilot program's conclusion, the entire cohort was reevaluated with self-reporting questionnaires that asked for frequency of independent exercise, current weight loss or gain since the program, and state of well-being as judged against their state at the conclusion of the program. Half of the participants reported that they had been able to maintain a regular



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exercise routine and sustain the weight loss. Twenty-five percent reported they were much more active than prior to participating in the program, but they were not active at least three times per week. They also reported, on average, regaining about half of their previously lost pounds. The whole group unanimously reported an improved quality of life, improved sleep habits, and sustained wellness habits related to dietary choices and exercise habits. The impact of the participants' experiences was felt throughout the 14 hospitals of the Queen of the Valley health-care system's administrative structure. In addition to providing an intensive

health improvement intervention to the participants, the pilot program helped encourage executive support for worksite health promotion. As a result of these positive outcomes and experiences, the corporate office of Queen of the Valley decided to start its own executive wellness program. Increasing awareness of the benefits of health promotion also led the organization to allocate funding toward a new division, focusing on the wellness and health improvement of the communities served.

THE NEXT STEP

Several issues of interest for further discussion within the Rosen Method community have arisen as a result of this pilot program.

1. Could Rosen Method's descriptive language and public awareness of the discipline be improved through emphasizing the importance of the body having its own wisdom and voice? To become more mainstream, Rosen Method needs to expand to areas where uninformed, traditionally minded clients would need pre-session education. Many people still do not comprehend that the body has its own knowledge and wisdom, and therefore their chronic aches and pains are a mystery to them. A more scientific understanding of how the body works can only enhance the goals of promoting Rosen Method.
2. Can Rosen practitioners find an abbreviated, yet clear, way to describe the range of experiential reactions that are hallmarks of this work? Could practitioners also find substitutes for words or phrases (e.g., the unconscious) that may evoke fear and ultimately act to repel participants rather than attract them to Rosen Method? It's not that the words used to describe the benefits of Rosen Method are too sophisticated; it's that each session is unique, and it is difficult to cover in a few words the wide range of effects Rosen Method can bring about. It might help to say the effects can include deep relaxation, realizations about body patterns, clarifications about one's life purpose, recognition of one's spiritual identity, and insights about relationships, work, and life in general. Overall, it can be said that the focus of Rosen Method is on regaining one's wholeness and a balanced life through self-awareness.

3. How can Rosen Method practitioners explore integration with other health promotion disciplines? As revealed in the comments of the clients in this pilot project, Rosen Method can provide people with increased awareness and sensitivity to their bodies and guide them into a greater capacity for identifying and expressing their inner process. This is an important tool for pursuing behavior change. How can we explain this to other health-care professionals who might recognize the usefulness of collaborating with Rosen Method practitioners to support clients?


A REASON FOR INCLUSION


The results of this study cannot prove that Rosen Method, or any other single factor in the program, was the sole cause of the observed changes. Based in part on the reports from the executive participants who received Rosen Method bodywork, we can say that the Executive Wellness Program's integrative experience was expanded and enriched by its inclusion. The promotion and advancement of this valuable therapeutic modality within health care must be thoughtfully approached, and the modality must continue to be offered in as many integrative settings as possible.

Rosen Method, as part of an integrative wellness program, offers the possibility to enhance outcomes because it supports self-awareness. Through their insights, clients may arrive at conscious choices and the authenticity of living from their hearts. In Marion Rosen's words, "This work is about transformation—from the person we think we are to the person we really are. In the end, we can't be anyone else." **m&b**

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NOTES

1. S. G. Aldana, "Financial Impact of Health Promotion Programs: A Comprehensive Review of the Literature," *American Journal of Health Promotion* 15, no. 5 (2001): 296–320.
2. D.W. Edington, "Emerging Research: A View From One Research Center," *American Journal of Health Promotion* 15, no. 5, (2001): 341–349.
3. D. Zank and D. Friedsam, "Employee Health Promotion Programs: What Is the Return on Investment?" *Wisconsin Public Health and Health Policy Institute Issue Brief* 6, no. 5 (2005).
4. A. Golay et al., "New Interdisciplinary Cognitive-Behavioral-Nutritional Approach to Obesity Treatment: A 5-Year Follow-Up Study," *Eating and Weight Disorders* 9, no. 1 (2004): 29–34.
5. C. McHorney et al., "The Validity and Relative Precision of MOS Short- and Long-Form Health Status Scales and Dartmouth COOP Charts: Results from the Medical Outcomes Study," *Medical Care* 30, no. 5 (1992).