



## WIG Summer Summit Series

July 8, 2020

**“Chlorine Disinfection for Public Health during COVID-19,  
The Science of Risk, and A Holistic Approach to Anxiety”**

### Featuring:

Lucy Gettman, Executive Director, WIG

Tennessee House Democratic Leader State Representative Karen Camper, President, N.O.B.E.L Women

Maine State Senator Stacey Guerin, Chair, WIG Board of Directors

Mary Ostrowski, Senior Director, American Chemistry Council

Dr. Kimberly Wise White, PhD, Senior Director, Chemical Products & Technology Division, American Chemistry Council

Ohio House Democratic Leader State Representative Emilia Sykes

Dr. Tara Scott, MD, Founder of Revitalize

Jessica Montoya, Founder, Yoga For Vitality

**Senator Stacey Guerin:** Hello everyone, thank you for joining us today! I’m Stacey Guerin, State Senator from Maine and Board Chair of Women In Government. I’m honored to share moderator duties with Ohio Democratic Leader Representative Emilia Sykes. Welcome to the fourth and penultimate session of Women In Government’s virtual Summer Summit Series.

[Women In Government](#) is a non-profit, non-partisan organization led by women state legislators across the nation. The WIG Board of Directors guides programming and initiatives for the organization throughout the year. This year, we celebrate that there are a record number of women state legislators – over 2,100 – and more than 50 women Members of Congress who previously served as state legislators.

We have a great program for you this afternoon, including a special bonus of a few minutes of yoga stretching and breathing work at the end – so stay with us! Before we begin though, I do want to recognize and thank all of our conference sponsors! We appreciate your support for WIG’s newest program!

I’d also like to give a big thank you to our [Business Council Members and Associate Members](#). Women In Government is grateful for your partnership and belief in our mission as we continue to provide women state legislators with resources to tackle complex policy issues—tools we all need now more than ever.

Women In Government is all about Connecting Legislative Leaders nationwide, and that is one of my personal favorite things about WIG, is all the people I have met across the country, both from the Business Council and other legislators. We hope that everyone here stays in touch during and after today’s conversation! You can find WIG on [Facebook](#), [Instagram](#), [Twitter](#), [LinkedIn](#) and [SoundCloud](#) using our event hashtag #WIGSummerSummit.

Now, I’m honored to introduce our Special Guest today: [N.O.B.E.L.](#) Women President and TN House Democratic Leader, Representative Karen D. Camper. Representative Camper serves as the President of the National Organization of Black Elected Legislative Women. She has been a State Representative of District 87 in the Tennessee House of Representatives since 2008. She is also a retired Chief Warrant Officer in the U.S. Army. Welcome President, Representative Camper!



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**Representative Karen Camper:** Thank you. Thank you so much. Good afternoon, everyone. It's an honor to be here with you today. I hope that you're staying safe, you're staying healthy, you're staying with your families, and staying strong through this summer. Like she said earlier, we have a great number of strong women leading us during this pandemic. Mayors, Governors, Members of Congress, and State Legislative Members are all leading and taking charge during this time for our constituents, during this epidemic, and the ensuing economic crisis.

If you open any newspaper, listen to any podcasts, turn on any news broadcast, you will see Mayor Keisha Lance Bottoms of Atlanta, Michigan Governor Gretchen Whitmer, Congresswoman Val Demings of Florida, and many others talking about their efforts to take care of their constituents and their residents. And this doesn't even count the number of school Superintendents, City Council Members, Health Department Commissioners, and thousands of other elected and appointed women who are getting up every day and working straight into the next day to provide the leadership and guidance that this moment calls for.

Like many women in government, I'm a mother. Many of us had to make great sacrifices, along with our family sacrificing, to make progress in our careers of service. By standing on the shoulders of the women who came before us, like Shirley Chisholm and Ann Richards, along with hard work in recruiting efforts around the country, we are at a point in history. We have more women in more positions of authority and responsibility than ever before. And the class of 2020 candidates running for seats at every level is unprecedented. Why are we women in government shining and our constituents turning to us during this health and economic crisis? Well, I know I can speak for a lot of mothers out there who run for office that if the kids are sick and the money is tight, we know how to make it through.

In my state of Tennessee, we're celebrating the 100th anniversary of women receiving the franchise in our country. It's been only a century ago that a woman could not cast a ballot in the United States. And now, we're setting records for candidates and office holders. We're not just breaking the glass ceiling, we're rebuilding the roofs and walls of a governing system that far too long ignored the needs and rights women, of black and brown people, of the LGBTQ community, of immigrants, and so many others who were forced to stand on the fringes of our society.

Women are leading the charge in reforming criminal justice and facilitating the conversations around law enforcement in communities our police are there to serve and how to make those relationships work. They are at the forefront of deciding how our students will return safely to school and how to keep our teachers safe. Women in government are getting the job done, and in 2020 Americans are going to hire more women to do those jobs in our communities, our states, and indeed our nation.

Again, thank you so much for having me here with you today. I look forward to serving with you. I look forward to learning from you. I just look forward to a really productive year from everybody. And, I just thank you so much for allowing me the opportunity to speak to you today, and I'm looking forward. Thank you again from N.O.B.E.L. Women.



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**Senator Stacey Guerin:** Thank you for taking the time to join us. Today, by working together, women elected and appointed leaders at all levels are certain to guide our nation through these current challenges and opportunities.

Now on to the program! Before we dive in, if you have questions or comments during the presentation, please use the Chat Box in the Zoom Meeting Toolbar—making sure to select “To: Everyone” from the drop-down menu—and please also identify yourself by name and state.

I am really excited that we get to devote today’s entire program to aspects of health and wellbeing during these challenging times. Our first speaker will discuss chlorine’s role in fighting COVID-19. Mary Ostrowski has been employed by the [American Chemistry Council](#) since 2000. She works to promote the safe and appropriate use of chlorine-based sanitizers and disinfectants for public health. She has worked with many organizations and government agencies – including Women In Government. Welcome, Mary!

**Mary Ostrowski:** Thank you so much, Senator Guerin. I appreciate the opportunity to speak with all of Women In Government today about the role of chlorine disinfection for public health during COVID-19. And if you compare the picture of me there and my hair here, you can tell I have a COVID hair-do.

Many of you know that the naturally occurring element chlorine and several of its compounds are excellent disinfectants, meaning that they destroy the invisible germs like the COVID-19 virus that’s currently circulating the globe. But one very familiar chlorine disinfectant is chlorine bleach, and it’s a fixture in laundry rooms around the country. Because it can destroy the COVID-19 virus on surfaces, it’s been a coveted commodity since the start of the pandemic. Furthermore, bleach is not only effective against COVID-19, but it is also highly economical and affordable. But how do we use it to kill COVID-19 viruses on surfaces? Do we just open up the bleach container and pour it on a surface we think might be contaminated, or do we mix it with water? And how much water?

The [CDC](#) issued guidance back in March on exactly how to mix chlorine bleach and water to form an effective disinfecting solution. We at the American Chemistry Council worked with many of our public health partners to develop this simple pictogram poster that you see on the screen in front of you. It provides the directions that the CDC provided to us in a simple-to-understand way using mainly images. What we learn from the poster is that it only takes a solution of a third of a cup of chlorine bleach added to one gallon of water mixed and applied to surfaces. The contact time that is needed is one minute, and this can be used on surfaces that are frequently touched, such as door knobs and handrails. This particular poster is freely available at the URL at the bottom left of this slide, and I will say that since mid-March, it has been downloaded thousands of times. We’re happy to see that it’s in use.

With chlorine bleach so much in demand during the pandemic, we started a bleach donation program. For communities in need that required bleach and were having a hard time finding it, we really met that need with the help of several partners, including Women In Government. We’re very grateful to those contacts who helped us identify communities that were in need of bleach for surface disinfection. On



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this map of the U.S., the states that are shaded in blue are the ones that have communities that were recipients of the bleach. We just complete concluded the program, and in all we distributed over 70,000 gallons of bleach to U.S. communities. Hopefully that destroyed a lot of the virus.

So, we've talked about disinfecting surfaces against the COVID-19 virus, but what about swimming pools in the summer of COVID-19? Public pools are beginning to open all around the country. What are the risks to swimmers contracting the virus when they go to the pool? Once again, we rely on the analysis of the CDC, and the CDC tells us there's no evidence that COVID-19 can be spread to humans through the use of pools and hot tubs. Proper operation maintenance and disinfection with chlorine and bromine should remove or inactivate the virus from exposure to the water because the virus is destroyed in chlorinated and brominated water. That's great news!

However, we understand that the greatest risk of contracting COVID-19 is through a different route, not through water, but through respiratory droplets of people who are infected. And when they exhale those respiratory droplets, others around them can inhale them and become sick and contract the virus. So, that is why CDC has also put out some [guidelines for social distancing at public pools](#). You see the mask on the guard and on the handrail there in the slide. People are instructed to use the mask outside of the pool. Of course, you can't use it in the pool, because if it gets wet, it can obstruct your breathing. But because the most important route of exposure to COVID-19 is these respiratory droplets when you're close to people, we're instructed to be six feet away from folks and also to wear a mask. Because of these difficulties, though, we see that pools for backyards are way up. They are skyrocketing. It's just a lot more convenient to swim in a backyard pool with the folks that you've been sheltering with throughout the pandemic than going to a public pool. Not that there aren't guidelines - there are guidelines for the private pools as well.

How about drinking water? Can we get the virus from drinking tap water? It's a great question. The CDC gives [guidance](#) on that again. Conventional water treatment methods that use filtration and disinfection should remove or inactivate the virus that causes COVID-19. The vast majority of drinking water facilities in the U.S. do use chlorine chemistry as a disinfectant measure against the germs that can make people sick, and that includes COVID-19. So again, chlorine chemistry is really helping to keep drinking water safe and people say from COVID-19 through that route of exposure.

So finally, in conclusion, chlorine chemistry is helping to keep us safe in the era of COVID-19, whether it's destroying the virus on surfaces, in swimming pools, or drinking water. This is a time in history when chlorine chemistry is really being shown for its strengths as a public health care industry. And with that, I'll take any questions if there's time.

**Senator Stacey Guerin:** We do have time for one question or maybe two. One question that had come into the chat box was: Will the bleach program be reactivated for people who would be interested in having it distributed in their state?



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**Mary Ostrowski:** To my knowledge, it will not be, unfortunately. But if the person interested would like to get in touch with me personally, I can verify that.

**Senator Stacey Guerin:** And now I'll ask one quick question myself. Something I'm always worried about with bleach if I'm going to use it to disinfect the counter, I'll get it on my clothing and then have those white spots. If you use that dilution that you said a quarter of a cup to a gallon, is that safe for clothing?

**Mary Ostrowski:** It's actually a third of a cup to a gallon, and I wouldn't guarantee that it would be safe for clothing. It probably is not. It's always a good idea to wear clothes that you don't mind ruining with stains or a smock or some sort of a plastic apron. So, yes, we do have that liability with bleach that we discolor clothing.

**Senator Stacey Guerin:** That's really good to know. I think that's all the time we have. Thank you so much, Mary, for your collaboration with multiple states, cities, and stakeholders to bring much needed information and resources for disinfection during this pandemic. We so appreciate that. I know the people in my state really appreciate that donation. Thank you.

**Mary Ostrowski:** Thank you.

**Senator Stacey Guerin:** Joining us to discuss a different but very important aspect of health and wellbeing is Dr. Kimberly Wise White, PhD, Senior Director, Chemical Products & Technology Division, American Chemistry Council. Dr. Wise White works with multiple stakeholders to conduct scientific research that informs human health hazard assessments and implement approaches to improve the chemical risk assessment process. Hence the title of this segment, “The Science of Risk.” Welcome Dr. Wise White, the virtual podium is all yours!

**Dr. Wise White:** Thank you. I'm very excited to be here in front of this room of dynamic women. I wish that we could all be together, but I'm at least excited to join you all virtually. I'm going to spend my time really talking about the science of risk. I think this is critically important, especially where we are in today's society—having an understanding of when there's a public health risk, what it means to you, where you can get information, and how you can make decisions for yourself and your families.

I'm going to cover a couple of key areas. The first is on perception and reality. So, what do you really think and feel when you hear about something that may be hazardous or may call a risk? It's understanding the differences between what might be a hazard and what actual risk means, debunking some of those things on the internet or things that you may read about that you're quite unsure about and how you navigate that. It's also understanding some of the challenges to getting information out to people about public health and safety and where there are some opportunities to improve that dialogue among stakeholders.

So, perception versus reality. What is risk? It's really the probability that something might happen or the likelihood that you may come in contact with something that could potentially cause you harm. You'll



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see here on the picture you have a person walking down the street. Think about those of us that may walk to our offices – or now that may be just walking from the bedroom down to your office space. You might be walking along, and generally, that's an uneventful walk. You have low risk - you walk it every day. It's a lovely day, but you encounter a dog. And so, the risk may be elevated slightly because now you've encountered a dog, and is that dog going to potentially bite you? Is that dog going to make you run away, so you may trip? Your seemingly very low risk walk may be more hazardous because now you have some other things that are happening. So, you need to take all this information into account throughout your life.

So, let's just think a little bit about understanding risk and what we feel about. There are a couple things on this slide. First is COVID-19 or the coronavirus. We all have feelings about this. You might hear reports on the news, you might read things on your phone, might get things on Twitter, or get things on your Instagram account. You hear these things and it makes you feel a certain way. You may want to look for information, or you may not want to look for any information as you may be filled with anxiety and not know how to act. You may be filled with uncertainty and not know where to get information. You may have fear or you may just be complacent. You may just say to yourself, “Well, that doesn't really apply to me. There's not anything I can do about it, so I'm not going to look.”

The same thing with chemicals. You may be reading something that tells you that there is a possibility that you could get cancer from your drinking water. What do you do with that information? You have a visceral reaction to what you're hearing, and you have to use what you're feeling, and then also use scientific information to try to make a decision, but you can't split those two things up. A lot of the scientific facts don't support the way that you're feeling, but you can't discount the way that you might be feeling about something that you're hearing. You have to take all that in to help you make your decision.

So, what's the reality? I talked about what we feel when we hear about a new disease or when we hear about a chemical that might be causing harm. How do I navigate that information? Well, the reality is that there's no such thing as risk-free. Everything you do in your life comes with some form of risk. There's also no such thing as chemical-free. Sometimes we hear that I can live a “chemical-free life.” There's no such thing. Everything that you encounter every day has some form of risk. Everything that you encounter every day has some form of chemicals in it—the food you eat, like the apple that you may have had this morning, the water you drink, the clothes you're wearing, electronics, even our bodies are chemical manufacturers. We make chemistries throughout the day that help our body function. The reality of risk is that the level that you're exposed to, or the dose, actually determines if you're going to be harmed. That's the basis. I'm a toxicologist by trade, and the basis of that science is “the dose makes the poison.” Anything, even things like water and oxygen, can potentially be toxic. It really matters on how much, when, and for how long you might be exposed to something.

As I mentioned, hazard exists in everything. So, what do you do? We talked on the previous slide about coronavirus. And there's hazards in what you might be interacting with. So, if you're going to the office or if you go the theater – some states have started to open up their movie theaters - there's some



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potential hazards of you maybe coming into contact with the virus in some way. While schools are out now for the summer, they are looking at how they might reopen in the future. Some gyms are open in various states now and some restaurants are open, and there's always opportunity for disease transmission to happen there. So, there is a hazard that exists, but you're not just going to stop your life. You're going to figure out how you can interact with the hazards and how you can make them as low risk as possible so that you can go throughout your day and accomplish the things that you need to accomplish. Sometimes you need to go into the office to be able to move things along to make the legislature work.

Similarly, there are agencies such as the World Health Organization that have identified some things that are known to cause cancer or possibly cause cancer to humans. They have a hazard, and they have the ability to do this. But the likelihood that that would happen with the way that you're exposed to it is relatively low. Just because I know that there might be something in a hot dog that has the ability to cause cancer, am I never going to have a hot dog at a game again? I actually just had a hot dog for lunch. I understand what the risk is. Am I never going to have a cup of coffee? Am I never going to have an alcoholic drink because there is the potential for it to cause cancer? No, I'm going to understand what that risk might be and try to make sure that I lower it as best as possible.

So again, exposure matters. When we're talking specifically about the coronavirus, how do you reduce the hazard? As Mary mentioned in her presentation, the CDC has put out lots of the guidance that you put on face masks, that you wash your hands, that you social distance. All these things help you minimize the risk that you might be exposed to. The same thing with the chemicals that you may be interacting with—you have to understand what the toxic levels are for those things. So, we have caffeine here. It takes 118 coffees to equate to the amount of caffeine that would have an adverse effect to you, that would harm you. I don't think any of us are going to be drinking 118 coffees in one day. You may be up to five or six. But again, you're going to be relatively low because you understand there are things that you can do to lower that risk.

So, understanding hazard vs. risk. We talked about the car. All of us usually get into our car. There is an inherent risk that you could get into a car accident as you're driving your car. How do you reduce those risks, and how do you ensure that if you get into an accident, you have a higher rate of ability to survive? You put your seatbelt on. You drive the speed limit. You make sure that when the weather is bad that you drive slower than the speed limit so as not to put yourself at risk. If you go outside, the sun has the ability to give you a sunburn, has the ability to give you cancer. How do you reduce that risk? You put on sunblock. You put on a sun hat. You may put on long sleeves. You may reduce the amount of time that you're spending in the sun so that you limit the amount of risk, but you're not going to stop going outside. You're not going to stop actually driving your car. You're just going to make sure that you're doing something to reduce that risk.

I always like to ask people what their perception of water is. I think we drink a lot of water every day. It's recommended by many, many health authorities that we drink water. They consider it's natural, it's healthy, and it's safe. But what a lot of people don't know is too much water can actually lead a



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headache. Too much water can lead to seizures. Too much water can actually lead to death. Even something that we all inherently know is essential, safe, and natural has toxicity if you have too much of it. A couple of liters in a very short amount of time can throw your metabolism off and can lead to potentially to death. And so, I think everything again has an inherent risk that we have to understand, and our job is to really minimize and lower that risk as best as possible.

I won't spend too much time here, but as you look across this slide, you'll see that you have exposure on one axis and hazard on the other. You'll see as you move across that depending on the level of exposure - high exposure means I'm going to be in the environment with this thing for a long time, maybe hours or maybe days - if it's a high risk, then you are likely going to have a higher chance of having something happen to you if there's a high level of hazard. If it's a low risk, then maybe your hazard will also be low. Again, you have to look gradually at how you're interacting with something, whether it's a chemical, a product, something in your home, or an animal to see whether or not you're going to have some adverse effects and how you can minimize that effect.

So, having accurate information is really important. The government needs information because they have to make laws to protect people. The public wants information because we are an information grabbing society. Everyone has their phones out, and they're looking at things to know if there's risk or if there's hazard or if something might endanger their health. The people that are creating these products - manufacturers or the people that are importing it from other countries - want to make sure that they are providing the most accurate information to the government and to the public so that they can make the best-informed decisions about buying products and about how they might be interacting with these things in the environment.

Evaluating and debunking myths - what do you do when you have all this information coming at you about something being hazardous to your health? There's COVID-19. There's SARS. Are these things the same? There are chemicals that are in my water. Are they causing me harm? I hear that the blanket that I'm using may have a chemical that causes cancer. Should I discontinue using this blanket?

I'm going to try to help you navigate going through those processes, where you can get information, and how you might be able to move forward to making the best decision for yourself. We're going to cover just a couple of key questions that you should think about as information is coming to you when you're trying to make a decision about public health and safety for yourself, your family, and your constituents. First, what questions are actually being asked? What is the issue that you're trying to address? Is it about a particular product being harmful? Is it about a particular activity? In the age of coronavirus, should I still go to the movies at this current time? Should I delay going to the movies for several months? Should I still go out to a restaurant? Am I at risk? What is really the question that is being asked, and how do you try to address that question?

The other thing that's really important when trying to navigate and make good decisions about risk and science is what is the source of information that you're getting? Is this information coming from social media? Is it a Twitter feed? Is it from an actual agency like the EPA? Is it from an agency like OSHA? Is



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the information that you might be getting from a neighbor? Is it information that you're getting from a trusted source like a doctor or a scientist? You have to kind of take a step back and ask “Where did I get the information? Is it a source that I trust, and how is that information actually backed up?”

So, is the information actually backed by public science? Is there animal data? Is it a rat study? Is it an animal study that is relevant for why you are thinking about using or not using this particular chemistry? Is it a human study? Is it a model that may or may not be relevant to what you're trying to ask? Because again, we have to think back to what question I am trying to answer for myself. Do I want to still interact with this product? Do I still want to go to the restaurant or not? So, think back to the question you're trying to ask and what information is going to help you make that decision.

Overall, I think one of the most important things is once you figure out the question you're trying to ask and answer, who is giving you the information, and whether or not the information is based on good science, then you have to say, okay, is there competing information that I'm getting? Are there two pieces of information I'm getting with one being positive and one being negative? Which piece of information should I trust? Sometimes we hear reports that say that I should drink this many ounces of orange juice. And then, five weeks later it'll say, no, I should drink that much orange juice. Where do I navigate? You have to look at whether the information is relevant to you. Do you have confidence in the information? And, is it actually consistent with other pieces of information that you have? Ultimately, it's about the trusted source that you verify so that you can trust that the information is valid and accurate.

Finally, I'm going to cover some challenges and some real opportunities that help us all make better decisions about science and risk and how to navigate this when we're trying to make good public health decisions for ourselves and for those that we love. So, there are some challenges. One is accurate information. A lot of people don't have access to accurate information. Even in the age of the Internet, a lot of us don't go to the right sources for information. A lot of us don't have a good understanding of the nomenclature that's being used. So, if we think about the coronavirus, there are so many different names for the coronavirus. It's coronavirus. It's COVID-19. It's the Severe Acute Respiratory Coronavirus 2 syndrome. There are lots of different names. Are they all the same thing? Do they mean the same thing? Do I protect myself the same way? Make sure that people understand that we're talking from the same place, that we're understanding, that we're using the same terms, and that we're actually talking to knowledgeable scientific experts.

So, where are you getting your information for COVID-19? From a trusted scientific source. That's who should be giving you the information for you to make decisions about whether or not you should be wearing a face mask, whether or not you should be using hand sanitizer, or social distancing. And again, if there are divergent views, should I use this antibiotic versus another antibiotic? How do I make the right decision for myself? It's all about looking at the information and the source that the information is coming from, and then comparing that to see if that's an outlier. Look at five experts in the scientific community to see if it's just one outlier that is saying this piece of information.



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Finally, how do we move past all of these challenges? One is to open the dialogue, just like we're doing today—having a conversation about how people can understand science, how you can understand risk, and how you can use that information to make better decisions. Correct misconceptions in this understanding. If you think someone has something wrong based on what you've read, then try to educate them. Try to inform them that that's not exactly the way you heard it and provide them the trusted source. And then I think the most basic information here is just to simplify and share information often. I have science here, but it's really about information. If you have information that's going to be useful and valuable to people to help them make decisions, now is the time to share and to do it as often as you can. Thank you very much.

**Senator Stacey Guerin:** Thank you very much, Dr. Wise White. That was very good and interesting information. We do have time for a question. Are there ways that state level policymakers can engage on behalf of data-driven policy?

**Kimberly Wise White:** Absolutely. As I mentioned in my presentation, just having a good understanding of what's a hazard versus what's a risk. A lot of times what we see in policies that might be moving forward are just based on hazard. So, they're only based on something having the ability to cause some type of risk. Does this thing cause cancer? Does this thing cause x factor to happen? In reality, lots of things are called hazard, and you really need to make sure that you build in the exposure piece of the assessment so you're making risk-based decisions that are actually going to provide a public health benefit.

**Senator Stacey Guerin:** Thank you. Another question would be related to myths. You mentioned in your presentation that there are a lot of myths out there. Is there a myth about chemicals that you would want to correct today?

**Kimberly Wise White:** The biggest myth is that people believe that they can live in a “chemical free” world. And I like to tell everyone that our bodies are chemical factories. A lot of the things that you may be hearing about that cause adverse effects is naturally made and produced by our bodies, and we need it to survive. And so, having people understand that there's no such thing as a “chemical free” way to live, I think, is probably one of the most important myths to dispel for people.

**Senator Stacey Guerin:** Thank you. What federal agencies are responsible for developing information on chemical risk, and where could I find that information?

**Kimberly Wise White:** So, that is a great question. There are lots of federal agencies that are responsible for conducting risk assessments. The [Environmental Protection Agency](#), for example, is responsible for conducting assessments to determine whether or not there's any unreasonable risk associated with a product or chemistry. The CDC has an arm of their group, the [Agency for Toxic Substances and Disease Registry](#), which actually develops assessments as well. They're a kind of hazard assessment, so they don't look at specific products, but they look at chemistry. A lot of the states actually have individual state department environmental or public health agencies that also develop assessments. Most of the



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states as well as the federal agencies post their assessments on their public website. I'm happy to share some links of information if folks are interested

**Senator Stacey Guerin:** I would be interested in that. And I bet there would be other people too. So, if you were able to send those links that that would be really helpful. Thank you so much, Dr. Wise White. I've learned a lot and I hope that you will join us again someday.

**Kimberly Wise White:** Well, thank you so much. I really appreciate the opportunity.

**Senator Stacey Guerin:** Thanks! So, moving on. Women In Government continues to engage legislators and others in multiple ways. We still have spots available for legislators to record a radio Public Service Announcement in time for August's National Immunization month! Please contact Women In Government for information.

WIG is also happy to announce that [registration is LIVE for our in-person conference in Orlando this November](#). Please contact Women In Government staff or visit [www.womeningovernment.org](http://www.womeningovernment.org) for more information on these great opportunities!

As a follow-up to last week's segment we've got many resources for you from [SEED – the State Exchange for Employment & Disability](#), you can listen to WIG's newest podcast [“Increasing Access and Opportunity: 30 Years of the ADA”](#) from our website. While there, also check out [additional SEED Resources](#) including WIG Toolkits, the “Work Matters” full report, and much more!

It has been a tremendous pleasure to moderate the first half of today's Summer Summit Series. And I now have the pleasure of turning the program over to Ohio Democratic Leader Representative Emilia Sykes. Representative Sykes, who has both a Master's degree in public health and a Juris Doctor degree, was first elected to the Ohio House in 2014 to represent the 34<sup>th</sup> District in Akron, Ohio. Just last week she was selected as the national EMILY'S LIST Gabrielle Giffords Rising Star National Award winner for 2020. Congratulations and welcome, Representative Sykes!

**Representative Emilia Sykes:** Thank you, Senator Guerin, for a wonderful introduction and hello, everyone. Again, my name is Emilia Sykes, and I'm delighted to join Women In Government for the Summer Summit Series. We've heard a lot of great information, and I'm excited to keep that good information coming. I'm proud to be here with Dr. Tara Scott, who practices in my hometown and in my district in Akron, Ohio, the birthplace of champion. I also want to give a special shout out Elizabeth Bartz of State & Federal Communications, also a constituent and member of the birthplace of champions, for inspiring this session.

Our topic today is a rising issue in women's health – anxiety. Anxiety is the most common mental illness and most frequent cause of lost work productivity. Dr. Scott, founder of [Revitalize](#), is a nationally recognized authority on hormone and wellness related issues. The evidence-based practices she



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employs in regenerative medicine help patients conquer chronic wellness issues. With my background in public and functional health, I look forward to your presentation. Welcome, Dr. Scott.

**Dr. Tara Scott:** Thank you, Representative Sykes. And congratulations on your recent award, and yes, Akron is the birthplace of champions, so great introduction. So today, as mentioned, I'm going to talk about a “Holistic Approach to Anxiety.”

I'm born and raised in Akron, Ohio. My background is OBGYN, so I've been serving the women in our community for over 23 years now, and I have a second Board Certification in Integrative Medicine which involves alternative and complimentary techniques, such as acupuncture. It's the study alongside traditional medicine and functional medicine which is getting to the root cause of everything. My practice is based on prevention, based on mostly women, and right now I'm the Medical Director at [Summa Health](#) of Integrative Medicine.

So, like I said, I stress prevention. 12 years ago, my brother who's pictured here died suddenly of a heart attack at 38. Although he was considered healthy by traditional medicine, he had really every risk factor. He was a diabetic, he was on insulin, he was a smoker, he was a lawyer - so he was really stressed - and he was on cholesterol medication. But to traditional medicine, he was healthy. So, that really profoundly changed my practice and shifted my focus to looking for the why and the how and treating the cause.

Anxiety, as I mentioned, is very prevalent in the United States, affecting 18% of the population. Only about 37% actually seek treatment for this disorder. People with anxiety are actually three to five times more likely to go to the doctor and six times more likely to be hospitalized than people who don't have anxiety. There are a lot of risk factors for anxiety which we'll go over and also a lot of causes.

The definition of anxiety is worry occurring more days than not, and it has to be present for at least six months and in more than one environment, so it would be activities such as school and work. And in this, the patient must find it difficult to control the worry, and there have to be some other symptoms such as feeling keyed up, feeling restless, being easily fatigued, difficulty concentrating, irritability, muscle tension, or sleep disorders, and these symptoms must be significant in social and other important areas of functioning. This is not attributed to any other medical issue, and it is not explained by another medical disorder.

As we know, there are a lot of things that can affect anxiety. It could be your genetics. It could be your environment, like maybe your parents were always anxious and that's a learned behavior. We're seeing more and more that it actually has to do with your brain chemistry or the balance of your neuro transmitters, or maybe it's just your personality and that's just something that is inherent to you. But what we see now that is the biggest predictor of anxiety or depression is what's called adverse childhood events or life events. So, that would go under environment as well.

What I'm going to concentrate on right now is the hormone disorder. If you have some history of childhood trauma or abandonment or any other adverse childhood event, those are the most common



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causes. I'm going to concentrate mostly on the things that we see in our practice, which are hormone disorders and other integrative causes. Hormone disorders could be an imbalance in your thyroid, it could be estrogen dominance - which I'll explain what that is-, it could be too much or too little of your stress hormone cortisol, or it could be a result of low adrenal function, which is your adrenal gland.

There are other causes that we also see. We see most commonly women's hormones contribute to anxiety, but other causes include mold toxins, yeast overgrowth, an overabundance of metals, coppers, other environmental toxins, gut dysbiosis - an overgrowth and imbalance in the bacteria in your gut that is supposed to be there, nutrient deficiencies, histamine issues, and other infections like Lyme or other infection.

I'm going to talk mostly about the hormonal causes of anxiety because I feel those are the most common. If your thyroid is off, and if your traditional doctor is not checking your whole thyroid, not just your TSH but your actual thyroid hormones—T3, T4, and reverse T3—that can actually affect your anxiety. Estrogen dominance is what it's called when you have an imbalance in your normal hormones that your ovaries produce, estrogen and progesterone. That's something that's really common in women over 35, partly due to the aging process but also due to environmental toxins or some other genetic predisposition of not being able to properly get rid of estrogen. Cortisol, which can be high or low in response to stress, especially in times like now, can certainly provoke people to have anxiety that normally would not have anxiety.

So, just a little background on what actually goes on in your body. Women are born with so many eggs and you release an egg every month until you're done, and that's menopause. During a normal menstrual cycle, day one is the first day of full flow, and you see that the egg is starting to develop here, and estrogen is produced by the egg. Then in the middle of this cycle, the egg is released, that's called ovulation, and then the shell of the egg starts to produce a hormone called progesterone. This balance between estrogen and progesterone is very, very important. What ends up happening as you get older over 40 is that the good eggs are gone, so your amount of progesterone starts to decrease. On top of that, we are exposed to a lot of estrogen in our environment, and some people aren't able to get rid of estrogen. This is the most common cause that I see for anxiety in women over 40.

So, you go to your doctor and you tell them you're feeling anxious. Unfortunately, we OBGYNs aren't trained to detect hormones, and certainly your primary care doctor would not have had this training. So, what do you get? You get a prescription for an antidepressant, which may work because it does treat the symptom, but it doesn't treat the cause. Often there's other side effects from those medications such as weight gain, poor sleep, or even sometimes low libido as a result of a medication that you are prescribed that was supposed to help.

Let's talk about how stress affects your hormones. This is some data that I found from the Census Bureau that addressed the percentage of adults that reported feeling symptoms of anxiety or depression. A lot of my patients are either stressed about getting the virus, stressed about loved ones who are affected or who are high risk, stressed about their jobs, stressed about working from home,



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stressed about whatever. It seems like there are not really many patients that I see that haven't had an increase in their stress.

Let's talk more specifically about what that does. When we talk about stress, we're talking about a hormone called cortisol, and cortisol is necessary for you to live. It's a life sustaining hormone. It's involved in what's called a circadian rhythm. It responds to the time of day. At the beginning of the morning when you wake up and the birds are chirping, cortisol is actually high. As you go on through the day you can see with the blue line that it drops, so by the time the sun sets, cortisol is supposed to be low. This circadian rhythm is established; however, it does respond to external stresses.

What ends up happening is the hypothalamus in your brain secretes a hormone that stimulates your pituitary gland in your brain to create another hormone to stimulate cortisol production. This is a whole, huge feedback loop. On the right, you can see what's called a cortisol curve. If we map out a patient's cortisol, we test in the morning, just around lunchtime, in the evening, and right before bed. It's supposed to have this characteristic curve where it's highest in the morning. What we end up seeing is that this system between the brain and the adrenal gland is affected by external stress. So, what that means is if you see a bear, you're going to have life or death stress. That bear is going to attack you, and you're going to live or die. So, your brain starts to fuel your body for this fight or flight or the response that's going to be in fight or flight stress. Your body is going to start breaking down calcium so your muscles can contract and you can run with superhuman strength.

If we go back to caveman days, what happened when that caveman was faced with a wild animal, was that he either died or he lived and then he went back to his cave. He didn't go back to his cave and think, “Oh my gosh, what am I going to do about hunting for food? How am I going to protect my family? Do I put a security system in my cave? What do I do next?” No, he had life or death stress, and then he had a period of rest and restoration. But that's not what we have now. Many of us are on that high alert, especially you all that are working in government. You've probably got a ton of stress, especially now with everything that's going on in our country. What happens is that your brain does not know if you're running from a bear or if you've got a deadline or if you've got a pandemic or if you've got Congress in session. Either way, it's the same with cortisol going up. What ends up happening is that the communication between your brain and your adrenal gland gets disrupted, and then your body starts to think that there is too much cortisol and that all gets disrupted.

There's a cortisol receptor in every cell of your body. It's really interesting how some people manifest stress differently. Some people get it in their head. They feel headaches, and they feel like they're having migraines. Some people actually have skin issues and break out. Some people have palpitations. Personally, when I feel stress, I feel it in my stomach. It's interesting that no matter where you are or how you are, it's going to affect you in some way. You might be a stress eater. You might eat more or you might eat less, but it definitely affects your glucose metabolism, your weight, and your moods with anxiety and depression, but it also can affect your brain because cortisol shrinks the memory center in your brain.



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Let's talk about those chemicals in your brain. Neurochemicals in your brain are kind of like hormones. What I see in my practices is that all the female hormones have a best friend. When hormones go up and down, those neurochemicals also are affected by the changes. When we talk about serotonin and we talk about joy - feel-good hormones - that's the target of most antidepressants. Serotonin is related to estrogen, so when we see estrogen go up and down in your 40s, we see serotonin also drop. That's why when some people have low estrogen, they can feel a lower mood.

The next neurotransmitter is GABA, which is your relaxing neurotransmitter. It kind of makes you feel like a chill pill. GABA is related to progesterone. Progesterone in your body actually functions as a natural antidepressant, and that's why when people lack it, they start having more PMS at the end of their cycle because they don't have enough progesterone. The next neurotransmitter is dopamine. It's your motivation, get-it-done neuro transmitter. Dopamine is linked to testosterone. Testosterone doesn't fluctuate throughout your menstrual cycle, but it is the highest in your teens and 20s and gently slopes down as you age. We know that aging can also deplete your testosterone prematurely if you have excessive stress. It's been documented. The last neurochemical is norepinephrine. Norepinephrine makes you feel stressed, but it's also the one that's in fight or flight. Norepinephrine is clearly linked to cortisol. So, we have a lot of success in our practice by actually looking at the cause instead of just treating with an antidepressant or anti-anxiety medication.

Genetic enzymes are different in people based on their genetics, and they affect how your neurotransmitters are balanced. What this means is that it might make you get rid of one neurotransmitter too fast or hang on to one, and we have seen people respond to addressing these genetic abnormalities.

This is a sample report of a urine test that actually looks at the different type of hormones and the way your body breaks down hormones because it's important for us to know the balance between estrogen and progesterone.

The other thing that we really concentrate is on healthy estrogen metabolism. What we see is that in order to have estrogen and clear it correctly, you need to have the proper nutrients, you need to have the proper diet, and you need to have a healthy functioning to be able to detox and eliminate. If you have other things like insulin resistance, it's going to slow down the way your body can get rid of estrogen.

Here's a little short clip of a patient that I worked with, with natural causes of anxiety:

Patient: “I had anxiety when I didn't have any before, some really bad irritability, just mood changes. We found out I had an MTHFR mutation.”

Dr. Scott: “This is one of the genetic mutations that makes your body unable to get rid of estrogen. So, you kind of stockpile it, and then you have a lot of it. She also had other genetic enzymes that don't work correctly. So, what happened then?”



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Patient: “After that, you gave me some supplements and different things to do and try, and it helped a lot. I mean, my anxiety almost changed overnight. It took a while, but it leveled out. It was life changing to not have my anxiety daily. I started doing a lot of detoxing things you told me to do, including taking supplements that were good for me and my genetic mutation.”

Dr. Scott: “So, what would you say now with your regimen? I know you've made a lot of lifestyle changes. You go to bed early, you get up, you're pretty organic, you stay away from dirty foods, and you like to exercise. How are you feeling right now?”

Patient: “Worlds better than before. I feel like all those things combined with the progesterone has really made a difference in not only my periods but in my mood and irritability. Overall, I just feel with my body that it was really apparent that I needed it.”

Dr. Scott: “Thank you for sharing your story today. I think a lot of people your age would look at you and think that she's cute, she's fit, and she seems like she's fine. And so, traditional medicine would tell her that she's normal.”

Other things that we really see affect anxiety are molds, and that's one thing that I wasn't trained to look for. I have a naturopathic doctor in my practice, so she kind of puts that on the forefront. We started testing our patients for candida overgrowth, which is yeast. It's normal for you to have yeast in your body, but people are susceptible for getting imbalances. Heavy metals from fillings—I've got some mercury fillings - can also affect you, and the bacterial balance in your gut can as well.

Detoxification happens in your liver, and there are enzymes that are involved. What we're finding now that we're able to map the human DNA is that some people have slight alterations that make these enzymes work either faster or slower. So, once we can identify the patients that have that, it makes it easier to know that either you're more susceptible to toxins or you don't detox or things like that.

We've really had a lot of patients responding to a mold protocol. You could be exposed to mold either in your workplace or at your home, and if you're healthy, you should be able to kill off the toxins. But if you have a genetic predisposition or some kind of bacterial imbalance, you might be more susceptible. So, what we do is we test for mold or the mycotoxins in a urine test.

Candida is the next thing that I see in a lot of people. Now, as I said, it is normal to have Candida in your body, but the problem is when you have too much. There are certain foods that you can eat that will make your body become overrun with Candida. We joke that it's the SAD diet, the “Standard American Diet,” which is cereal for breakfast, a sandwich for lunch, and beef and potatoes for dinner. A lot of things with high fructose corn syrup and extra sugar can feed yeast, and you can have an overgrowth without even necessarily having any skin or vaginal manifestation of Candida. There are foods that can kill it - like broccoli, kale, and cabbage - to actually feed your detoxification. When we check for yeast, it's either a blood test that looks for antibodies or we can see it come up in your stool. We might even



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see markers in a urine test that show that your bacteria are producing certain chemicals that make us think that you have a yeast overgrowth.

We test for heavy metals now. In Akron, we're not a crazy industrial town, so I don't see a lot of people with metal problems. I know in other big cities, especially manufacturing towns, there are patients that are susceptible to toxins with metal. We test for this with a urine test.

Stool testing has really come a long way since we have PCR or polymerase chain reaction to detect the DNA in your stool. This test has been around for just a couple of years now. We can actually map out the bacteria in your gut—the ones that are supposed to be there and the ones that are not supposed to be there—and look at your digestion. This is not just a colonoscopy that's looking at the colon walls to make sure the structure is ok but this looks to see if you're digesting food or if you're having any inflammation. Because a lot of your serotonin is made in your gut, fixing the gut has been tremendous for our patients with anxiety and mood disorders.

As I mentioned, if you have a lot of inflammation in your gut, you're not going to be able to absorb your nutrients. Simple nutrient deficiencies, especially B vitamin and sometimes magnesium, can make a huge difference to patients as far as their moods. Something like that is cheap, well tolerated, and does not have side effects.

Most of the time when I see a patient with anxiety, depending on their specific history, the tests I would consider ordering is the urine test for hormones like I showed you, micronutrient testing if I was worried about their micronutrients and their vitamin status, stool testing, and possibly genetic testing.

Let's get into what can you do if you have anxiety. There have actually been over 1,000 studies that have confirmed that exercise has a positive effect on your mood, and interestingly, these studies did not say it had to be cardio. So if you hate running, you're off the hook. It could be something like yoga. It could be something like lifting weights, but you've got to be regular about it.

There are certain nutritional things that we have found that helped moods. One of them is if you drink a lot of coffee - over 750 milligrams, if you reduce the caffeine you have, moods have been improved. People who eat a lot of sugar sometimes crave sugar because you crave carbs if you have a low serotonin. Decreasing your sugar can help your mood. The diet that has been shown to have the most data is the Mediterranean diet, which is high in fish, olive oil, legumes, and veggies. In some studies, eliminating alcohol or reducing the amount of alcohol can help. Sometimes people self-medicate with alcohol because they're anxious, and alcohol is definitely calming. It actually binds the GABA receptor that I talked about. What ends up happening is the sugar in the alcohol counteracts that. The effect of alcohol on your liver can also slow down detoxification, so it doesn't end up helping in the long run.

If I had to pick one integrative therapy, meditation by far is the one that has been the most helpful, and maybe number two is yoga in my patients. A lot of yoga online and a lot of meditation online has really been a tool. That really helps because I like to give our patients an actual tool because anxiety is going to



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ebb and flow as stress ebbs and flows. If they have a tool that they can use to monitor and to moderate the amount of anxiety they have, that is really helpful. Acupuncture is helpful because a lot of times people are in fight or flight, and acupuncture will kind of decrease that fight and flight. And something simple like phototherapy, especially in the winter when we don't get a lot of sun, has been very, very beneficial. The simple things like aromatherapy and citrus oils have been shown to perk people's moods, and even music therapy helps. Listening to 80's music for me brings me back to high school and lifts my mood. Music therapy actually has been studied and proven to help anxiety.

I wanted to briefly mention heart math because, again, there is so much data with this, and basically anyone who has had a child has had fetal heart rate monitoring where us as obstetricians are trained to interpret the fetal heart retraining. Well, this is your adult heart rate variability. So, there's a little transition that goes on your ear and plugs into a free app. In 10,000 people after six weeks of using this, there was a 35% increase in focus, 37% increase in sleep, 39% increase in calmness, 46% decrease in anxiety, 49% decrease in fatigue, and 56% decrease in depression. Those statistics are higher than prescription medications, so we strongly recommend this tool. You can get the transducer at [heartmath.com](http://heartmath.com). You can share the same transducer with your family. The App is free. Everyone can sign up for their own account.

What supplements, if you're anxious, could be helpful? Again, never tell anyone to take these without the advice of a practitioner because we don't know your history. Fish oil has been shown in some of the studies to really help. There are two types of fish oil you see: EPA and DHA. One that has a higher percentage of DHA has really been shown to help anxiety and depression. Vitamin D, for sure if you have lived in the northern states, especially in winter, and have seasonal affective disorder. Having the right amount of vitamin D is good. There is quite a bit of data that has been published in functional medicine that taking 5000 units of D3 daily decreases the severity of COVID-19 and increases your immunity, so we're recommending to our patients to take that during this pandemic. B vitamins support the creation of neurotransmitters. St. John's Wort is a common supplement that we see that people take that seem to help their moods. And again, they would be under the direction of a provider, but there's a lot of data that this helps just as much as a prescription medication without the side effects.

So, basically, what we stand for in functional medicine is testing, not guessing. We advocate treating for the cause. The lecture that I did for a local Akron chamber where Elizabeth Bartz heard me is specifically about stress and resilience. I wanted to let you know this is a free lecture on our learning platform where I talk a little bit more about cortisol, how stress affects you, what stress does metabolically in your body, and give you tools to persevere during your stressful government job or during a pandemic or family stress or whatever you have. So, our learning platform - [academy.revitalizemed.com](http://academy.revitalizemed.com) - has some free lectures up there, and this is one of the ones that we have. Since I like to help whoever I can, I put a do-yourself hormone course for people who are interested on our learning platform. If you don't have a functional medicine provider in your area, this is something that could help you with your health.

I'm passionate about helping people. I'm always happy to get on a call to point you in the right direction. We have a directory, so we can look up your zip code and find a provider who may be in your area that



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might be able to help you. It's a small space. We all collaborate and help refer patients in different states because we're aiming for prevention and wellness.

I try to put a lot of free content and a lot of information on our social media - challenges, a lot of free videos on [YouTube](#), and a lot of [Facebook](#) lives. If any of this resonated well with you and you want to learn more, you're always welcome to check me out on social media. I really am thankful for this opportunity to try to educate and try to support all of you. I'm so thankful for all the work that you guys do for our country, and we want to keep you guys healthy and make sure that you guys all are navigating this stressful time peacefully. So, thank you.

**Representative Emilia Sykes:** Thank you, Dr. Scott. That was incredible, a lot of really good information. I know we have a couple of questions, but I want to be respectful of everyone's time, so I'll try to combine a couple of them into one. So, my first question for you is related to insurance coverage. We talked a little bit about how you can go about finding a functional medicine practitioner. So, if you could talk about that, and what are the payment options? And do most people in your field accept insurance, or do they pay for these tests?

**Dr. Tara Scott:** You know what, I opened my practice seven years ago, and we were contracted with all insurances, and what we found is insurance wants us to spend 9 minutes with a patient. And so, at that rate, we could not make ends meet. I couldn't even afford to pay myself. There's a lot of moves as far as group visits, and we've done some of that at Revitalize to have a lower entry cost. I think there probably are some bigger providers with large hospital systems that may still bill insurance. What we try to do is do labs through insurance, like the stool testing, for example. They bill your insurance, depending on your copay, any blood testing we do. There is some coverage of some of the testing, but that's definitely a hurdle. And I know that this year at our annual meeting of the Institute of Functional Medicine, there was a huge push to try to bring this type of medicine to the underserved and try to figure out how we can help more people, whether it's just a free event that we do. But as far as working in our office, we're currently not contracted with insurance, and many providers can't afford to do that because of the time component.

**Representative Emilia Sykes:** Thank you for the answer. Really quickly, how can state leaders address the prevalence of anxiety? And maybe this is a two-part question. And what are your top two suggestions for what we can do this for ourselves as we're navigating coronavirus and all the things that come with it, as well as our constituents who are also very afraid and anxious and not really sure what to do?

**Dr. Tara Scott:** So, everybody has something different that works for them. I know that there was a study done on inner-city school in Boston where they just changed their diet to whole foods, and they saw a lot less ADHD and a lot less anxiety in these kids. So, just the basics of changing your diet and eliminating processed food, and some of those basic things like exercise and getting enough sleep are really imperative at this time. Everybody has different things that work for them. If it's something like



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deep breathing and meditation, that generally is low cost, but it's got to be a tool that you have to kind of make a habit.

So, I would love to see everybody kind of identify, oh, for me, reading a novel is what works for me. But, you're so busy. You don't give yourself that time. So, 15 minutes of reading a night. Or going outside—there's tons of data that just seeing the green space and putting your feet on the earth can help for anxiety. So, there are some very simple things that I would love to see that we think of these things before we think of a prescription medication. I have nothing against prescription medications. Some people need them, and for a lot of people, they're very helpful. My problem is when they stop working, or there are untoward side effects or anything like that. It would be nice to have maybe some therapies that aren't prescription and alongside of that.

**Representative Emilia Sykes:** Thank you, and don't forget about that 80's music. So, the last question came from our chat box, and it was about whether or not long-term melatonin use is safe.

**Dr. Tara Scott:** So that's a great question. I can tell you, personally, I've probably been taking it every night for at least 7 or maybe 10 years, and I haven't had a side effect. The feedback loop for melatonin is not well defined. It's made in your pineal gland in response to light. What we don't know is what level is going to suppress that feedback. We do know that cortisol and stress will suppress your melatonin, so many people do respond well to taking melatonin.

The safe doses that we recommend without knowing your levels is 1-3 milligrams. I've had some experts say they've taken up to 25 to 50 milligrams without any side effects. The thing about melatonin is it's involved in the same cascade as serotonin, so some people, when they take it, if they have a problem with their serotonin, they have bad nightmares. They feel more depressed. So, it's more about knowing your body chemistry before you're trying something, especially in the high doses. But there are lots of positive benefits as it as an antioxidant and potentially an anti-cancer hormone.

**Representative Emilia Sykes:** Wonderful, thank you for the answer. And again, thank you, Dr. Stuck Scott, for your wonderful presentation. It was a very exciting for me, and I hope everyone else on this call got a lot out of it.

Finally, we have a great bonus session to help address stress and anxiety right now. One of the suggestions that we just heard from Dr. Scott, especially, a yoga and breath work opportunity with Jessica Montoya, a certified yoga instructor. Thank you, everyone, and I'll turn the program over to Lucy Gettman, Executive Director of Women In Government, and be well.

**Lucy Gettman:** Thank you Leader Sykes and Dr. Scott for helping us to understand, prevent and treat anxiety and stress. We can immediately put one of Dr. Scott's recommendations into action. We welcome Jessica Montoya, Founder of [Yoga For Vitality](#) in Alexandria, Virginia for a quick session on how to “Reduce Stress at Your Desk”. Montoya is a native New Mexican where she studied yoga under Meta Hershy at the historic Ghost Ranch and home of Georgia O'Keefe. Montoya also is a government



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relations professional, so she knows the stress that many of us encounter. Welcome, Jessica, the virtual podium is all yours!

**Jessica Montoya:** Thank you for having me. Lucy, I am actually outside. I love all of the discussion about managing risk, and I have two teenagers who are in a bubble, and I have two dogs inside my house. I have moved my office outside where I am right now, so if you hear bugs singing or birds singing, that's why. But I think this is a wonderful, wonderful segue. Thank you so much, Dr. Scott. I think it was just a great transition into what we're going to do so. Yoga is a great way to reduce stress. A lot of people say, “I want to just take everything out of my mind. I want to just escape for a while.” Yoga helps to do that because you really have to focus. Every breath is matched with every movement.

So for this portion, what I want to do is take you through a breathing exercise that's also a meditation that can really help. I really liked how Dr. Scott said get away to the 80's. Think about when you're in high school. And so, through this meditation, we're going to escape just for a minute or so using our breath, using our mind visualization, and it's called the elevator breath. I'll invite you, if you could get on the edge of your seat, we're going to take a little meditation with a breathing exercise. Now, I'll invite you to sit at the edge of your chair, and then imagine that you're being lifted from the top of your head. Open your heart. Take your shoulders out, and just sit with your hands gently on to your knees. Now, close your eyes, and we're going to imagine the elevator breath. We're going to imagine that you're going to go into a beautiful glass elevator. You're going to start at level one. And then you're going to breathe up to level four, so that's inhale level 1...2...3... and four. And then at four, hold your breath and look around. Imagine yourself in high school in the 80s, whatever that is, a beautiful visualization, your kids, whatever. And then exhale. Come down to level 3...2...1. And let's continue like that. We're going to take five of those.

Okay, if you want to go two breaths, three breaths, four breaths, up to you. The deeper you breathe, the more you'll receive, and the more your nervous system will relax. So, all together. Let's take three sets. Inhale 1...2...3...4...hold. Look all around your beautiful intentions, space, nature, whatever that is. And then exhale 3...2...1...hold. Inhale...2...3...4...hold. Look around. Exhale 3...2...1...hold. Last one. Breathe. And let's take it a little slower. 1...2...3...4...look outside your beautiful glass elevator, and then exhale 3...2...1...back at level here. Just see how you feel. Notice what you notice.

So, have your chair here. So, this is the top of my chair. We're going to take our hands on top of our chair. Stand up here, and then just take yourself out. Let yourself stretch. Open those arms. Let your heart calm down. Let's breathe here. Big inhale and then exhale. Let your heart and your head come down. Stretch the back of your legs, your back, and right here, just imagine that your heart is so full of love, compassion, empathy, whatever you want in your heart. It's just so heavy. It's melting down. One more breath here. Inhale...and let it go. Let's gently come back up. Let's come back on to our seat.

There's also so many exercises that I recommend - head rolls, neck rolls, shoulder rolls, and twists. Last but not least, you might have noticed here I have some mala beads. Mala beads have 108 beads. You can buy these or make these. Mala beads are great for anxiety and for meditation. Quick little tutorial:



## WIG Summer Summit Series

July 8, 2020

### “Chlorine Disinfection for Public Health during COVID-19, The Science of Risk, and A Holistic Approach to Anxiety”

you hold the mala beads in one hand, and you meditate, “Peace begins with me, peace begins with me,” as you roll through the beads. You can make a mantra, whatever you want. You know, “I am strong, I'm going to get that bill passed” 108 times. So, mala beads, yoga, breath work, meditation—all of that really works, and at very little cost. If you want to practice with me online, my website is [yogaforvitality.com](http://yogaforvitality.com). Thank you. I'll take questions.

**Lucy Gettman:** Jessica, thank you so much. I know you had to race through some of your exercises. Could you just briefly go over what they were? It was the elevator breath and standing behind your chair and stretching.

**Jessica Montoya:** Right. Opening your arms, extending your arms, and letting your heart melt down. So, you make your body like an L shape and stretch that way. You can also take neck rolls. Inhale. Back in, around, and exhale down and around. Those are great for relieving “tech-neck” stress as well as improving your blood circulation in your brain. Great for creativity boost. Also shoulder rolls. Inhale up and back, and exhale down and around.

**Lucy Gettman:** Great. Jessica, thank you so much, and you let people know how to get a hold of you if they have questions. [Jessica@yogaforvitality.com](mailto:Jessica@yogaforvitality.com).

So, thank you, Jessica. Thank you to everyone that participated in Women In Government's Twitter watch party earlier this week for “The Vote” on the American Experience on PBS. Check out Women In Government's inspiring comments, the retweets, and the photos from the PBS documentary.

In addition, we don't want you to miss a thing. We have one more [Summer Summit Series](#) next Wednesday, July 15, 3pm ET. We'll be celebrating in part the Centennial of the Women's Bureau at the US Department of Labor, and we're delighted that Women's Bureau Director Dr. Laurie Todd-Smith will be our special guest. In addition, you won't want to miss “The Promise of Personalized Medicine: Chimeric Antigen Receptor (CAR) T-Cell Therapy,” moderated by WIG Board of Directors Vice Chair Washington State Representative Cindy Ryu with featured speaker Dr. Michele Sharr-McMahon, Global Drug Development, Bristol-Myers Squibb. In addition, we will discuss, “Ensuring the Integrity of Auto Parts and Consumer Safety,” moderated by Nebraska State Senator Carol Blood with Jennifer Thomas, Ember Brillhart and Craig Orlan of Honda North America.

Shortly after that, we'll resume our [WIG Wednesdays](#) on July 22<sup>nd</sup> and look forward to providing even more great information for state legislators and other leaders. So, thank you again for joining us today, and I hope you all enjoy a safe week and see you next time!