

Transcript of Interview with Jennifer Margulis by Kit Heintzman

Interviewee: Jennifer Margulis

Interviewer: Kit Heintzman

Date: 01/13/2021

Location (Interviewee): Southern Oregon

Location (Interviewer):

Transcribed By: Angelica S Ramos

Some of the things we spoke about included:

The different impacts of the virus in urban and rural Oregon. Governor Kate Brown's policies. Brother's different experience in NYC. Learning about the COVID-19 after returning home from a family vacation. Having a fuller household with adult children moving back in and navigating those relationships. Having a daughter studying public health in South Africa flying home in March 2020. Daughter catching COVID circa March 2020, losing senses of taste and smell. The body's reactions to sensational news and fear. Turning off news media as selfcare. Building a clubhouse in the backyard for homeschooling local children. Boycotting a local health food store. How introverts and extroverts responded to working from home differently. Billionaires and corporate greed. The harms of the pharmaceutical industry and for-profit health care in the USA. Glyphosate in roundup and Red Dye #40. Narratives that call people who don't wear masks "murderers". Restrictions. Pandemic hygiene: the loss of access to public bathroom, nose bleeds, toxins Facial expressions and child development. Believing that quarantines should not impact the healthy.

Kit Heintzman 00:01

Hello.

Jennifer Margulis 00:02

Hi.

Kit Heintzman 00:04

Would you please start by telling me your full name, the date, the time and your location?

Jennifer Margulis 00:09

Yeah. So my name is Jennifer Margulis, M A R G U L I S. It is 13:15 on Wednesday, January 13. That's interesting. So it's 1:15pm. And I am talking to you from Southern Oregon.

Kit Heintzman 00:31

And do you consent to having this interview recorded, digitally uploaded and publicly released under a Creative Commons license attribution noncommercial sharealike?

Jennifer Margulis 00:41

Yes, I do. Did I weigh my firstborn son?

Kit Heintzman 00:47

I really hope not.

Jennifer Margulis 00:50

We'll see.

Kit Heintzman 00:52

If someone comes to you for your first foreign son over this, I don't think I don't think they'll win in court. Could you start by introducing yourself to anyone who's listening to this? What would you want someone to understand about you and the position that you're coming from entering this conversation?

Jennifer Margulis 01:12

Yeah, so I said already, my name is Jennifer Margolis, and I'm a investigative journalist and a science writer. I've been researching and writing about issues related to health topics for over 15 years. And I have written or CO written eight books, I just submitted my ninth manuscript to Houghton Mifflin Harcourt. So I'd want people to know that I am an avid researcher, I do have a PhD, but my PhD is in the humanities, and that I'm very well versed in issues that have to do with health.

Kit Heintzman 01:46

So what have been some of the most significant issues on your mind since March 2020?

Jennifer Margulis 01:53

Do I have to say COVID?

Kit Heintzman 01:55

You don't actually, because it's been quite a year and Wow. COVID dominates parts of that year. It is not the entirety of it.

Jennifer Margulis 02:06

Yeah, no, that's for sure. I mean, yeah, we're, we're living in very trying times. I, in March, I took my husband and I took my husband and my, then 10 year old daughter, no, she was 11. Wait, yes, my 11 year old daughter. And we actually went to two Lego lands. And in California, right when all of this information was hitting, and so we had three days when we did not hear the news when I was taking time off of work. And we just had a wonderful time. And I came back from Lego Land feeling very renewed and rejuvenated. And I went for a walk on the talent, irrigation ditch, which is this beautiful mountain path up from my house and with one of my dearest friends. And I said, How are you? And she said, Oh, I'm just terrible with all this stuff going on. And I said, Oh, are you having problems with your husband? Because she has a very difficult relationship with her husband? And she said, No, I mean about Coronavirus. And it kind of dawned on me that in those three days, so much had happened, and I hadn't been listening to the news. So obviously, you know, we've been thinking a lot about Coronavirus since March of 2020. And, but also a lot about I have two adult children. I probably should have said in my introduction, I have four children and two of them are recently adults and navigating relationship with adult children has been really interesting. Them being my oldest was in a public health year abroad and was so excited just on fire with her learning. And she was calling me after I got home from Lego Land. And she was she was in South Africa and she said, Mom, I think I'm going to get sent home and I said if you want to stay I'll find you a

way. I have connections everywhere. And then she called back and she said mom, they're shutting down the whole country. So concern over my children has been on my mind a lot and then I have been working on projects that are completely unrelated to Coronavirus. Well, they're related actually, I take it back. I've been working on projects health projects related to Coronavirus. One of them is about the the unfortunate and unusual and particularly insidious effect of glyphosate which is the main ingredient in Roundup and how that is affecting human health, especially the health of Americans. And that actually ties directly into Coronavirus, I would say and the other one is about how life on Earth started from the point of view of bacteria and their importance in our in our evolution in our human genome. So that one is also quite related to Coronavirus and I'm sorry I'm being so long winded but I will finish by saying my mother was An incredibly important microbiologist, maybe the most important microbiologist of the 20th century. And that second book project that I've been working on all year that I just recently submitted is about is about her work as a microbiologist. And I've, she's been on my mind a lot, because I wish that she were here to talk to you about these issues she passed away in 2011.

Kit Heintzman 05:26

Do you remember, you say you spoke a little bit about it in the context of your daughter? What else do you remember about first hearing about the pandemic?

Jennifer Margulis 05:35

Um, you know, so there was a huge amount of sort of fear and sensational news. And if you watch the news, and you pay attention to your body's reaction to it, you know, this, these big sounds come on this very provocative music and, you know, you know, and then and then, and then there's sort of a launch into the news. And I am a member of the media in terms of I, I write 4000 word articles for the cover of the Jefferson journal, which is affiliated with National Public Radio, and then I do audio features for Jefferson Public Radio. So I'm very aware of how the media works. And I was asked early on by my editor to write to give some historical context and to write an article about it. So I actually, as soon as we got home from Legoland started doing a really deep dive, but you asked me like, what was in the air in that time?

Kit Heintzman 06:35

And what you remember hearing and what it was sort of initial sense of information? What were what was hitting you?

Jennifer Margulis 06:43

Yeah. Well, the in so the initial that's such a good question. But you know, I'm, I mean, I kind of turned around and became kind of one of the generators of information. And so I started researching and, you know, interviewing historians, for example, to find out about putting this in perspective and find out about other moments in history, like when we had the, you know, the flu pandemic, and how we used to deal a long time ago, this is your field, not mine, but with leprosy, for example, and kind of trying to understand the bigger picture. So it was this very urgent moment in time. And everybody was talking about it. And people were asking, Did this come from, you know, somebody ate a bat? Was this a virus that was put generated in a lab? Was this? Is this just a novel virus that started in Wuhan, China? Or did it start someplace else came to America, we're not sure when. And so there's all these big questions, kind of, you know, that are very, very immediate in the ether. But for me, I was also just interested in taking a deep breath and kind of looking at the bigger picture and stepping back and asking the question, okay, instead of having my heart start to race with fear, and like my, my dear friend who I thought was having marital problems, which she was, instead of kind of being like, Oh, my God, I'm just so upset.

And being thrown into that moment, I wanted to also be an observer of the moment and kind of figure out what was happening and reserve judgment. So take in as much information as I could and try to synthesize it and understand what was going on.

Kit Heintzman 08:30

What's your day to day looking like now and how does that differ from my pre pandemic era?

Jennifer Margulis 08:39

Boy, so I'm a writer, that's what I do for a living, I spend a lot of time in front of a computer, I do a lot of interviews remotely, I also do a lot of things in person because as you know, you get so much more of the sights and the sounds and the smells when you're actually with people. So I am an extrovert and an introverts job. And that's always been the case, since the pandemic started, things have been so different in terms of, you know, not being able to do in person interviews, people in my town, probably 99.9% of them are wearing masks, even when they're driving in their cars. And when they're on the public trails. There's a huge amount of fear and that fear kind of leeches into everyday life. And I do not, I no longer shop at the one of the reasons we moved to this town was because of a natural food market that for some reason that place has gone so overboard. So one of the things that they did was they put up plastic shower curtains in between the aisles and they hired a security guard to make sure that people were wearing masks, they turn away They turned away a 75 year old friend of mine, who was wearing a face shield instead of a mask. And they've been incredibly hostile to anybody who has disabilities or exemptions and is unable to wear a mask. And because of that hostility, I stopped shopping there. So I don't go nearly as many places as I used to. I also used to do a lot of travel for my work. And I actually have traveled recently, I've actually been on the East Coast twice in the last two weeks, but that was the first time I have traveled in 10 months. And then another really major differences that I still have two children living at home. So I have a 17 year old who is literally sitting in his room on his computer, probably seven hours a day. And that is completely different from what his life looked like he has not been able to see most of his friends almost this entire time. And my 11 year old we started a learning pod. So we have a we have 52 acres, and we built a clubhouse. And there are eight families involved in that. And I'm very, very involved in that learning experience for her. So I'm, I've always also taught I've taught in almost every school in this in our little town, but the Waldorf, the public, the the Learning Center, all of it, I usually have taught writing classes, and now I've been I've been coordinating and facilitating the teaching experience. I haven't and my husband has actually been teaching. So that's what life is like. Now, just one more thing. I'm sorry, you can tell me to stop talking to no, no, um, everyone can fast for the tape when they get really bored. But when we when if so when it first started, my adult children came home. So I had one in New York, the one who was on a public health program got sent home from South Africa, when they said they were going to close the country. She said I better just come home. So she was that was affiliated with Barnard University, which is where Barnard College part of Columbia University, which is where she's going to college. And so she came home. And then I had a I had a first year student at Reed College in Portland, Oregon, and she came home. So all of a sudden, we went from being a family of four to being a family of six again, with you know, everybody a lot bigger than they were when they were little and in a very small amount of space. So we were trying to figure out what to do, how they could do their classes online, and also keep us from all killing each other. And interestingly, my husband is an introvert. And for him, it was an easy transition, he was absolutely delighted to have our daughters home, I adore my children, all four of them, I found it very difficult to continue because I've been working full time. And then I've basically been also running my 11 year olds learning pod almost full time. And I found it very difficult to continue to do all of those things, and also have four kids in

the house instead of just two. So it's been a lot more, I think challenging for me than it has been for other family members, aka my husband.

Kit Heintzman 13:25

What does health mean to you?

Jennifer Margulis 13:28

What does health mean to me? That's a question you're asking all of your people? I am. That's wonderful. I love that question. That's fantastic. I help means being vibrant and energetic and being able to do any of the things that you want to do. So when you're in good health, you're, you know, you're living the life that you want to live. And you're not suffering from diseases or comorbidities, or terrible symptoms or reactions to drugs. And I think also health to me, means, you know, eating really well enjoying being outside getting enough vitamin D from sunshine especially, and not taking a whole row of pharmaceutical medication. So often you'll hear somebody say, Oh, I'm really healthy, and then you find out that they're actually on 13 Different pharmaceuticals at the same time. pharmaceutical intervention and health are not synonyms in my way of thinking.

Kit Heintzman 14:40

How do you perceive the current medical infrastructure in its managing of COVID-19? And do you think that that infrastructure aligns with the goals of producing the kind of health that you just described?

Jennifer Margulis 14:54

I love that question, too. Um, I think that we have we're in an absolute crisis. In the United States right now, and we were in this crisis before Coronavirus, and it's just gotten so much worse. We have a for profit medical system, which means that many people make money. And many corporations make money, the sicker and the less healthy people are. And that, you know, I was sitting years ago sitting next to a doctor, Canadian doctor on an airplane. And we were talking about that. And he said, Well, that's really a conflict of interest, isn't it? I said, Yes. When you go to the hospital, and you're given a Tylenol in the markup is 6,000%. That, to me is a conflict of interest. So we are a country where we spend more money per capita on health than almost I think, probably than any country in the world. I haven't looked at the statistics. If we're still number one, we could be we're in that top. And we spend more money than something like 13 countries combined. And yet we have some of the worst health outcomes of any industrialized country in terms of our maternal mortality rates are ignominiously high, our infant mortality rates are terrible one in 54 children in America today has some kind of chronic disease. When I look at statistics like that, I think that our public health is failing our country. When I see that most Americans I mean that you know, a large percent of Americans are if I can borrow an expression from an Australian filmmaker, Fat, Sick and Nearly Dead, I feel concerned. And when I see the inequities in our system, when we know that people of color and African Americans are getting subpar access and subpar health when it comes to health, you know, when it comes to access to health, and when it comes to doctoring, and all of that and being belittled and ridiculed and you know, left on the street because they can't pay their hospital bills. I think that we're in a crisis. So that was something that I had concerns about before this ever started, you know, you know, this, of course, but some people who are listening might not we're one of the only countries in the world that doesn't offer maternity and paternity care for people who have just had a baby. So you look at the Nordic countries, and not only do you have 18 months of paid, depending on the country, of course have, you know, the potential to take up to 18 months to stay home with your baby, but your partner, whether that's a domestic partner, whatever gender that happens to be whatever status of marital marriage you have, your partner also gets access to, to time off. And you know, and

there's a really strong sense that we need to take care of our moms and dads and take care of our babies. And you see that in, in Scandinavia and throughout the world. And then you look at America where we're expected to go back to work when we've had a baby and we're still bleeding through our legs, you know, you you realize that something really doesn't work in this country. So that was part one. And then part two was how do I think our response has been to the Coronavirus? I think we've done a an absolutely devastating job. And I think that it's very clear when you look at our health outcomes. So we are, you know, if you look at industrialized countries are we are among the worst we have the highest death rates. And we have to ask why that is, you know, when we look at the highest maternal mortality rates when we look at our breastfeeding rates, because we have we score very badly on breastfeeding, you know, and women who are trying to breastfeed and are not able to, they feel like their body is a lemon, they feel like their breasts don't work.

Jennifer Margulis 18:38

And what they don't understand is there's been a systematic, there's a system that makes it so hard for them to get support. So when you fail, and I say that in quotation marks at breastfeeding, it's not because there's something wrong with your breasts and someone in Norway has better breasts than you do. It's because you're not getting the the mental and physical and health support that you need to actually successfully meet your breastfeeding goals. And so with Coronavirus, the public health messages have been completely absurd. And I'm sure that I'm saying something totally different from the other people you've been interviewing, but the idea that we would terrify people, separate people, isolate people and tell people that if they go out in public with a free face, they are potential murderers. And that that is the way that we should be promoting good health is crazy. And I think that history will not look kindly on this moment. You know, I won't get the details, right. But there was one person early on who I interviewed a historian at a university here in Oregon who was talking about I think it was a plague in Hawaii. I think it was Honolulu. And he said that they thought and now I can't remember what the disease was. Forgive me, but he said that the public health officials thought that they could, they could burn it away. And so they they were going to burn buildings to, to root out this plague and they ended up setting the entire city on fire. And he use that as an example. You could you can fill in the details for me. But he used that as an example. And this is what stays with me as just very cautiously and carefully saying, you know, sometimes what we think we're doing for the benefit of public health and what the results are, are two different things. Needless to say, burning down Honolulu did not help for word, Hawaii's health and I think terrifying people making them even afraid to go outside. So I have many relatives in California and they are afraid to go for a walk outside. So taking our older adults and making them scared in the interest of public health is absolutely misguided.

Kit Heintzman 21:05

Relatedly what if the restrictions been like where you are?

Jennifer Margulis 21:09

Um, totalitarian would not be too strong a word. So I live in Oregon, we have a governor who is very eager to blame people. And our public health campaign was something like have you murdered someone today? So basically, stay inside, stay safe, save lives, have you inadvertently killed someone today, literally, like this was the public health messaging. So if you're driving in your car, you're being accused of being a murder. And, you know, they're so and our schools have been completely closed, our small businesses have been closed, we were just told this week that she was going to extend these emergency measures until March. And there has been, they have never taken into account that we live in a huge state with a small population, we only have about 4 million people in Oregon. But we have a very big landmass. I think we're the fifth largest state in the union. And that different

areas geographically are having very different experiences. So she basically took that health information from Portland and hopefully we'll have time to talk about why some of that information is not accurate, but took that and extended it to the entire state. So we are in a state of near total lockdown. And we've seen at least a dozen businesses going out of business there. You know, you're not supposed to go outside. I think without wearing a mask. I'm not exactly sure why the governor gets to tell me what I can wear and what I can't, but people have just sort of understood that that's true. And they took all the basketball hoops down in our town, so that no children could play basketball. And they closed all the public restrooms and put up filthy disgusting porta potties. So we have a beautiful park here Lithia park, you can go walking in it, all of the bathrooms are closed. People have literally like think that it's healthier to go to the bathroom in their backyard so that people won't come into their house but the public so the very nicely maintained public bathrooms in the parks are now closed and locked. So nobody has a place to urinate or defecate and they have porta potties that they're not sanitizing. And that smell disgusting. And new. Y'all know what it's like when a porta Potti is full of human excrement. And then because they close down the the restaurants, again, there was a small time when they were open. And the last time I looked in this was a little while ago. So it's not it's a little out of date. But we had had a total of seven deaths in our entire county of 250,000 people so and I think every single one, but one was somebody over 70 or 75 years old. But this was a justification for, you know, shutting down the businesses again, but you're allowed to have outside. So now what several businesses have done is they've actually built structures that look exactly like restaurants, and they're quote unquote, outside because they have big, open flaps. There's absolutely nothing outside about them. But that's the only way that they can stay in business without getting OSHA violations. So yeah, and then I mean, in terms of like lockdowns, a friend of mine had an adult child who was getting married in the wedding was canceled, you know, five times because they couldn't do it indoors. We had organized a huge health conference, which I think was going to be wonderful for April. Of course, we had to cancel that because it would have been illegal. And one last thing, which is that Kate Brown, who's the governor of Oregon said if more than six people get together on Thanksgiving, you should call the police on them. So six people from more than one More than six people from more than two families wouldn't be safe and you should call the police on them. And that is actually part of what happened. A friend of mine is the governor is the her cousin is one of the chief of polices in Medford and and they got phone calls from people ratting out their neighbors for celebrating Thanksgiving. Welcome to America in 2020.

Kit Heintzman 25:29

How do you feel about the intersections of the police force and public health at this particular moment?

Jennifer Margulis 25:37

Well, it's funny because different police have responded differently. So the Sheriff of Jackson County said that he was not interested in hearing about people tattling on each other. So when some teenagers got together, and they stayed six feet apart on the hoods of their cars, and some some people were afraid and call the sheriff he said, Please don't waste our time with that we're not gonna, we're not going to come out and look at that. And when people were phoning the Medford police and telling them to go to go break up these Thanksgiving gatherings, they, they had a little piece of paper that said, Kate Brown has said it's not safe, and they left them on the door. And they didn't go inside and take them out. But what I've seen is there was a woman in Eagle Point who was arrested for not wearing a mask in a store. And you know, the American with Disabilities, the Americans with Disabilities Act protects people who have disabilities, and she had a medical exemption to wearing a mask and the police officer who arrested her was not wearing a mask. So the idea that we would start taking the police to, you know, police citizens in their daily tasks, I've found deeply troubling, I think we have some incredible problems

already with the police the interface of police and citizens in the United States. And you know, we know that there's a lot of there can be a lot of racism and bad behavior and unnecessary violence among in the police force. At the same time, they're they're trying to do their job trying to keep people safe. It goes way beyond keeping people safe when you arrest someone for walking into a store, who is not medically able to wear a mask that just baffles my mind. And I find that to be ridiculous. But I will say that a lot of people spend a lot of time these days on social media ratting each other out and complaining and saying, the reason why we haven't gotten this epidemic under control is because Healthy People aren't wearing masks. I mean, it's incredible to me that people do that on places like next door, which is a social media program for you know, neighborhoods, because literally, there's not a single person in our town who isn't wearing a mouse. So I think they're just trying to find something that they can hold on to and someone that they can blame and the newsflash that I think will realize 100 years from now is that healthy people don't make other healthy people sick. And if you want to spend all of your time worrying that you're being inadvertently exposed to something by another healthy person, it's time to work on your immune system, and also your mental and physical health, and not spend your time complaining that healthy people are going out in public.

Kit Heintzman 28:22

I remember you had said earlier that you are both a researcher but a part of that job is then the generation and output of information. What sources have you been turning to in conducting that research? And then how are you translating that and communicating it to others?

Jennifer Margulis 28:39

Yeah, so I mean, when I'm doing research, I like to talk to a variety of experts. And also, you know, just humans to get their, their point of view, whether they're an expert or not, but mainly my, I mean, I'm in touch with a lot of medical doctors, they tend to get a medical doctors who are critical of the current medical narrative. So I'm usually talking to, you know, very highly educated and well trained MDs, but who have a more nuanced approach. And so those are my primary sources. And then of course, I'm reading voraciously, like everybody else's. And those are the regular sort of media, although I will say excuse me. I will say that I stopped listening to the radio. So I used to listen to, to everything I used to listen to NPR that's National Public Radio, CNN, the BBC, and Fox News, just because I wanted to hear from all the different, you know, news outlets and I was interested often on Fox News, you get information that you don't hear on NPR and vice versa. And a few months ago, I realized that it was just not conducive to my mental or physical well being to be listening to the news because what happened at that sort of at that moment was we saw the death rates were going way down. And there's there's a problem and how we're conducting our how we're tabulating our death rates, but the death rates started going down. So instead of sort of celebrating that, which is what I was sort of hoping would happen in the mainstream media that we started talking about cases, and I had one experience where a teacher one of my daughter's teachers who teaches a body Basics class, went to California and came back and got tested and tested positive and went absolutely crazy, got hysterically afraid and put herself in quarantine for two weeks. She never had a single sniffle she didn't, you know, she did not cough. She did not sneeze once. And she became very hysterically afraid of Coronavirus, although she theoretically had it and she got through it just fine. Or it was a false positive, which is much more likely. But I find that this kind of relentless fomenting of fear that we're getting from the media is making it so I don't want to use that as a source anymore. I'd much rather look at the the CDC look at the FDA look at the Health and Human Resources like health and human services like all of those websites. I do and I look a lot at peer reviewed science. I haven't spent as much time reading the peer reviewed

science about Coronavirus lately because I've been busy with my with my for with my work projects. But that's another main source of information for me whenever I'm writing about anything.

Kit Heintzman 31:31

You've spoken a lot about a sort of fear based approach to ideas around safety. Are there things that are still feeling unsafe? Are there advisements that seem more reasonable to you than some of the ones that you've described as unreasonable?

Jennifer Margulis 31:51

Well, I mean, I think that our approach to Coronavirus has been has been unreasonable. And I think and the the statistics from my state there that out in my county, there's been four times as many deaths from suicide than there have been from Coronavirus. And, you know, that becomes hugely problematic when we see ongoing deaths of despair. And when we see domestic violence, and we see people who are incredibly lonely, and the loneliness and the mental health and the depression that we are seeing among young people and among our elders, makes me think that that is not the right response. I believe that Hume I believe because of the science that I've read, that human beings need to be touched. And, and that's how we generate growth hormone. So for children, a child who isn't being touched, cannot grow and adult, you know, we need we need growth hormones to keep our bones strong. And so to tell people that they shouldn't hug or touch each other healthy people touching and hugging each other is somehow going to spread disease, I think is grossly misguided.

Jennifer Margulis 33:04

And I see that both on the personal and kind of, you know, the micro and the macro level, I think that's very, very harmful. So I have a question about where the idea that six feet apart would keep us safe every single time I've been in public with all the absurd stickers on the ground telling you to stay six feet apart. I've never seen humans able to stay six feet apart. I don't. I don't think that that's actually possible in for humans, we're mammals we live together in community. And so to tell people I mean, what is possible is people can put masks on and then they're inhaling their exhale. The reason why we exhale is to get rid of toxins from our bodies, we do need to ask the question of whether those masks are effective. To date, I've read 35 peer reviewed articles about it. And I can tell you if you spend the time so not just looking at the abstracts, but you actually print out these scientific articles and you read them from cover to cover, you will see that the mask mandates have no basis in science. I do not believe that we should be telling people to wear masks. And I can give you another example why not only it so you don't have to spend 100 hours looking at this. If you look at the outcomes from Sweden, Sweden, Sweden, they are not masking, the public schools have remained open. And people in maybe when they're taking public transportation or if of course, if they're in the hospitals, they will be wearing masks. But in general, in Swedish society, they're not doing it and they've had much, much better health outcomes per capita than we have in America. So something we're doing is wrong. And so instead of saying, Okay, let's look at this. Let's figure out what we can do. And I'd love to tell you what I think we should be doing. You know, instead of looking at that we just say okay, let's double down and do what we're doing. That's not working but let's do it even more. You know, let's let's close things back down, let's keep people apart. Let's make sure everyone is masking and shame them into it. And by the way, nobody actually cares what kind of mask you wearing. So if you want to if you want to wear a cloth mask and you want it to work, you have to wash it. I literally got a nosebleed one day and I had there was blood on the mask, I was wearing a bloody mask, and nobody batted an eye. I mean, truly, that was disgusting. I didn't, I didn't have access to any place to clean it. And it was the only mask that I had, they would have not let me in public if I hadn't been wearing a mask, but the fact that I was wearing a mask that literally had blood on it.

And most people I know who are wearing cloth masks are wearing the same mask for a week at a time you're not supposed to be touching your face when you're using a mask correctly. You're using it once you have gloves on, you take it off, and you make sure that anything that you exhale is being folded carefully, you pull off those gloves and you put it in hazardous waste receptacle. That's how you can use a mask correctly. So this idea that we can somehow stop this virus by covering our noses that are our faces so that you can no longer have interactions with humans is not guided by science. And you can say that it is so go look at the CDC and then you look at the the seven articles that they use to justify the masking and all of those are about the flu. None of them talk about masks. They talk about whether the flu is aerosolized. So we believe that Coronavirus is spread by aerosolized particles, it's very likely that it's also oral fecal, and that that might be a more major form of spread. But one way or the other, we have never, ever in the history of the United States Public Health told people to wear masks during the flu season. So we're using this information about the flu being aerosolized to suppose that Corona viruses spread via aerosolized particles in order to justify mandating and forcing people to wear masks. If you want to follow that logic, and it makes you feel better to have a filthy diaper on your face go right ahead. But you can see from our health outcomes that it's actually not working.

Kit Heintzman 37:11

I wanted to follow up one of the things you said, you've referred to as the how safe it is for healthy people to spend time with other with other healthy people. What kind of mandates do you think would focus on unhealthy people or people who are positive or people who are testing positive but asymptomatic?

Jennifer Margulis 37:34

Well, so I think that you have to look at countries where things are going better. So you know, to have I mean, and then there's different narratives from each of those countries. And of course, you're going to anyone who looks at this is going to try to sort of confirmation bias, right, what they already think already, but I think, you know, in Taiwan, they've had a tiny, tiny number of deaths in Sweden, things are going better. So in Sweden, I like to use Sweden as an example. I think that that is an interesting case where they've asked people who are able to, you know, to social distance and to stay home, they haven't, they haven't divided society into essential workers and people who could just be dispensable. And, you know, it does make a lot of sense for people who are at risk to, to try not to participate so much in, in in places where they may have more exposures. I think that does make sense. What I don't think makes sense is, is taking children putting masks on their faces, and telling them that they have to do school on the computer, which is absolutely devastating to their mental and their physical health, to taking down basketball hoops, and to basically scaring people into thinking that healthy people will make them sick. I mean, that is so effective. That is a really effective pharmaceutical talking point. If you want to sell things to people, you terrify them, and you say there's no solutions. And the thing is different countries are actually using different medications to help this virus. So what we need to know is we need to know how do we best support the human immune system? And how can each person do that, and I can tell you, the way to do that is not by staying in a high state of stress. And in the highest state of isolation because humans don't thrive in isolation. They thrive in society. And, you know, so first of all, we need to know all the ways to support the human immune system. And then we need to know what do we do if we actually get sick? And, I mean, I can just give you so many heartbreaking examples of, you know, people that we were trying to keep safe, who we ended up who are now dead. So, you know, we're trying to keep them safe, and we didn't give them a chance to say goodbye to their loved ones. And it didn't work because now they're dead. And so what did we keep them safe from? We were trying to keep them safe from Coronavirus and we were trying to keep it out of the population but it's in the population it's spreading anyway and We're seeing, you know, devastating outcomes with our loved ones and

doctors, especially integrative doctors who have alternative suggestions about what you can do to support the immune system or what you should take if you do get Coronavirus have been shut down by. In Oregon, the doctors here were sent letters and they were, they were threatened with getting \$25,000 fines, even doctors who just recommended that you take extra doses of vitamin C, it seems that Vitamin C is something very helpful to boost the immune system. And we have a lot of data showing that and now there are news articles coming out about it. But early on, when doctors would say listen, I want to, I want to suggest to you that you, you know you start taking more, eat a lot of citrus make sure you know it helps with iron absorption, make sure you're eating really healthy, whole fresh foods, and then maybe consider supplementing with vitamin C, those doctors were getting cease and desist orders from the FTC. I wish I were making this up. But I'm not. Yeah.

Jennifer Margulis 41:01

Another thing that you can do absolutely everyone is you can optimize your vitamin D levels. And that is that involves I mean, we also know when we have good data i i tend to be a little skeptical because I'm like I don't I don't think that taking a whole lot of supplements is the best way to be healthy either. So and then when you see data, you have to say, okay, somebody's trying to sell you something. But it looks like from a variety of sources that we have good, pretty good information that that Americans especially Americans in northern climates tend to be vitamin D deficient. And so making sure that you're optimizing your vitamin D levels, I would even suggest going to the doctor and asking them to test them is something that you're going to do to support your overall health and it's something that looks like it's very beneficial also in combating Coronavirus. I mean, these are, you know, eating real, healthy, fresh whole foods, you have never seen a billboard or a public health official say to you stop eating processed crap. Don't feed your kids Pop Tarts, look at the ingredients and make sure it has no red dye number 40. In it, you just don't see public health officials giving that message. In fact, women are told not to breastfeed when we know that breastfeeding is the there are literally over 1000 peer reviewed studies showing that exclusive breastfeeding and breastfeeding in general is one of the best things you can do to ensure your child's immediate and lifelong good health. And you don't see any signs up saying telling people to breastfeed or helping support them with that, in fact, you get shamed if you tell people to breastfeed, I've heard people say, it's not it's anti feminists to encourage breastfeeding. So you know, so like what I mean, the public health messages that I wish that we could get across are at odds with corporate greed and corporate gain. So if we tell people stop eating processed food, we have an entire industry that's going to scream and yell and you know, do everything they can behind the scenes to take those messages away. I think it makes it very difficult to get any kind of honest information. We peddle formula in the hospitals in the United States, we actually give women branded formula. And we know that if they see the brand, they are going to be much more likely to use that brand when they leave the hospital. That's the kind of thing we do. Because we live in a culture where corporate America decides how and when and where we should be healthy instead of public health officials who actually care about the health and well being of our country.

Kit Heintzman 43:34

I wanted to give you space to go back to you because you had said you wanted to get to it. How you see the difference in the scientific literature and advisement coming out about Portland versus the rest of rural Oregon?

Jennifer Margulis 43:49

Oh, no, I mean, I just it's it's very difficult to to be generalizing about an entire state. So you know, Portland has had much worse outcomes than we've had here in Southern Oregon. We're five hours from, from, from Portland. And, you know, my brother lives in New York City. And he was quite upset with me for not being as concerned

as he was. And I said, Listen, we're living into really different realities. You're in New York, and I'm in Southern Oregon, I'm in a place where there isn't a huge population density and people are spread out. And we also have a very health conscious, I live in a very health conscious town. And I said, these are different. These are different, there's different, I think we shouldn't be just lumping every single person in the United States together, but we should be looking at the actual geographic reality of the situation. And, and my brother said to me, you know, you're wrong, you're wrong. And, and I said, but we've been doing so well here. I don't think we have anything to fear. And he said, it's coming. It's coming. I mean, like, he really drank the fear, and I guess it's really addictive and it's kind of exciting to be that afraid. And I said, Well, he said you're gonna get It's gonna come to you. And I said, Well, what if it doesn't? Will I be right? And he's like, it will, it's just a matter of time. So anyway, and you know, it hasn't, it hasn't we haven't seen we have, in fact, in our area, you know, nurses and doctors are going out of business, they're not they don't have the, we don't have any problem with over hospital, you know, with hospital beds, like we were told in March, two weeks to flatten the curve. And it's been, what 10 months, since we were told, like in two weeks, and then everybody is going to go back to normal. And instead, we, we want to impose and, you know, more and more draconian measures. And it just doesn't make sense to me to look at to pretend that your potential for exposure and bad outcomes is the same. If you live in Portland, or if you live in Southern Oregon, I'm 15 miles from California, or you live in Italy, or you live in the epicenter of the epidemic in New York City, I think that we have to have localized and very specific recommendations, that makes sense to a geographical region. And it did not make sense to close the schools in our town. And even though they've been closed, what's that what that has done has created a just a, as I mentioned before, young people who are incredibly depressed and isolated and who are not seeing their friends or being in community, but they are spending countless hours playing video games and buying things off of Amazon and other online websites, which is a tremendous boon, you know that, you know, four of the nation's you know, most wealthy billionaires have just gotten wealthier and wealthier during this. Pants, so called pandemic, if you would like to get your health information from billionaires who stand to profit and are profiting off of you go right ahead. I don't think that those are credible sources of information, but you don't have to agree with me.

Kit Heintzman 47:00

Thank you so much. We're nearing toward the end, where I'm gonna ask you a few questions about that are sort of spurred forth by my interest in these oral history interviews, which is, there's a lot of focus in the discussions of COVID-19 and corona on the need to sort of have the finger on the pulse of the latest scientific literature. I was wondering what you see the job of people with humanities training and social sciences training? What is our job to be documenting to be thinking about in this moment?

Jennifer Margulis 47:35

I mean, I think that I think you're, I think you're doing that job in terms of talking to people. And I think it's wonderful to actually get the sort of on the ground information from how people are thinking and feeling in this moment in time. And I would also especially encourage you to talk to some teenagers and talk to some younger people, because I, I find it so hard to see a baby on her mother's lap with the mother wearing something that obscures her nose and mouth. And, you know, and I think that, that may have some pretty terrible I mean, I don't know, but I think that humans need to see each other, I think we need to know what we look like. And we need to be able to read our facial expressions, I would be very interested to be having conversations with five year olds, six year old seven year olds, 10 year olds and 15 year olds, and finding out how this moment is affecting them. So that would be a wonderful thing for social scientists to do. I actually think that, you know, having experts repeat the narrative that everybody already knows, and most people are following is not going to historically be

particularly interesting. It's going to sound the same over and over again, I would encourage you to talk to people who are looking outside of the box and who might have a different point of view. And ask, and that point of view that's being very systematically censored. And, and people are told that, you know, they're crazy, or they're crackpots. And we'll see time will tell who was crazy. We were also till when people said, we think that they're that the United States government is infecting black Americans with syphilis. They were told that they were crazy, and they were crackpots. And it turns out, you know, there's been many moments in American history when we've thought of something as a conspiracy theory, that and we've dismissed the people who are trying to blow the whistle on that conspiracy. And then we found out later that it was true that our government this is the same public health authorities who who knowingly infected African American white men in Tuskegee, Alabama with syphilis so they could study the progression of the disease. So we see that as something that happened in a historical moment in the past, and we can't see outside of our historical moment in the present. But in the future, we'll go back. And we'll see that there were many things that we were doing, recommending saying, etc, that were actually completely wrong. It's just that we're stuck in this moment in our culture. So we don't actually, we're not actually as aware of them as we will be in the future, I hope.

Kit Heintzman 50:25

Thank you so much. I think that rounds out all of my questions, except if there's anything else you'd like to say about your personal experiences of COVID-19. Living Through 2020, and the emergence into 2021, that you haven't had a chance to speak about yet?

Jennifer Margulis 50:43

Yeah, well, just something very interesting is that so when my daughter came home from South Africa was right at the beginning of this epidemic, and it was very difficult for her to get tested. And she said, Mom, I think I have it and I said, all you don't, you're just you were on airplanes for 36 hours, you're fine. And she said, No, no, I think I have it. And I said, I really think you're fine. And so she went and got tested for the flu, she tested negative, she wanted to get tested for Corona. They they sent off the test. They said she could do it. It was right at the beginning when there weren't very many tests. And so the CDC sent up her, you know, she's sent this stuff off to the CDC. And she woke up one day found out that her roommate in South Africa had it for other people or six other people on the program had it. And she lost her sense of taste or sense of smell. And I said, Oh my God, you do have it and I am the first person to admit when I'm wrong. I you know, as a as a scientific researcher, I understand that science is a process of questioning. And that's something that we know today is not what we're going to know tomorrow. And that when you're wrong, you need to admit it. So she and I had made a bet we had bet \$30 that she didn't have Corona. I said she didn't. She said she did. The minute she said I lost my I can't smell or taste anything. And she never spiked a fever. She didn't have trouble breathing. She didn't have any of these classic symptoms. She just was really really, really tired. And she had been, you know, going through all these different time zones. So she said, So I handed I like started peeling 20 off. I gave her 60 bucks. She's like, why are you giving me money? Mom, I said cuz I need to eat humble pie. I thought you didn't have it. Clearly you do. And she got one of the first CDC confirmed tests. And I was like, I just think I need to admit that I was wrong. And I'm really sorry that I didn't, you know, take it more seriously. Well, you know, my daughter didn't have any. I mean, she did have a little bit of respiratory stuff afterwards. But she ended up having a very mild case. And I think it's important for us to remember that Coronavirus is not a death sentence. You can have it and have no symptoms. You can have it and have very severe symptoms. You can have it and die. You can have it and not know it. But I've been exposed to it now many, many times. Because not only then and I was like in the she was kind of quarantining but we sat on the couch together and eat popcorn and I did not get it. She was quarantining from one

of our family members who has health problems. But there have been many other times like, you know, and and how and I've been exposed to a million other things as well, probably the flu, maybe I've been exposed to herpes, maybe I mean, there's so many other things, that it's not just this one virus, that is part of what we, you know, may potentially end up getting. So what was my point in all of that? I just think that it's important to remember that the experience is going to be different for different people. And that if I say the vast majority of people recover, which is CDC data, and that the vast, vast, vast majority of people are going to have very mild cases, it looks like this virus is morphing into something pretty mild that doesn't negate the experience the absolutely devastating experience that some people are going to have and the fact that we have lost, you know, so many people that the majority of the deaths from Coronavirus are in people who have also other health challenges. And that's why I want to go back and this is a great way to end to this idea that we need to look at what does it mean to have lifelong and robust health which is a question you asked me at the beginning because in order to fight Coronavirus, and in order to fight any other potentially infectious disease, what we really need is a strong immune system. And I wish that that were the message that the public health authorities were giving but of course that goes completely against their entire frame of mind because for them health comes from injection, or a pill or a bottle. It doesn't come from boosting the innate immune system that we were all born with and if you believe in God that God gave you so it's a total disconnect because I don't believe that we're going to get healthy by taking pills or injecting ourselves with a vaccine. I think we have to be healthy from the root of our bodies. And and and that that's how we can most effectively fight Coronavirus.

Kit Heintzman 54:59

Thank you. So much for taking this time to speak with me today I really appreciate it

Jennifer Margulis 55:04

You're welcome thank you for asking me