



Conscious Life presents

# ANXIETY SUPER CONFERENCE

## Stress Management and Emotional Resilience

Guest: Dr Ruth White

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### **[00:00:10] Meagen Gibson**

Welcome to this interview. I'm Meagen Gibson, co-host of the Anxiety Super Conference. Today I'm speaking with Dr Ruth C. White, a mental health advocate and writer.

Inspired by her own journey with bipolar disorder, she's a mental health activist and advocate who focuses on eliminating mental health stigma, expanding mental health services, and works with organizations to create healthier and happier workplaces and workforces by building emotional resilience and reducing stress, burnout and compassion fatigue.

Dr White was a social work professor for 20 years and is the author of *The Stress Management Workbook* and *Bipolar 101*.

Dr White, thank you so much for being with us today.

### **Dr Ruth White**

Thank you for having me.

### **Meagen Gibson**

So I would love it if you could start by telling me what got you interested in the topic of stress management.

### **Dr Ruth White**

So it really was my personal journey with bipolar disorder. So one of the things that I learned about having a mental illness is that stress is a trigger for pretty much every mental health disorder.

So, for example, things like schizophrenia is often brought about by some stressful event, oftentimes, for example, with going to college, for a lot of adolescents, divorce, etc. Depression is triggered by stress. Anxiety is triggered by stress, as well as a lot of physical illnesses. So heart disease and hypertension and obesity and diabetes.

So what happened with me is that I wrote about bipolar disorder, and again, a lot of the work I did with my mental health providers was about mediating stresses in my life and learning how to deal with them in a way that was not going to trigger symptoms.

**[00:01:59]**

And so it's interesting, this story of how I wrote, *The Stress Management Workbook*. I was being asked by a publisher to write another book on bipolar disorder and I pitched back to them that I was now interested in stress management because I felt that that was a good focus to prevent mental illness. So a way of promoting wellness, is to manage your stress.

And they asked me if I was a stress management expert and literally what I said to them was, well, if I write the book, I sure will be.

### **Meagen Gibson**

I like that.

### **Dr Ruth White**

I wrote a book, *The Stress Management Workbook*, which did very well. And after having a conversation with my primary care provider, he asked me one day if I'd like to come and work in his office a couple of days a week. And I said, what for? And he said, most of my patient's stresses is a cause of why they come into the doctor's office.

And he was right. I did the research, it's the number one reason people go to the doctor, are stress related conditions, especially in the developed world. In the developed world, but we have our diseases of lifestyle, okay, so COVID-19 is an exception, but generally speaking, it's not contagious diseases that are killing people in places like the US or Western Europe. It is stress related disorders.

And so that's how I got into the work of stress management. And of course, in social work, which I was a social work professor for many years, it's called compassion fatigue because you are caring for other people, you're listening to a lot of other people's trauma. It's also called secondary trauma. So people start to experience a lot of the same symptoms that their clients would experience because of the kinds of things they're listening to all day.

And then people get burnt out. And burnout was recognized by the World Health Organization 2 or 3 years ago as well, 3 years ago because 2 years ago was the pandemic, as a condition of the workplace. It's not yet an official disease, according to WHO, but it's definitely recognized as a condition of the workplace.

### **Meagen Gibson**

And I've also heard a term that's not, I don't think exactly what you're talking about when you talk about compassion fatigue, but also, moral injury, which is, I don't know if you've heard that term. Moral injury refers to the post traumatic response that you develop from seeing a ton of loss.

Like you're not responsible for, say, the mass deaths that have occurred in hospitals because of COVID-19. You're doing everything you can to help, but you're still deeply impacted by that loss and the stress that accumulates after years of treating people for that disease.

### **Dr Ruth White**

Yes. And so, again, a lot of medical providers and people that work in those systems, whether they be social workers in a hospital or even admin staff, have experienced this tremendous loss that they've

had to deal with for the past 2 and a half years. Also just from dealing with people who are going through that. So they're working with families, they're working with loved ones and friends who are also experiencing this.

**[00:05:17]**

And there was also some discussion around the fact that a lot of times, for example, nurses were facilitating last conversations with loved ones over a phone or laptop.

**Meagen Gibson**

Devices.

**Dr Ruth White**

Exactly. So remotely where people could not come in and support that person as they transitioned out of this life.

**Meagen Gibson**

Normally what's an in person intimate moment where nurses and doctors kind of step out, is now being witnessed and facilitated by health care workers.

**Dr Ruth White**

Over and over each day.

**Meagen Gibson**

Multiple times a day in many cases, I'm sure.

And I know that you mentioned in a previous conversation that we had, that the doctor that approached you about doing that work in your office said something to the effect of, if I can treat people for stress and address their stress, I would have half as many patients.

So it's odd to me, not odd, it's wonderful that he brings you in to work with his patients, which is actually going to reduce his patient load but make his patients healthier overall. That's a good doctor.

**Dr Ruth White**

Yes. And I didn't take him up on the offer because I was a bit of a digital nomad and the idea of being in some office two days a week... But it struck me because I began to realize just how direct it, wasn't indirect, how direct the impact of stress is on people's lives and how not managing that well causes so much injury.

And again, in this whole great resignation, one of the things that they're realizing is that people are coming to terms with the conditions of the workplace and saying, hey, you know what? This is great, but flexibility, I think, is worth something like up to 8% more of salary for people. So that if they feel more in control of their time and place with regard to work, they're willing to, that accounts for an extra 8% in salary.

[00:07:19]

And as people are realizing, money isn't the only thing that's motivating people anymore.

**Meagen Gibson**

Absolutely. Especially when we have so little bandwidth left, that a return to a lack of flexibility feels like an insurmountable factor that many of us have had the privilege of having flexible schedules and working from home and things like that. Those of us who've had that privilege to go back to something other than that feels untenable.

**Dr Ruth White**

Yes. And it's funny because, literally last night I was writing a piece for *Fast Company*, and I was editing it this morning. They asked me to write a piece about the stress of hybrid work and what will that mean for people? Because it's also in flux. I mean, this is also a new thing. People were doing hybrid work before, but not on such a huge level.

I've been remote for 9 years. I know lots of people work in project management and software development and customer service and all of these things where people were working from home. But they were working from home, they weren't necessarily structured in the office on specific days, that's a new thing. And each company is doing something different.

And there's going to be research to figure out what's the optimal way of doing hybrid work. I'm sure there's just going to be a ton of research that will get done in the next few years about the impact of hybrid work on, not just stress, but productivity and creativity and collaboration and creativity and all that.

**Meagen Gibson**

Absolutely. Because there is a large segment of people, whether you want to branch them into introverts and extroverts, that do thrive on those in person environments and do thrive on the collaborative nature of working and creativity that only happens when you're all in a shared space.

Things like conferences and things that we used to look forward to and also loathe and hate at the same time, all of us are like, what I would do to go to a conference right now.

**Dr Ruth White**

I went to a happy hour, a work happy hour on Friday. I hadn't done that in years. And so that was cool because this company that I've worked for, I got hired during the pandemic, and then we got bought by another company, and so just going to that and the serendipity of the interactions that people have.

And Steve Jobs was famous for not liking people working from home because he liked, and that's why he created Apple, the layout of Apple.

**Meagen Gibson**

The campus.

**[00:09:58] Dr Ruth White**

Yes, was to encourage serendipity and interaction because he felt that it was in those casual interactions that new ideas were developed and people came together as teams, etc. Which is interesting because I think Apple went back fully yesterday. Was yesterday the 11th? Yes. So they're back in the office on their hybrid situation with other companies to follow.

**Meagen Gibson**

And most employers don't put that much thought and consideration into their work environments.

**Dr Ruth White**

Exactly.

**Meagen Gibson**

They're not all quite that inviting or collaborative or innovative, are they?

I know we've talked around it, but if you could be really clear on how stress relates to anxiety and symptom management of anxiety.

**Dr Ruth White**

So what we'll find is, for example, I just wrote a piece on having panic attacks at work, for *Harvard Business Review*, and they're putting together a book called *Mental Health at Work*, and it'll be out this fall.

And one of the reasons they want to talk about that was because panic attacks, for example, sometimes they're not easily directly linked to a specific stressor.

So, yes, some people have a panic attack right before giving a public talk. They'll start to breathe really heavily, they'll need to go to the bathroom, they'll just begin to feel an overwhelming sense of dread and they might have to just sit and wait it out before they go on.

Other times, people have panic attacks and can't really figure out why they're feeling the way they are.

**Meagen Gibson**

The Hollywood version of the panic attack is, you're backstage about to go out in front of a big audience, and that's when it hits you. For the majority of people, that's not their experience with a panic attack.

**Dr Ruth White**

Exactly. It can just be they're sitting there going, why am I feeling this way?

And in treatment, people start to link some event to the symptoms that follow, but oftentimes people are not really aware.

**[00:12:02]**

And part of that is just the body response. People often think of fight or flight, but they don't think about the freeze. And so your body sometimes just literally freezes. You feel as if you're about to pass out. And it's a delayed reaction to a stressor, which is different from just normal anxiety.

So normal anxiety is usually directly connected to a stressor. Whether it's you're having a fight with your kid, your loved one, you're about to meet with your boss, traffic, traffic can give people anxiety because you're running late.

And I remember one time my daughter said to me, she was about 4 or 5, and she said to me, "Mom, you know they can't hear you, right?". Because I was yelling and screaming at somebody while driving and her little logical brain is like, what is this woman doing? But I was trying to get her somewhere in a certain period of time.

And so a lot of times too, anxiety is not something that, for example, men are taught socially to experience. And so sometimes, for example, the anxiety will show up as anger.

I worked in a maximum security prison with late adolescent boys and worked in secure facilities with teenage boys, and a lot of their anger was really anxiety. But they're not socialized to experience anxiety, whereas women are. And of course, if you go back in psychiatry, the history of women being hysterical, etc. and that being pathologized instead of just a normal response to stress.

And so again, these are gendered responses that are socialized, but anxiety is also just a normal reaction to stress, and it can oftentimes make us perform better.

So stress is not always a bad thing, and it's about the response to stress and not necessarily stress itself. So a little bit of anxiety is going to keep you on your toes when you're giving a speech. What you don't want is that you're so anxious you can't remember the words you have to say or your hands are sweating so much or now you're getting subconscious.

Somebody on the starting line, like nobody shows up at the Olympics without some nerves. That's again, just a normal response to a stressful situation that often keeps you sharp because of what happens in that stress response.

The anxiety that people are feeling are the cortisol. It's the adrenaline. The adrenaline is making your heart pump faster. It's making you breathe faster because you want more oxygen to the brain. You want more blood to the brain because you would now have to think, and you need the clarity for you to make decisions and for you to perform.

So I want people to be clear that anxiety is not always toxic and it's not always a maladaptive response. It's actually an adaptive response to stress. It's just the degree to which that anxiety impacts your ability to do the things you need to do in the moment.

### **Meagen Gibson**

And as you were describing that, I was thinking, it's basically like human beings first performance enhancing drugs. All of these chemicals that flood into a stress response and anxiety to help you perform.

**[00:15:33]**

And I think what I'm hearing you say, correct me if I'm wrong, is that if you're paying attention to that and there's a chance for that, if there is a performance expected of you and you're able to use the chemicals that are flooding your body in order to assist you in that performance, then that's great.

But if you're getting flooded with the chemicals and those responses because of things like, your boss approaching your desk or you're having an awkward conversation with somebody in the lunchroom, and then all these micro moments throughout the day where there isn't this discharge and you accumulate stress, then that's going to lead to more anxiety and less stress coping responses and more of an anxiety build up.

**Dr Ruth White**

Yes. So again, it's why people go get a massage. We feel it in our necks, our shoulders. Some people feel it even in their arms or their back. So there's this tension. People get tension headaches that are related to anxiety as well, that build up of tension and stress.

And so oftentimes when people go get a massage, they're literally dissipating the physical build up of stress in the muscles, both in biochemical ways, but also in explicitly physical ways that tension sits in the body.

And that's why often when I'm talking about stress management, there's the physical discharge. So mindfulness stretching, those kinds of yoga, those kinds of things literally get the stress out of the physical being, which is different from the psychological discharge of stress. Which usually requires, especially with anxiety, it requires you to reframe an experience so that it is less anxiety provoking.

**Meagen Gibson**

And so much of this is a language problem as well. We think about mental health, when mental health is actually very physical. There's a lot of body processes and actual feelings in your biology involved in mental health. And so what you just said about movement is such an important piece.

**Dr Ruth White**

Yes. And I like to tell people, it's funny that we have brain chemistry, but it's like, the brain is not a sealed off thing. Whatever is in my blood is going to my brain because it's just one system.

And so sometimes we think of our bodies in these little parts because of the way the medical...

**Meagen Gibson**

I blame the US insurance industry for cutting our heads off.

**Dr Ruth White**

Exactly. And so when people think of neurochemistry, I'm like, well, neurochemistry is biochemistry.

And so a lot of this has also been attached to the gut biome. And I said, well, of course, because what you put in your body is the chemistry of the biochemistry.

**[00:18:27]**

And so whatever you put in your body is going to help all your parts, whether it's your skin or your kidney or your liver or your brain. It's all part of a system of chemicals that are released from different organs in the body for adrenaline, it's from the adrenal gland. That's where it comes from. And the adrenal gland sits on top of the kidney somewhere. So the endocrine system is also part of that whole anxiety response as well.

### **Meagen Gibson**

So what are three key things that you would tell people to do to manage their stress?

### **Dr Ruth White**

So I always start with breathing. Focusing on breath, especially deep, slow breath does, as it slows time down. So it brings you back to the present. It slows down your systems because usually in anxiety and stress, the heart is going... It's also doing it harder. So sometimes that's why people will feel like they're like, oh my God, my heart is pumping so hard and so fast. People also start breathing more quickly. Their endocrine system might have them sweating as well.

So doing that, slow deep breath also brings oxygen to the brain and gets you clarity and gets your system to slow down. So that's often where I start. It's just getting a hold of yourself, if you want to use layman's terms.

The second thing I would say is that over time, each individual will learn what works for them in reducing stress. So I often don't like to give some standard, "this is number two", because for some people, it's something physical. They need that stress ball or the popping, whatever it is.

### **Meagen Gibson**

The pop it

### **Dr Ruth White**

That thing. Or for other people, it will be removing themselves from a space. So whatever it is that works for you, that's number two.

And then number three is, I believe in journaling because it forces you to think about the why and the how of what has happened. It allows you to dispense with it out of your brain.

Because what often happens with anxiety is that even after the anxiety passes, people become really self conscious about what just happened and often inflate how serious or whether people noticed. Some people will say, oh my gosh, everybody was looking at me. It's like, no, they weren't. But that's just the response you have.

And so journaling allows people to put some rationality, if you can say that, on the experience. It also allows them to look back on that experience in the future and learn from that.

I know, for example, a lot of therapists use people's journals to help them understand their own experiences and put it in context, because if you write down what happened, you will know what



came before, you will know what you experienced and you'll see what came after so that you're able to link stressors to your stress response. And you're also able to start to understand the way you respond to stress in a way that you can then learn to manage it.

**[00:22:16]**

So those are just three things. Of course there's tons more.

**Meagen Gibson**

Of course.

**Dr Ruth White**

You asked me to pick three.

**Meagen Gibson**

I want to go through a couple of them just because I love what you said about number two. It's up to you, is number two. And I know I have several people in my life who water is a big source of anxiety and stress relief for them, whether that be a bath, a shower, or a swim. Access to water is really important and a really good reset resource.

And so for me, I would rather, I've got high maintenance hair, so I would much rather put my feet in grass than be immersed in water. So there's things like that. I love that you just said two is to pick your best thing that you want to do.

**Dr Ruth White**

Because it's so individualized how people respond. Some people just reach out and some people want to connect with other people. They want to vent somewhere. They want to just complain, yell, scream. Other people just want to go to the bathroom and cry. And that's fine as well. Whatever you need.

When I used to have anxiety when I was an athlete, so I was a track athlete, and I would always tell people I don't feel nervous. And then it'd be first call to long jump and suddenly my stomach was in knots. And I would go to the bathroom and oftentimes throw up. I would vomit. And then I felt better.

And it took me some while before I went, that's how I discharge my stress. Because once I did that, I went, okay, now let me go do what I have to do. But once I felt it so viscerally physically, I didn't really feel it in my brain.

So I didn't connect it at first. And I was like, why does my stomach, and I mean, my stomach would feel as if I had a stomach flu, like I'd just eaten the worst bad seafood in the world. But then once I released that tension physically, I was able to relax. But that was one way of dispensing anxiety for me.

Other people I know would just put on headphones and walk the track. So everybody had, and other people would just sit and turn inwards and do a mantra or whatever it was. And this is, again, even high performance athletes.

**[00:24:38]**

That's what sports psychologists often walk them through is, how to recenter themselves when they're under incredible stress to perform. And how do they get control of that anxiety so that they can perform. And it doesn't, what we call a choke. Which is when the anxiety gets so much that performance is negatively impacted.

**Meagen Gibson**

Because I think people underestimate how much energy it requires to be that anxious.

**Dr Ruth White**

Yes.

**Meagen Gibson**

When you're trying to be a high performance athlete, energy and when to use it is a huge, crucial part of the management of your performance.

**Dr Ruth White**

You have to focus. And anxiety gets in the way of focus because now your brain is thinking about the future in a negative way, which doesn't allow you to focus on, okay, what am I going to do now? I need to run, take 7 steps, get up in the air, do this movement, and reach for as far as I can or run as fast as I can or whatever it is. And so it gets in the way of that focus because your brain now is doing extra work.

**Meagen Gibson**

Absolutely. Well said.

And then the point that you made about journaling I loved as well, because I know that I've experienced personally, you write it when you're in the moment and it allows you, when you go back later, with a, as you said, a rational brain and some objectivity, with compassion toward what you were going through at the moment to say, okay, wow, I know that I don't feel the same now as I did then.

So if I don't feel the same now as I did when I was in it, it wasn't necessarily as true as I thought it was in the experience that I had it. And if I can realize that and understand it, it might give me just this much more latitude next time I'm in that kind of experience and help calm me just a little bit to know that there is a time in the future where this won't feel so bad.

**Dr Ruth White**

Yes. Getting through it is also a way to reduce anxiety. Because oftentimes anxiety bills and panic attacks happen more often because people are afraid of it happening. So just the thought of it happening actually triggers that more anxiety.

That's why some people do reach out to someone when they're having a panic attack, for example, because that person is helping them get re-centered. Because somebody might feel like I'm literally having a heart attack. I had two friends who ended up in the ER thinking they were having heart

attacks when they were having a panic attack because it felt as if they were dying. They couldn't breathe, their chest was tight.

**[00:27:30] Meagen Gibson**

Hands can get tingly.

**Dr Ruth White**

Exactly. So it can mimic that feeling. When again, people often say, well, it's on your head, but it's also in your body. So it's in your head, but what's in your head is impacting your body in a very explicit, visceral way.

**Meagen Gibson**

Absolutely. I also want to touch on, because of your experience with bipolar disorder, can you speak to people who are either living with the mental health stigma that comes with that, or love someone that has bipolar disorder or many of the other mental health disorders that have this kind of stigma?

Because not only are you experiencing stress and anxiety, as you said, that can be a trigger for some of these things to develop, but then you're also adding on the stigma that goes along with it, that can increase the stress and anxiety, I'm sure. So I'd love it if you could speak to that.

**Dr Ruth White**

Yeah. One of the things that I've done in my writing for the last 20/15 years, maybe, more than that, I guess, is to talk about stigma. In fact, the first time I was asked to write about my experience, I refused because I thought I just didn't want that to be what people knew about me.

And to be honest, it was the academic in me that got to writing because that particular project was an Oxford University Press book and I was going up for tenure, and Oxford University Press is as prestigious as you can get. So then I said, fine. I thought, well, it'll be a chapter in a book on a shelf and nobody will think about it.

But writing about my experience, and it was specifically about my experience spending a week in a mental health facility after a bit of a mixed episode, mostly a manic episode, and people that read it reached out to me, and it was amazing just how many people were talking about the stigma.

So I had people who were in grad school at Harvard and Columbia, and professionals who did not want to seek help or did not want to tell people or ask for support. In fact, when I was at USC, the second book I published on bipolar disorder, because of my negative experience at my previous school, I didn't share that it was published. I shared it with the PR people, but I tell anybody my department.

I woke up one day and it turns out that one of my colleagues had bipolar disorder, had not told anyone, found my book and decided to share with people that he had bipolar disorder by saying, you guys all thought I was a little crazy anyway, this is what it was and that it was inspired by me writing this book to be more public.

I found it ironic because I didn't want to share that I'd written that book. And nobody knew that I was very deliberate in not doing that. But I was surprised at how many people then came out, I call it

come out the crazy closet, to talk about, not just their own experiences, but also talking about the experiences of parents and siblings and children.

**[00:30:51]**

And it's really important that people realize that if you have cancer, most people now aren't ashamed of having cancer. There was a time when women wouldn't talk about breast cancer. Now we have breast cancer marches, and women are marching down the street with their boobs scar, which has got tattoos on it. It's just a different experience.

It's the same thing like addiction. People get a lot of positive experience for being sober for X amount of months or days or weeks or even hours. But being symptom free doesn't get the same social reinforcement. If you say I've been... You don't get an award.

**Meagen Gibson**

There's no chip for that.

**Dr Ruth White**

There's no chip for, I've been one year without depression or whatever it is.

And so that's why I think it's one of the last frontiers for people to be willing to share that.

It's the same thing with, I think about even things like artificial limbs. Again, people used to hide them. Now people have them in fashionable colors, and they're much more willing to show that. And fashion has taken that in as well. People are missing limbs and they're still in a fashion spread. So it's more accepted.

Mental health, I will say that we have come a long way. Therapy is a lot more normalized, people talk about it.

**Meagen Gibson**

Accessible.

**Dr Ruth White**

There's a long way to go with it.

**Meagen Gibson**

Exactly, agreed.

**Dr Ruth White**

But it definitely is something that people are less afraid to talk about. And it used to be talked about as very Upper East Side, New York or LA actresses or whatever. But now it's much more normalized for people to talk about going to therapy.

**[00:32:48]**

That said, going to therapy is one thing, having schizophrenia or bipolar disorder is another thing. And people don't want to be seen as that thing because then people filter how they see you through that lens.

So if you get angry, people are like, oh, they're having a manic episode. No, they're just angry like normal people. It's not always an episode. And if you're sad and you're grieving the loss of whatever, a friendship, it doesn't mean you're now going to be suicidal the next morning. You're just having normal feelings of sadness that human beings feel.

And so that's why a lot of people don't want to share that, because they don't want that to be how people filter their experience of them.

### **Meagen Gibson**

I was going to say they don't want the full experience of their emotions as a human being to be minimized to something with stigma attached to it or disorder. Just like you wouldn't want to get a leg cramp and have somebody say, oh, it must be their cancer. No, I just have a leg cramp. I've walked a long way.

Absolutely. And I'm so glad that you spoke about it. And you're absolutely right, it's the thing that you don't want to disclose, and yet at the same time, the only way that other people are going to feel safe to talk about it and safe and have less stigma is if somebody does rise up. So thank you for that on behalf of everyone.

### **Dr Ruth White**

Thanks. Like I said, once it happened, it was hard to go back. And I will say it hasn't always been positive in terms of sharing.

I had one experience with one writer who I tried to put some limits on what they would publish, partly because I had a young child at the time, and I didn't want her to find out certain things.

And so sometimes, again, being able to control the narrative is important, which is why then I started to do more of my own writing. So it's my voice and I get to control what is shared versus having, and we had hours of interview that ended up in this magazine. And I know that that's oftentimes what people are very afraid of. If somebody writes about me, what is that experience going to be like?

One of the best experiences was *Women's Health* did a cover story on mental health among women, and it was inspired by their own editor who wanted to share and was told by the publishers that they didn't want that to be part of her sharing. And she felt like, oh, okay, so now you don't want me to share, but this is a woman's health issue. And so it was a very powerful experience to have women all across the country with different diagnoses being part of that discussion.

And she later went on to be an editor at Thrive Global, which is really about mental health and mental wellness. And again that was a stress related response that Arianna Huffington had where she passed out due to being exhausted, etc, and realized this is not a way to live with all this kind of stress.

And now we have Thrive Global with, I think 30 million or so people that follow that platform. And I'm very fortunate to have been asked to write several pieces for them.

**[00:36:21] Meagen Gibson**

Wonderful. Dr White, I appreciate you being with us today. How can people find out more about you and obviously your books?

**Dr Ruth White**

So if you look for 'Ruth C. White' on Amazon you should find *Bipolar 101, Preventing Bipolar Relapse, Stress Management Workbook* and *Everyday Stress Relief*.

And also you will find my writings on *Thrive Global*. I wrote three or so pieces for *Fast Company* around stress management. I wrote this piece for *Harvard Business Review* about panic attacks.

So you can generally find me, my website is [ruthcwhite.com](http://ruthcwhite.com). I also have my LLC which is [wellmindplus.com](http://wellmindplus.com). So Well Mind Plus you'll find all the work that I'm doing in mental wellness, especially in the last 3 years. You see why it goes back a lot further because I just recently found that company to manage the work that I do.

And I also want people to know that I do stress management workshops for corporate settings. Everything from tiny nonprofits to large Fortune 100 companies where I come in and help them with workshops to build emotional resilience and help their employees manage the stress of life in 2022.

**Meagen Gibson**

Wonderful. Thank you again for being with us.

**Dr Ruth White**

Thank you for having me.