

Katie (<u>00:01</u>):

Welcome back to the Reverse Autoimmune Disease Summit, everybody. I'm Dr. Keesha Ewers, and I'm so happy to bring back one of my lovely friends and colleagues who is really a passionate advocate for helping kids get comfortable in the kitchen, cooking good, healthy brain food. So in this particular iteration of the Reverse Autoimmune Disease Summit, we're talking about the autoimmune brain and I'm just so happy to introduce you to Katie Kimball, who is the founder and CEO of Kitchen Stewardship. She's passionate about researching natural remedies and making healthy cooking easier for busy families. Over the last 11 years, she's become a trusted authority and advocate for children's health. Welcome to the summit, Katie.

Katie (<u>00:43</u>):

Thank you, Dr. Keesha. It's so good to be here.

Dr. Keesha (<u>00:46</u>):

So I usually ask people like how did you get to where you are today? 'Cause we all have a story. I know in the autoimmune thread of the story, you've got some of this in your family, right?

Katie (<u>01:01</u>):

I do. I do. Yeah. I think one of my strongest memories was—so my boyfriend at the time, who's now my husband was diagnosed with Crohn's disease as a freshman in college. When we were seniors, I did this really fun night for his birthday. I had this poster board with these top 10 of Chris's favorites. So like his favorite song, his favorite meal, his favorite movie, we just kind of did all of them in that night. And his favorite meal was lasagna, like gluten and dairy extravaganza. So I made homemade lasagna and he was just on the couch. He was like in so much pain. He says it was like the most painful night he ever remembers and he can still picture it. We kind of had to cut it short and I was driving him back to campus and he was leaning back in the front seat of my minivan. So that was a really cool college dinner, the minivan. He can still picture like turning this one corner back to Michigan state's campus and just being in agony. He ended up—we ended up finishing that senior year. With him, they almost didn't let him graduate. Two days after college graduation, he had 12 inches of intestine removed. So he was liquid diet instead of going out for a steak after graduating college.

Dr. Keesha (<u>02:24</u>):

Yeah. So this is of course a big one for people with Crohn's disease, right? Is this kind of experience that lets them know that their body is not in harmony with whatever they're eating and whatever they thought they are, the thinking, the stress.



Katie (<u>02:42</u>):

Yeah. We didn't know at the time. We had no clue at the time that food was involved. I mean, he was 100% conventional medicine. He had prednisone, he had all sorts of drugs. And I remember the surgeon after the surgery said, "All right, well buddy, we're done here. I'll see you back in about seven years."

Dr. Keesha (<u>03:02</u>):

Yeah.

Katie (<u>03:02</u>):

That's the average return time. And that—honestly, I think it was that line that most got under my skin. I thought, "Man, there's gotta be something better than just hacking out a chunk every seven years. Like that doesn't seem sustainable."

Dr. Keesha (<u>03:17</u>): Do the math, right? Yeah.

Katie (<u>03:19</u>): Yeah. You're going to run out. Yeah.

Dr. Keesha (03:23):

Yeah. This is—that's actually in my own story of being diagnosed with rheumatoid arthritis, that was kind of the sort of statement from my doctor when she diagnosed me was, "Here are two prescriptions. When you get worse, come back." Not if. There's something about that. [Laughing] You go, "Well, wait a second. Are you cementing my future in stone right now? I don't understand that." So that actually kind of—an independent nature comes in handy right there. "I'm going to go do my own research."

Katie (<u>04:02</u>):

We kind of see it as a challenge. Like, maybe I'm not sick. Maybe 10 or 20 or never. [Laughing]

Dr. Keesha (04:10):

Right. So you became very passionate about food and then you got your kids involved in the kitchen. How has that gone for you guys as a family and your story?

Katie (<u>04:20</u>):



Yeah. I mean, with Crohn's being genetic, that's always been a huge concern and it's been something that we prayed for from the time that they were reborns. It's like, "Oh dear Lord, don't let the genetic component and environmental component, and however that works happen. Don't let that switch turn on, that genetic switch." So I mean, from the moment my first was born, I worried with every poop. 'Cause he did have a tendency toward Crohn's disease, so it was incredibly important. By then I was starting just on the edge of my kind of real food journey. I was just starting to understand the power of food as fuel. I wasn't even there for food as medicine yet. It would be about five more years really before I understood food as medicine. But we knew, like as soon as we did start understanding that it was like, "Oh my gosh, the kids are the first priority because if we can get their foundations right, maybe we can just prevent all of that pain and suffering and questions and doctor's appointments that my husband went through." And I know, I mean, I'm a teacher by trade. I'm not in medicine I'm a teacher with an English degree. But I knew that kids being involved with their food would be the most powerful way to keep it sustainable. Like I could feed them healthy food and I could set those habits, but if I sent them off to college at age 18 and they didn't know how to do it for themselves either they'd be back at my house every night or every weekend, which, maybe not, or they'd be doing the frozen pizza, ramen noodles. Like they would be doing whatever they could. So I just knew I needed to lay those foundations with them.

Dr. Keesha (05:58):

It's really interesting because this third iteration of the Reverse Autoimmune Disease Summit of course is called The Autoimmune Brain and people might be listening and going, "Now, what do kids in the kitchen and Crohn's disease have to do with the autoimmune brain?" So I just want to draw a picture before we get into it of these three nervous systems in the body of which one is the enteric nervous system, or the second brain, which is the gut. It's connected to the central nervous system. We have this wonderful Vegas nerve that wanders, it's called the wandering nerve in Latin, it's one of our cranial nerves. It actually connects the brain to everything else. Then we have a cardiovascular nervous system, too. So we have these three very important nervous systems, which are all connected, but when we're talking about gastrointestinal disease and autoimmune disease, like Crohn's, I just wanted to show that connection between the brain and the gut, because it is very real. Then how these genetics express themselves. So my rheumatoid arthritis, your husband's Crohn's, your fear that your children are harboring genetics that could pop. One of the things that's so very true about all this is what happens in the brain or in the mind crystallizes in the body. That's what ayurvedic medicine says. I love that! What happens in your mind, crystallizes in your body. And the way that they think about it—10,000 year old sister science of yoga from India, they identified all those years ago, that actually autoimmunity is undigested anger, and fear. So when we're afraid and we're worried it's actually kind of generating into more of that potential topping of our genetics. So putting your kids in the kitchen to empower them, now you're taking the bathtub drain out and releasing the bathtub of fear, of anger, of all of those



emotions that are actually just dysfunctional coping strategies to events you have no control over. So it's like, wow. Yeah. Why not put the kids in the kitchen? And you're teaching them tools that they'll have for the rest of their lives, which as you noted your husband and you in college, not even understanding that this lasagna would have an impact on genetic expression, on gut, on how he felt. So you're ahead of the curve and my kids are too. I just think that's such a-I think it's one of the most beautiful gifts. A lot of the people listening to this summit will have their own story of autoimmunity. If you are listening and you're a grandparent, or you're a parent, what Katie's sharing is, I believe, one of the most freeing empowering things you can do and gifts you can give to your children. So I'm going to ask you, as you put your kids in the kitchen, 'cause I know I had my own obstacles with that with my kids along the way. [Laughing] As I started cleaning up my diet, they resisted a little bit, they weren't babies. So we had started some habits like ramen noodles and gluten. It wasn't until my son who actually has Asperger's syndrome. I didn't even realize the relationship between gluten and dairy and autism either until he was 12. So there were some obstacles in our family and now they're really amazing. My oldest is the one that resists the most, but the others are just incredibly healthy eaters. So what is it that you find are obstacles as you work with people who are getting their kids into the kitchen and your own story of putting your kids in the kitchen?

Katie (<u>09:50</u>):

Yeah. It's mostly not the food. It's the parents, it's mostly our own kind of mental blocks. Like how the kids are too slow. I can just get it done myself. It's so messy. I don't want to deal with that. Some parents just feel a little inadequate. "I'm like barely limping along in the kitchen myself. I have no clue where to start or how to explain it to kids." For me it was definitely the, "I can just get it done faster myself." But I hit a point where I was working so hard in the kitchen to feed my children, I was starting to forget what they look like because I just wasn't seeing them. I thought I need help. This needs to be a family affair here.

Dr. Keesha (10:30):

Sous chefs. That's what I call mine. [Laughing]

Katie (<u>10:34</u>):

Exactly. I mean, I've had one meal a week completely off for the last three years. My 12 and 15 year olds have cooked one meal for the last three years. So that's like the dream. When you think it's all about return on investment, like, yes, you can do it faster yourself today, Katie. But if you can slow down a little bit today and teach them, yeah, you have these sous chefs for the rest of your days. And you're building skills with them. So I think—I do a lot of mindset, motivation, ra-ra cheering with my parents in our courses because it's hard. It's hard to commit to getting the kids and the food and the plan all together. So that's what I try to do is just kind of smooth the road and I'll at least do the thinking for you.



I can't send a dishes fairy, still working on the tech on that one. Just really understanding that it's a long game and to think about those end goals.

Dr. Keesha (<u>11:32</u>):

My 26 year old daughter now, her name is Kendyl Morris, and she's been a guest on one of the Reverse Autoimmune Disease Summits. She's a powerhouse. She has a blog called Kendyl's kitchen. And she is the most marvelous, amazing cook. She's doing her own cookbook right now. And she has—I was teaching my children at a young age to feel powerful and free in the kitchen, not constrained, where they felt like they could experiment and not get shamed for it and they could screw up and it was just a, "Well, yeah, there's a difference between baking soda and baking powder, for sure. And that's not going to happen again. I bet." It's just really helping them to feel like they could experiment in there. I remember handing over when my daughter was—Kendyl—when she, I think she was 8, maybe 9, handing over the Thanksgiving pies to her and teaching her how to do a paleo crust, which is tricky.

New Speaker (<u>12:36</u>): Oh yeah.

Dr. Keesha (12:37):

And I haven't had to make a pie. I've done it because I wanted to, but I haven't had to make a pie for a holiday for all these years since because she is a master. And it was just giving it to her. She felt so honored. Like she had this place in the culinary culture of our family and it was a powerful place. Like, "I'm in charge of the pies?!" And here's how to do it with no sugar. And here's how to make a crust that doesn't have gluten in it with almond flour and like all of these different tools that I taught her at such a young age. She came by today, I was out in the sauna and I didn't really get to see her, and she left me a little note and on a little plate she had one of Danielle Walker's Against All Grain chocolate donuts sitting on the plate with a little flower and a note that told me that she loved me. I was like, "Oh my gosh!" This is the return on the investment, right? [Laughing].

Katie (<u>13:42</u>):

Well, in that story—I think that story is perfect for when we're talking about the brain and mental health. 'Cause again, I went into this super practical, they need life skills and I need help. This is why I'm teaching my kids to cook. But now that working with thousands of families and hearing their stories, now our kids cook our food we say that we build connection, confidence, and creativity.

Dr. Keesha (<u>14:01</u>):

Yeah.



Katie (<u>14:01</u>):

So that connection, like you talked about with your family history and your connection with your food, your connections and families, that is incredibly mentally health supportive, right? Feeling connected. I think we've seen this with the pandemic and shelter in place. How disconnected is very dangerous. Then the confidence, oh, my gracious, the confidence that kids build in the kitchen not only gives them confidence with cooking, but I really think it spills out into other areas of life. I know my daughter, Leah, last year as a fifth grader applied to be a class officer and she's really reserved. I was like, "This is very strange", but her little speech talked about cooking for her family and watching her brothers. And that was genuine self esteem that's allowing her to feel like a more powerful human being, not just a more empowered cook. And creativity, the idea of working with your hands and that cathartic, repetitive motions of chopping and stirring and maybe kneading bread dough, not really paleo bread dough, but for people who can do gluten. [Laughing] All of those creative, with your hands motions are really stress relieving. Just being artistic and throwing in different herbs and spices. These are all wonderful for our kids' mental health.

Dr. Keesha (<u>15:21</u>):

All four of my adult children now, they range from 23 to 30—32 actually, are very creative in the kitchen and they love to plate things in a beautiful way. It's all presentation. They love to create a meal plan for the family that when we get together—It's just so beautiful to move into the kitchen—Last Christmas, we did a tapas thing where we did boards. It was all boards and we did these gorgeous boards. I had an idea, I presented it to them and they took off. That's this family creativity, culture of sharing, and then dancing and singing. And all the things that happen in between the measuring, right? It's this beautiful connectivity. I love the three words that you chose that cooking allows for when you're all in the kitchen together. And like you said earlier, when you're willing to let go of your own expectations, your time constraints, your messiness, all of those things because the outcomes are so, so beautiful. I want to talk a little bit about vegetables because so far we've been talking a little bit about baking, but let's talk about vegetables. I hear this a lot from my patients. How do I get my kids to like vegetables? You probably hear that all the time.

Katie (<u>16:46</u>):

Oh yeah! All the time. I mean, there's super cool science behind why getting them in the kitchen will help them eat more vegetables. And I mean, first of all, it just happens. We see kids all the time—I'm just hearing stories this week, people are saying, "I have tried to get my kids to eat ants on a log before." And they just did the spreading class. They spread their nut butter on their celery and they ate it. I was like, "I guess it was worth the time putting in." So we see it all the time, but the kind of cool science behind that is first of all, there's so much less pressure to eat in the kitchen than at the table. So for picky eaters who might've experienced power struggles, and every time a plate is put in front of them,



they kind of feel like, "Oh no, I'm going to have to eat this." So that's step one, is there's no pressure to eat.

Dr. Keesha (<u>17:37</u>):

Plus they don't have control over what winds up on the dining room table. If they're in the kitchen, it's like they have a voice, right?

Katie (<u>17:46</u>): Yes. My kids love that, that they can [inaudible].

Dr. Keesha (17:48):

So then it's not a power struggle.

Katie (<u>17:50</u>):

They can make more of their own choices. Even if they're working with food that they don't even think they like, there's an exposure element where they're kind of getting acclimated with that food. They're making friends with that food, but they know they don't have to eat it. So it's okay. There's no pressure. Dr. Nicole Berkins, who I'm sure you're familiar with, kind of taught me about this. What I call the exposure bucket. Every person with every food has a certain number of times they need to be exposed to it before they'll eat it. Your pickiest eaters, their bucket might be really deep. It might be 231 times they have to encounter that broccoli. That'd be a lot of times to put a piece of broccoli on a child's plate. So it's awesome to know that when they shop for the food, wash the food, cut the food, serve the food, it all adds up.

Dr. Keesha (<u>18:34</u>):

I haven't encountered lima beans enough apparently. 'Cause I'm never eating them. [Laughing]

Katie (<u>18:40</u>):

I'm sure we all have a couple of foods, but maybe you haven't encountered them enough!

Dr. Keesha (18:46):

Maybe I haven't, cooked well. I haven't encountered them cooked well as a child enough. So that as an adult, I now have the control and never has a lima bean been put on a plate in this household. We were just talking about that the other day. My adult daughter loves lima beans. I said, "How? How'd you ever



get exposed to those? Because it didn't come from me." She said, "I know Mom. I was so surprised. Like, what is this new food?" [Laughing]

Katie (<u>19:16</u>):

[Laughing] That's funny. So maybe you do challenge your kids to make you like lima beans.

Dr. Keesha (<u>19:22</u>): Right, exactly.

New Speaker (<u>19:24</u>):

Eventually. I mean, think about adults. The first time most of us tried coffee, many adults don't like coffee, but we acquire that taste. So it's kind of a similar process with acclimating the palette and even just smelling the foods can be part of that exposure and that acclimation. So it really does help. And then also mentally, psychologically people don't like open loops. So when you're part of starting something, there's a little part in your brain that tells you you should finish it. That's pretty powerful for kids. When they feel invested now they do kind of want to finish that process at the table and taste the food. So it's really powerful.

Dr. Keesha (20:04):

Also, if you can get them into the growing process, it's even more powerful, right?

Katie (20:09):

Yes.

Dr. Keesha (20:09):

I started with just kitchen herbs with that. Just growing them in little—in those days, sorry everybody, it was styrofoam cups. I didn't know what I didn't know yet.

Katie (<u>20:21</u>): You can only do what you know, yes.

Dr. Keesha (20:21):

Right. Right. The little styrofoam cups they brought home from elementary school. I remember thinking, "Oh, that's a good idea. Let's do some more things like that." And then, "Oh, so how do we use?" Then



inviting them into the kitchen to show them how to use these kitchen herbs. Then they wanted the food because they had grown it. And then we moved to vegetables. Yeah.

Katie (<u>20:44</u>):

It always tastes better fresh. I mean, my third child, John, he's 8 now. He was between the ages of 2 and 5, he was the no-green-foods kid. I was like, "Who is this? I've been feeding him all the good things." Then all of a sudden he got a voice and became a little person 'cause that's kind of what happens at age two. They kind of come into their own ego, right? He would not touch anything green, but we visited a friend's garden and all of a sudden I look over and he is chowing green beans straight, raw off the vine. So I learned that he will. And he still is like [hand gesture] about cooked green beans. He would not eat cooked green beans, but he would eat them frozen out of the bag from Costco. So whenever I'd make green beans, I'd like clink, clink, clink, a little on his plate.

Dr. Keesha (21:32):

[Laughing]

Katie (<u>21:32</u>): It's like a popsicle. It was never a no. [Laughing]

Dr. Keesha (21:37):

That's called adaptability. It's a really good feature to have as a parent. [Laughing]

Katie (<u>21:43</u>):

Yeah. You just—you have to try all the ways of cooking and raw, and dips and on your head and in the garden. [Laughing]

Dr. Keesha (21:51):

Being adaptable. Right. Yeah. So, one of the things that you say is cooking is so much more than just kitchen work. So how do you think learning to cook impacts kids in other ways, other than what we've spoken about?

Katie (<u>22:05</u>):

Yeah. We have had such a push in the last few decades in our culture, I think to build up kids' self esteem. It breaks my heart that it's not working. Statistically 1/3 of our teens are depressed and anxious and suicide is the second leading cause of death for people aged 10 to 24. It's not working, saying "Good

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job" and participation medals and trophies. It falls flat because they're empty platitudes, right? I think that to show kids that they can do something so authentic and so necessary as nourishing another human being, you don't even have to say any words. When kids watch other adults eat the food that they just made, it's like self-esteem raining down on them. And again, that comes back to obviously mental health as well and the brain and the mental health. But then, obviously the foods that we're eating—

Dr. Keesha (22:59):

This is an interesting point you're bringing up Katie, that goes outside of self esteem so far. There's a book called The Narcissism Epidemic. It's done by a couple of researchers from different universities who came together and did a study. What they found is that narcissistic personality disorder—which has DSM-5 criteria for diagnosis and everything—was on the rise, but also narcissism outside of narcissistic personality disorder was on the rise. One of the—they pointed to 4 different reasons that that was happening. This of course is linked to what you just noted that the Princeton researchers have started calling death of despair, which is suicide, but it's also addiction to substances. Also, alcoholic liver disease, cirrhosis, as well as fatty liver. So this is really an important topic that I don't want to just have thrown out and go over the top of what you just said is so vital for us to understand about the way that our culture has been moving. One of the 4 things that they said—4 reasons why narcissism was on the rise from the 1960s to where we are today is the self-esteem curriculum in the school system. That everybody gets a trophy. Everybody gets a pat on the head and told "Good job". Actually doesn't create an environment where our kids come out of the school system feeling, like we said at the very beginning of this interview, powerful and empowered. In fact, when they get out into the world and someone else in their job world is not doing that for them, just telling them they're great doing nothing, they get really upset, right? Because—[inaudible]

Katie (24:54):

[Inaudible]

Dr. Keesha (24:54):

"Wait a second, I'm supposed to work for that?" That was 1 of the 4. The 2nd one of the 4 reasons narcissism is on the rise—I'm coming out of memory here. I might not be able to remember all four of them—is social media. FOMO, right? Really fear of missing out and seeing that everybody else is living a life of your dreams and you're not. 3rd one was the desire to be famous, like YouTube star overnight.

Katie (25:25):

It feels like everybody can be famous.



Dr. Keesha (25:29):

Yes! Then if you're not that you're failing, like being famous and noted on that level is the ground of being for living instead of just being is you're worthwhile. Then the 4th reason—I am remembering them all—it was easy access to loans so that you could actually buy whatever you wanted and live as extravagantly as you wanted to. It was like this empty bubble and shell and that we—the kids that came out of all of that are really, really struggling with these deaths of despair now. It kind of hearkens back to what we were just saying where, I said, when I handed my daughter the role of Thanksgiving pies, she took a place in the culinary culture of our family. That actually, what you've just pointed to is vital. Giving them something where they are a participant and it's not about self esteem, it's about self worth. "I'm worth having a place. I can take up space in this family unit. Here's my role." Actually carving a space for them and saying, "You belong here and look what you provide." There's nothing like cooking to really do that for children. So I just love that you brought that up and I can't even believe how important it is.

Katie (<u>26:58</u>):

Oh, that's so good. I love that research. I never use the word narcissism. I often use the word entitlement coming from more of the sociology perspective. I know the author, Julie Lythcott-Haims of How to Raise an Adult—fascinating. She was a college Dean at Stanford, I think. Over 10 years watched college freshmen come in and noticed a severe decline in independence. Parents would actually be answering questions for their kids in intake interviews.

Dr. Keesha (27:25):

The helicopter. Yeah.

Katie (27:27):

Yeah. So she sort of researched like the helicopter parenting and all the different ways that kids are coming out of their childhood feeling so entitled. And I feel like the loans are one piece of that, but also if those researchers had looked at parenting. I never want my kids to feel entitled, which is why I give them chores. 'Cause then I have an opportunity to give them a gift. When they're packing their own lunches and they're cleaning dishes after dinner. Anytime I say, "Hey, I noticed you're really busy today. I packed your lunch for you." They feel genuine gratitude, which is—

Dr. Keesha (28:02):

It's an act of generosity instead of an expectation.

Katie (<u>28:04</u>):



Yes. Polar opposite of expectation and entitlement. So I think that just really builds a very nice family structure where it's not like I never do anything for them, but when I do, it's appreciated. Not that I need appreciation, but it's good for people to feel gratitude towards others.

Dr. Keesha (28:21):

Right. You do need appreciation. I mean, it's important, right? I think it's a good muscle to build in your children, is appreciation. There's this interesting—I'm going to take us off into another [inaudible]. You keep dropping these words and I go, "Oh yeah, that's so cool." The other one is entitlement. I am writing a book on healing trauma, and I have a chapter in there about entitlement and oftentimes people think of entitlement in the way you and I have been talking about it, college freshmen arriving in and just sort of like—or arriving into a workplace environment and expecting something for nothing. But every—I do believe that every single human, and I like to teach my patients with autoimmunity this concept early, early, early on. So I'm loving the opportunity to talk about this. Every human is entitled and if you take it into a broader sense of it and just sort of, remember this morning when you woke up and when you opened your eyes, you actually expected them to work and function the way that they were when you closed them the night before. Then you expected your body, the heart to still be beating and you expected to be able to brush your teeth. You expected to be able to move around in the world in whatever way you expect. All of that's entitlement. I always think about that nobody ever promised us a body that works, right? Just because you're born into a body, doesn't mean that it's going to work in a certain way. People that have autoimmune disease will often feel very betrayed by their bodies. So the shift that I try to make—this is the autoimmune mindset change, right? Is to help them go, "Oh, my body's not betraying me. And it's not failing me. It's actually showing up for me in this really passionate way where it's saying, Hey, something's not working here. And I really want to talk to you about this." Right? Instead we have this entitled way of being with it. Like, "No you're supposed to do this. You don't have enough energy and you're not doing—So I'm going to drink this coffee." It's like, this body I think has the most thankless job of anything on the planet because it never gets to rest. We go to sleep and the heart still works. The liver still [inaudible]. The lymphatic system still cleans everything up. Then we wake up expecting it. We feel entitled to have this body that will just get us out of bed in the morning. Actually that's not a realistic expectation. There's nowhere in any fine print or contract that says that that's supposed to happen for us. It's kind of like when someone—I know this is a terrible one to use as an example—but when someone loses a child, and you say, "No one's ever supposed to bury a child." And my thought on that is, "Well, who said that? That's not true." Right? So if we have an expectation and we feel entitled to life being a certain way, we're going to be disappointed and upset and feel betrayed. But if we can understand that and then drop into this incredible, like what you were just saying, deep appreciation. "Oh, my kids are alive. My body works to the level that it works. I get to engage in this amazing life with people that I love. And with these cultural, even these cultural transformational issues happening today. I'm alive to do this." Then we approach it in such a different



way. That changes the biochemistry of the brain. It's no longer an autoimmune brain because now you're feeling gracious appreciation.

Katie (<u>32:08</u>):

That is a powerful shift. I needed that. I'm glad that we wandered our way into that a little bit.

Dr. Keesha (<u>32:16</u>):

[Laughing] It is really interesting, this beautiful, beautiful body. Then we want to feed it the way that you've been talking about. It's like, "Oh, body, let me give you these wonderful vegetables." Instead of, "Let me shove sugar into you and make you do something different than what you're doing right now, because I want to control it and I'm upset with you." It's just a different way. So I just so appreciate you bringing up the idea of entitlement and the way that this conversation has gone. [Barking] My dogs have something to say about this too.

Katie (<u>32:49</u>):

He has opinions. [Laughing]

Dr. Keesha (32:52):

[Laughing] So what I'm going to do is put—you have a free gift for our listeners to help get your guys' kids and grandkids in the kitchen. Katie is the marvelous, passionate educator on this. So I'm going to have a link for that. And I want you to talk about your free gift, Katie.

Katie (<u>33:10</u>):

Yeah. Every time we ask our members, what's your favorite skill that we teach? It's always the knife skills. So our 10 minute knife skills and safety lesson, and that's for kids of all ages. One of my missions is to raise the bar. So we talk about using the same skills with butter knives as we do with chef's knives. It's not about kid techniques, no, let's just learn to cut things. When we talk about fruits and vegetables, knife techniques are the way to unlock that produce section. So I think it's so important to build those skills in kids. Just after this one class, you may have some sous chefs on your hands.

Dr. Keesha (33:45):

Oh, that's beautiful. Because if they get to chop that tomato with that knife and they've been trusted with it and you're not running to the ER, it's a win, win. [Laughing].

Katie (<u>33:54</u>):



All fingers accounted for.

Dr. Keesha (<u>33:56</u>):

So win-win. All right. Well, thank you so much for the work you do in the world, Katie. I so appreciate you.

Katie (<u>34:02</u>): Oh, it's nice to connect with you and the audience here too. Thank you.

Dr. Keesha (<u>34:06</u>): All right everybody, until next time, be well.