

**Kathie Bzdel**

April 18, 2015, Calgary

Interviewer: Karen Werlin

Videographer: Ron Patterson

**Health Sciences Association of Alberta – Saskatchewan – Social Work degree - palliative care – illnesses – community care – union committees – HSAA Board**

KB: I was born in Weyburn, Saskatchewan, so a good Rider girl. I was in a family of 12 siblings, or 11 siblings, so there was 12 kids of us. Growing up my father belonged to the Carpenters Union so I've always been hearing about unions and understand what they're about. My father was very involved in politics so we grew up with some understanding of how important politics and a union was for workers. Like I said, I'm number 10 out of 12 kids, so the whole sense of taking care of each other and the community was really important to us.

Q: Did you stay in Saskatchewan for most of your childhood?

KB: Yes. I went to school and that and then I got married pretty young and had my family pretty young. Then we raised them in Weyburn. My first jobs that I had were very simple jobs, because I had no education. I remember when I first got my very first paycheque, or the one was \$328 for two weeks. I thought I was rolling in the money. Of course as I grew up I knew that that was, even though I had a family I was still pretty young, I knew that there had to be something better. That wasn't a union job. So I moved on and applied for, I worked at Safeway then in Weyburn.

Q: So was that your first job, at Safeway?

KB: No, my first job was A & W as a carhop, then I went into McLeods, so it was like a warehouse retail kind of store. Then that's when I, back then you had to be, we were really loyal to our jobs and loyal to our employer. But you had to do whatever they said. You were always so scared that if you didn't you were going to lose your job. Well in the small town of Weyburn there's not a lot of jobs, especially with being female and not having any education. So there was a lot of exploitation, there was a lot of working late, there was a lot of that kind of stuff. So when I got into Safeway union job, my wages were great. Back in the '80s the wages were really, really good. But they all made us part time. All the men worked fulltime. This has nothing to do with nailing men at all, they're the provider of their home. But it was just inequality – all the women were part time, cashiers and stuff like that. So that's why when I worked at Safeway then at the end of the '80s they wanted to destroy the union. So they closed the doors and then they opened up as Family Foods, hence the union was out of the grocery store. So I then moved to Souris Valley Hospital, which is back then it was called a mental psychiatric hospital, long term care. So again, back into the union jobs.

Q: What union was that?

KB: Oh I knew you were going to ask me that one. It was so long ago.

Q: Was it with the health sciences?

KB: Oh totally, totally.

Q: Could it have been the Healthcare Guild?

KB: You know what, it was so long ago I do not remember.

Q: That would've been in the early '90s?

KB: Late '80s, early '90s.

Q: Were you still in Weyburn at that time?

KB: I was still in Weyburn. Then again, I would fight back a lot because the employer would command a lot of us that I knew was wrong. So of course I would fight back and say that wasn't right. But I never used the union like I should've. I had the backing of them but I never involved them, which as I got older I seen the fault in that piece because they could've helped me a lot along the way. So I ended up quitting that job and moving to Regina. I always wanted to be a social worker my whole entire life. So in '93, like we moved to Regina and then I got into University of Regina for my Social Work degree working at another kind of rehab place.

Q: So you were working while you were going to university?

KB: And raise my three children, yes.

Q: Were you by yourself?

KB: No, I had a husband, three kids, working fulltime and going to school fulltime. So it was really, really tough. Half way through that I had a very severe stroke. Made it through that one; they told my whole family I wasn't going to. So all these experiences actually I feel very honoured that I got to go through those experiences, because it really changed who I was. To come back as a second chance was amazing. So I had to learn how to walk and talk and I pushed myself back into university to finish my degree. I had to actually fight the University of Regina because I stroked in October and they weren't going to give me my tuition back for that semester. I mean I was very sick, my head was, I was a very sick woman. But I didn't stop. I fought and I fought and I fought, and I got my money back. Because I said, you're going to get it back, I'm going to finish my degree. So when I finished my degree, and even going through all that, it changed my life and it changed my children's life, it changed my husband's life. It's like there's a lot to life and you gotta be happy, so hence my first husband and I we decided to separate.

Childhood sweethearts, we were young. I was 14 when I started with him. Great man, nothing against him. So then I moved to Calgary.

Q: What year was that?

KB: Calgary I moved in '98, or '99, sorry. But see I had a disability now because I couldn't really walk. I still was recovering because I stroked in '97 and I was pretty sick still trying to walk and talk right.

Q: When did you go back to school?

KB: I stroked in October and I went back in January. How I did it and how I made it through three-hour classes, God only knows. I have no idea how I did it.

Q: So you got your Social Work degree and then you came to Calgary.

KB: Calgary. Couldn't find a job. They wouldn't hire a person with a disability. And social work if you can imagine – it's supposed to be compassionate. But it took me quite a few years. I came in '99 and I did not get into the hospital until 2007. Because that's what I wanted – I was going into the hospital. Back up a little bit. I did work for a shelter, women's shelter, as a child and youth counselor there. I also worked for a couple years at a group home. I was the assistant director, ran a group home for street kids. But I wanted to be in the hospital, so in 2007 that's when I got into the hospital.

Q: Is that your current position today?

KB: It is. Oh well sorry.

Q: What positions did you hold in the hospital?

KB: Yes. So of course you have to play the game of being casual first and then get a position. So I worked in the trauma, I worked in Emergency, I worked in all the medical surgery units all over the hospital. Again, I think my maturity and my level of knowledge, A personality, I proved that I'll do it. Faked it through half of it, but I made it. Then I currently now am in palliative homecare, so I work with people at end of life in their home. I absolutely love my job now. But back when I was in the hospital in 2007 a really good friend, social worker, that was on the board of HSAA talked me into applying to be on the board. So I did that and I did get elected to be on the board. So I've been on the board just into my second term, first year of my second term, so that's four years now going on five years now that I've been on the board.

Q: How long have you been in the job with palliative care?

KB: 2009, September of 2009.

Q: You go out to patients' homes and work with them in their homes?

KB: Yep. It's sad and I know in one of the speeches they were saying how we call patients clients when they're in the hospital, money you know. I guess it never really hit me until I heard them say that, and it's true. When they're in the hospital in acute they're called patients, but when they're in the community it's money and now they turn into clients. But yes, I work with the families and help them with the journey, and I help the families. I help them with finances and legal stuff.

Q: Is the workforce primarily women who do the kind of job you're doing?

KB: In homecare, actually in palliative we have no men. We have in regular homecare there's I think they might have six and it's OPTCs, no nurses, no social workers.

Q: What does OPTC stand for?

KB: Oh sorry, occupational therapist or physiotherapist. I've seen a couple males in those positions.

Q: Do they go to patients' homes?

KB: Correct. It's a multidisciplinary team approach. In homecare we'll have a nurse, she'll be the coordinator of the caseload. Then social work, occupational therapists, physiotherapists and respiratory therapists are all consultants. So they'll consult us if they need us to go in and do whatever they feel that a client will need.

Q: As a social worker, what kind of support would you provide?

KB: So my number one thing is to provide emotional support and grief counseling to the client and to their families. I will help them with any financial. We have primarily cancer patients, so I'll help them find some money because they have to pay a lot more for their drugs and a lot more for constantly going to the hospital to do tests and seeing the doctor. I will make sure that they have their legal stuff done so their personal directive and power of attorney can help them understand the importance of a will. And any other kind of resources, funeral, any other resources, hospice.

Q: Have you had any particular barriers or challenges as a woman?

KB: As a woman? No, I can honestly say no. I think if we were to have a male in the same position, in fact Garth is at the Foothills Hospital. He's a male but in acute, the same kind of credentials, same wage. That's because our wages and everything goes off of our education, so Bachelors, Masters.

Q: What degree do you have?

KB: I've got a Bachelor Social Work, and then we register with the College of Social Work. We all have to be registered.

Q: Regarding your union involvement, when did you first become aware of Health Sciences?

KB: That was in 2007 after I started working. I was covering for Wendy on the trauma unit and she was a board member. She was the one that pushed me.

Q: Did she prompt you to become active in the union?

KB: In HAS, correct.

Q: Before joining the board, did you hold any other union positions?

KB: No, because as soon as I got into the hospital that's what she was, what's the word, got me into it. So no, we didn't really have shop stewards then. That's just a program that we are starting actually with Health Sciences. We do have group reps but we are starting the program with shop stewards.

Q: What's some of the work you do for the union as a board member?

KB: Advocacy is one of the biggest parts. As a social worker I advocate all the time for clients. As a board member I advocate a lot for the workers, for us. So the pension, when they wanted to pull back on our pension that was a huge fight. It's frontline advocating and trying to stir up the members of how important it is to vote for political parties, to get involved with any kind of attacks on unions. All the bills that they put through in legislation and they got pulled back, we were part of all that. Rallies. When other people have been on the picket line we've been part of their pickets. Just really trying to bring awareness to all of our members of how important it is. It's good for them to trust that they elected me to be a board member and to do right by them, but I need them to back me. I need the power of the people. Like I say, we don't have power in money but we have power in people.

Q: Why do you think you were approached to become involved?

KB: Wendy was very active with the union and her and I are close to the same personality. She knew about my history of being involved with other unions, more involved with the advocacy of people and standing up for people's rights. So she felt that I would've been a good fit. She's right, because I do love being on the board. I love our union. The president we have is amazing. She's taken our union places; I highly respect her. I'm very proud to say I'm a Health Sciences member and a board member.

Q: Do you sit on any other organization boards or committees, or any other activities you'd like to tell us about?

KB: I would've liked to sit on the women's committee but they only have so many seats. As far as our union goes, we have to be on different committees ourselves. As a board

member you have to be on those committees. I've been on members benefit, bylaws committee, OH&S. But as far as being on other committees outside of HSA, no I don't have the time. Being a board member is a lot of time, then coming to all these events, which are amazing because it stirs you up again and gives you hope that you've got more people behind you. But no, I've often thought I should get on with, because I live in Chestermere, I thought I should get on town council. But I might not have a husband then.

Q: Do you have responsibilities that have made your union activism challenging?

KB: Oh it's always challenging. I think the biggest challenge is trying to get people, members, public to understand how important a union is. I know that is part of our strategic plan, but it is really challenging just trying to get people to understand or even vote, just vote instead of always just going with the status quo. I think we're seeing that now this year more so in election. I know all unions are nonpartisan or some are nonpartisan, but everything we do is political. That political atmosphere affects our life and affects everything we do, so we can't really just be nonpartisan. But that's a big challenge, trying to take the glasses off people's eyes and just get them to see. But I'll always keep doing it, always be on the front line. I'll always keep doing the struggle, the little old lady on the ??.

Q: Are you involved with this election campaign?

KB: Well we have members that are out there that we're supporting. Again, I'm not part of those except for just to bring public awareness – that's my biggest part of doing it. Again, it's the time crunch of being involved.

Q: Is there anything else you'd like to add?

KB: I'm definitely proud to be a woman leader. I know I've got a lot of respect with my members. It feels good to be part of such a change, because I believe that's where we're moving in Alberta is we're ready for a change. I think people have to be, if you have the skills or you want to be a leader, I think we need to encourage people more. That's another part of getting the members involved is just knowing that they're not alone, so they get involved. But everybody's so scared that they're not smart enough or they don't know enough. I feel it's my role to keep encouraging people. You're not alone out there, it's all of us. That's the beautiful part of unionism, whether it's just my union or all of our unions. We're all together in this fight.

[ END ]