

Courage My Friends Podcast Series X – Episode 5 Labour Fair 2026: The Radical Labour of Care

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ANNOUNCER: You're listening to *Needs No Introduction*.

Needs No Introduction is a rabble podcast network show that serves up a series of speeches, interviews and lectures from the finest minds of our time

RESH: In an increasingly hostile and unaffordable city where housing, healthcare, and other basic needs are more and more inaccessible, what's happening to our most vulnerable? Why do we continue to devalue the essential labour of care work even when it's most needed? And how can we, indeed must we, reimagine our urban systems through the radical labour of care?

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COURAGE MY FRIENDS ANNOUNCER: Welcome back to this podcast series by rabble.ca and the Tommy Douglas Institute at George Brown College.

In the words of the great Tommy Douglas...

TOMMY (Actor): Courage my friends, 'tis not too late to build a better world

COURAGE MY FRIENDS ANNOUNCER: This is the Courage My Friends Podcast.

RESH: Welcome to Episode Five, *Labour Fair 2026: The Radical Labour of Care*.

For Episode Five, we bring you *The Radical Labour of Care* panel discussion with Indigenous midwife, leader, and educator, Claire Dion Fletcher, crisis outreach worker, case manager and advocate in Toronto's Downtown East, Lorraine Lam and Program Director of the Latinx Women's Program at the Toronto Rape Crisis Center/Multicultural Women Against Rape, Grissel Orellana. Moderated by Eliza Chandler, Executive Director of the Office of Social Innovation at Toronto Metropolitan University, this latest session of TMU's Transformation Café series was hosted at George Brown Polytechnic's 34th annual Labour Fair, *Building a Working Peoples' City*.

The discussion focused on the essential but undervalued labour of care work, the realities of an increasingly hostile urban climate and building practices of mutual aid, community safety, and collective survival toward a caring and more livable city.

We begin with panel moderator, Eliza Chandler.

ELIZA: My name's Eliza Chandler. My pronouns are she and her. And I'm the Executive Director of the Office of Social Innovation, the office behind pulling together this Transformation Café. Amongst other things, our office distributes student funding, we hold free schools and Transformation Cafés like today's event,

and we also host TMU's *Sanctuary Scholars Program*, which provides an access pathway for students with precarious immigration status to attend university.

Today's Transformation Café explores care through a de-colonial and intersectional feminist perspectives within and an increasingly hostile and unaffordable city where housing, healthcare, and other basic needs are becoming increasingly inaccessible. We will share what's already working, what solidarities we need to sustain communities, and how care as labour and as world building can be a pathway to building a livable city.

So I'm gonna turn to the panelists.

Claire Dion Fletcher, she and her, is Lenape- Potawatomi and mixed settler registered midwife. Claire is the current Vice President of the Canadian Associations of Midwives and past Co-Chair of the National Council of Indigenous Midwives.

She's an assistant professor at the Toronto Metropolitan University Midwifery Education Program. Her teaching focus is on Indigenous midwifery and social justice issues. Claire is deeply committed to increasing diversity in the midwifery profession through Indigenous-led education. She completed her Masters of Arts in Gender, Feminist and Women's Studies at York University, where her research focused on decolonized healthcare and Indigenous midwifery.

Claire is committed to reproductive justice and Indigenous feminisms and how these frameworks shape midwifery education and practice. She is an adoring auntie to her niece and nephews, and a new mother. Welcome Claire.

Grissel Orellana, she, and they, is from El Salvador, Central America and lives in T'karonto. She is an Indigenous from Mestiza ancestry. Grissel is a feminist, a human rights activist, defender, a lesbian femme, a mother, a healer, a survivor of war and gender-based violence.

Grissel has worked at the Toronto Rape Crisis Center/ Multicultural Women Against Rape for 26 years. She's currently a program director of the Latinx Women's Program at the center where she continues to triumph for a diversity of Latin American survivors. This program is a space for support, personal growth, collective development, and dialogue about our roles as Latinx immigrants, political refugees, and survivors of multiple abuses and human rights violations.

In her work at the Toronto Rape Crisis Center/ Multicultural Women Against Rape, Grissel is part of a collective that advocates for liberation from all forms of violence. Welcome Grissel

We're also so lucky to have Lorraine Lam with us, she and her, and she is a Chinese-Canadian daughter of a solo parent with an education in music, sociology and social work. For over a decade, she has worked in Toronto's Downtown East Side, walking alongside community members, navigating homelessness, drug use,

incarceration, poverty, racism, and systemic injustice. Her work is shaped by these communities that have taught her to center harm reduction, anti-oppression, and trauma-informed practices. She is currently a case worker at Amadeusz, am I saying that right? supporting individuals with firearm related charges, and she serves on the Board of Building Roots and organizes with Christians for a free Palestine.

[applause]

Lorraine is also the co-author of a chapter in *Displacement City*, published in 2022 at University of Toronto Press. She loves Jurassic Park movies, singing with her gospel choir and supporting the city with her extroverted fur-child Miso.

So welcome Lorraine.

So when we talk about the *Radical Work of Care*, or "care of work" actually works too, which is the title of this panel? We're talking about the everyday and every night labour of keeping people and communities alive in a city that's shaped by neglect, austerity, and deepening inequity. This is the work that often happens where institutions fail and the gaps left by the systems that are meant to take care of us, but so often do harm or make survival harder.

We are excited to be having a conversation about the practices communities build to sustain one another. Things like mutual aid, trust, accountability, peer support, and collective survival. We are orienting to care as both survival and world building work.

So with all that being said, I'll turn it over to the panel with the first question.

Can you introduce yourself and/or your community? As well as your relationship to the theme at the *Radical Work of Care*. And Grissel, we'll start with you.

GRISSEL: Thank you Eliza, and thank you everyone for being here and supporting these panelists and thank you for the invitation. My name is Grissel Orellana. Part of the work that I do in terms of what brought me to this work is I came and arrived to Tkaronto 38 years ago. And as refugees, there was a big Latin American refugee leaving from a lot of conflicts of war and being taken into Tkaronto, Canada.

The blessing on that was how we were received and welcomed. But definitely experienced the beginning of what did it mean to start decolonizing our bodies. Decolonizing because of war. Decolonizing because of the impact of violence in the continent of this continent, right? And I was very confused and thinking about, you know, I'm 13 years old. Single mom of three kids who work really hard back home.

She was very young, 36 years with three kids and a five-month and I'm the eldest. And soon enough it was like, how do we begin working and taking care of ourselves?

I recall my mom, you know, her first thing was, I have to start working again right away. There's no time to take care of my five-month. And so the program itself gave care too during the time, six months in school and then start working.

And a lot of the immigrants live reality around doing community care for their families. It's the reality that you start working in maintenance, in cleaning jobs or factory jobs.

And then I became aware, what did this mean around the care for workers? A lot of the fields on women not being taken care of in factory works, you know, working long hours.

The care for moms that don't have someone to take care of the kids and the role that became for the elders to do that, to take care of mom and take care of the siblings around the house.

And soon enough, I started working in a factory. I started working in restaurants. Started working in many levels, and I felt like, wow, this is so unequal.

There's so much massive production of consuming things going on, but the labour and the exploitation. It was like wow, tremendously what my mom was leaving back home in El Salvador and telling me the story that she started working at four colones a day in El Salvador and what that meant, right?

So we're thinking about how women have been doing this labour movement in the last 106 years. We still have a lot of work to do. But a huge applause to the ancestry of the lineage of women's movement who studied this over a hundred years ago through the feminist movement, through human rights.

And soon enough I was like, okay, I need to figure out what I'm gonna do here.

And the social work field around that time was really increasing. And originally I wanted to become a nurse, but as a second language speaking person, I didn't qualify. And I was terrified when I did the exam in the nursing, 'cause I didn't have the academic skills to have the academic language to be able to do that.

So George Brown took me and said the career development, do a social work field. So learning through, education, you know, finishing high school and getting into college, I wanted to work with people. I saw a lot of pain, a lot of sorrow, a lot of displacement on immigration, going on. A lot of hurt of displacement. You know, I'm not from here, but I have to be here. But needing to embrace and embrace the blessings, why I am here and why did I come here?

So I became a student at George Brown at the Assaulted Women Counsellor Advocate Program. But we didn't have it here. We were at Nightingale, Elm Street and Dundas. That was when it was first opened. And I became an advocater I wanted to really focus on bilingual work. Then I met TRCC, I met Fred Victor, I met

Elizabeth Fry, I met Barbara Schleiffer. And I just began to meet all this amazing activist movement of women who were doing all this community care and marching and saying, we need these rights.

'cause I remember when I arrived, there was elections going on. And so the Conservative government, even though I've been here for thirty-eight years, they continued to battle, being the right wing to really cut things up. And so I recall that when I wanted to get into nursing, not only that, I didn't have the economic or the cause to be able to sustain that from a working class values and also working class status that I didn't have the funds, OSAP was a blessing for me. And I'm hearing OSAP is being cut.

So the community care that has been happening in the experience that I've been in the field, it's tremendously amazing. But also at the same time, we need to continue to lobby.

And what TRCC brought me is how we do community care for survivors who are impacted by some kind of difficult, traumatic experiences around gender-based violence, sexual violence, supporting sex workers, supporting the Black Indigenous communities. What the barriers are. What the barriers are around access. And the importance to have medical health education.

And the places that a person arriving here may take three to five years to actually be, to a place of common ground, but not settle.

You know, there's this rush to settle, settle, but if we become a community care unit for the services that we provide and the Center, my respect. 'cause they've been around for 52 years and they've battled a lot to be part of that anti-rape movement because they are the first rape crisis center was open up in Tkaronto.

So I'm gonna stop there. Thank you.

CLAIRE: Thank you Eliza for inviting me to be a part of this talk. I think it's also a little bit radical just to be invited because I think birth work and the importance of birth often gets ignored except for by other people who do sexual and reproductive health.

So it's really nice to have the importance of birth recognized at a talk like this. So thank you.

So I'm not gonna go into my professional things 'cause Eliza already did that, but I will say my mother and my grandmother are status First Nations. My grandmother was born at Moravian of the Thames Reserve number 47. And due to deep gender discrimination in the Indian Act, I do not have status, but I am part of the urban Indigenous community of Toronto where I grew up and where I currently live and where I work and where I've worked as a midwife for my whole time as a midwife.

And that I'm very grounded in who I am as an Indigenous woman due to my kinship relationships.

I grew up with a deep understanding of what it means to be an Indigenous person from my mom, from my grandma, from my aunt and uncle, and my siblings. And this continues to develop in the relationships that I have developed over the years.

I just realized when I do this, I usually have a slide that has some pictures. So imagine you see a picture of the Delaware River Valley, and in our language this is referred to as *Lenapehoking* or "the land of the Lenape".

And land and place are such an important thing and have such an important connection to healthcare. And that we often think about land and place as being like a river or a forest or mountains or maybe the ocean. But having spent the majority of my time growing up in an urban community and being very tied to the urban community, I have a strong connection to Toronto and to the land here. And just because there's a sidewalk, it doesn't mean it's not the land. And so this is also an important part of healthcare for me.

So back to Lenapehoking, although we were forcibly removed from our territory during the mid 1700s, our teachings, our ontologies and our epistemologies are rooted in a life lived in relationship with the river and the land. We carry our language, our stories, our ceremonies, and traditions with us wherever we grow, wherever we go. Sorry.

I grew up actually in a small city outside of Toronto and have spent most of my adult life living here on the shores of Lake Ontario in relationship with this place, with the urban Indigenous communities and the diversity of people who now call Tkaronto home.

For me, being a healthcare provider and being a midwife is about responsibility and about relationship and self-determination, and this is where my work begins from.

My work is very grounded in an Indigenous feminist perspective, and that self-determination of our nations cannot be fully realized unless all members of our nations are included.

And that means we must address the gendered nature of colonization. And that sovereignty of our nations cannot happen without sovereignty of our bodies. And so this has led me to a deep commitment to reproductive justice. And I've always been interested in reproductive justice. And for actually quite a while, in my first degree was interested in everything not to do with birth. And then I became a midwife. Which is kind of funny.

But I was I think as a young person, disappointed with sometimes the focus when it comes to women's health, solely on women's health as being about becoming a

mother and being pregnant, and wanting to really push against that and to think about how women's health is more than just about having a baby.

And so that's actually where my interest in midwifery started, interestingly enough. And I joined the midwifery program and have learned a lot since then in my journey to learning about midwifery. Thinking about how important birth is and what birth means for not just the individual who becomes pregnant, but the person they give birth to. But also to like family and community. And thinking about birth as really not just a individual event, but really a community event. And what it means when this is how we look at birth and this is how we think about birth. And when we think about our people being healthy from the very moment that they are born.

And what does that mean when our babies can be surrounded by family and culture and their languages and their land, and how much healthier could we all be if that is how we started out our lives.

LORRAINE: I will say our sidewalks could be beautified so it feels more like land.

Yeah so I'm Lorraine. People in the community called me Low. There was one person in the Downtown East who calls me Michelle 'cause that's what she thinks my name should be and it was a lot of years before she started talking to me.

So I will respond to Michelle and whatever other name you think might be appropriate, I have been called worse, I am sure.

So the question is, can you introduce yourself, which actually TBH is so hard to answer. And I'm very aware that we live in a world where someone says, can you introduce yourself? And automatically we define ourselves by what we do. And I'm actively trying to move away from that. So I spent a lot of time being like, how do I introduce myself? Do I just tell you about my traumas? Not the place, I know.

So my introduction that Eliza gave, I identify myself as a daughter to a solo mom, as an immigrant. And that actually just defines so much of how I grew up in terms of my intersections with the immigration system. Calling different places home. Being a Chinese Canadian means I don't feel entirely Chinese and I don't know what it means to be Canadian. And so there's this third culture thing that I'm trying to figure out.

But even like being a Chinese Canadian downtown versus up in Markham is totally different.

So the other piece of how I would introduce myself is I'm someone who's constantly feeling like I have to code switch to figure out where I fit in. On my way in, actually, I was saying to Jess at the back that I was like, uh, I've never felt so white before in some of the spaces that I'm in.

Because right now I'm working with predominantly Black youth. And every day I'm on Urban Dictionary being like, I don't understand. Which is fine. They'll explain it to me. Some of this is an age thing That's okay.

So yeah, so I identify myself as a daughter. I am fortunate to be in a dual income household. TBH, one of the best parts of being married is having a second income. Like, love my guy, but also having a little bit of income buffer is great. And that's also how I see myself right now.

And then the question was also my communities, which is also a hard question 'cause I feel like we all straddle many different communities, right?

I'm aware that I am a part of different communities and not all of those communities are in proximity with each other. And so sometimes I think a big part of who I am is actually trying to be a bridge builder. Trying to connect my very traditional conservative Chinese Christian family to my neighbors down here, in the Downtown East.

So I think being a bridge is something that I'm thinking a lot about. Also trying to bridge my experiences working in the community with people in academia or like people in school, right? So that's a part of my community as well.

But I think a really big part of my community is the people that I get to work with on a daily basis.

And the question was, how do I define radical work of care? Radical care.

The root word of radical is actually the word root. And I think we often think that radical means something totally extraordinary. But actually radical originally as defined as just like the basics. So when we think about the root, like the radical, so the root of care for me is really about compassion.

And the original Latin meaning of the word compassion comes from two different words. It means "to suffer with". "Comm" is "with", and the word "passion" comes from the word "suffer".

And so for me, the radical root of care is really about returning to the root of what care means, which is really about compassion, which is different from pity. 'Cause you can walk by someone and have pity on them. You can have sympathy for them. You might even get empathy for them. But the goal is really about what does it mean to suffer with. And I think that's what pushes us towards thinking about solidarity.

And the way I came to this was, ... so in my intro, Eliza mentioned I went to school for music.

Why? I don't know.

No shade to musicians. I just like Asian family, Asian mom. Came here for an education and I really wanted to like not go to school after high school. And my mom was like, she had words for me. But she's like, do something.

Also, I think it's crazy. We want 17 year olds in high school to make decisions about university. Who thought that was a good idea? Because my brain was not formed when I was 17. And then in this context of OSAP and tuition, so now we're asking like 17 year olds to pick a bunch of classes for university. Then they have to accumulate a pile of debt for something they may never work in. Anyways, I can talk forever about this.

So I went to school for music. It was fun. It was a good time. But my first week of school I was at undergrad at U of T and back then there was this bougie, beautiful music store called Remini on Bloor Street. It's no longer there, it's now a bougie hotel.

But I had to go buy my books. And that first week of class, there was someone, I didn't know him then, he's become a really dear friend. His name is Bear. And he was sleeping on the alcove of this music store. And I'll never forget that I had to step over him to like go into the store to buy my books. And I was like, this is terrible.

And then when I was done doing my thing inside, he was still sleeping. And I had to step over him to like leave the bookstore. And then I watched as all these other people just kept stepping over him to just live their lives. And I was like, this is absolutely horrendous.

How do we live in a city like this where this is acceptable?

And that was the feeling that never left me. And then yeah, I just kind of went down this rabbit hole. I was really curious about people's stories and why people ended up on the streets. Very aware that growing up with just the mom, she worked a lot, but we never ended up in the shelter system.

So like why? Why not us? Right?

So I think our best teachers are curiosity and I just kind of wanted to volunteer at a drop-in to try to understand, get to know my neighbors. And that is actually how I really identify myself in my community. So yeah, I'm a daughter, I'm a partner, I am a fur parent. I'm a friend.

But ultimately I think the root of all this is that I'm a neighbor. I'm not a worker, I'm a neighbor first. Because I think when we see people as neighbors, we actually have a curiosity towards people's lives.

So I started at this drop-in, wanted to like volunteer. I said I would help in the kitchen. The coordinator was very kind, told me to make a beet salad. I cut up turnips and

instead, 'cause I didn't know what beets were. And then they said, you know what? Why don't you go talk to people instead? Huh?

So radical care lesson number two is that often the things we think are most helpful are totally useless and you might be needed to do something else.

So yeah, I went to go talk to people in the community. I showed up the same days every week, sat in the same spot. And that's honestly how it started. I got to know people in the community. Some of the people that I first met who were unhoused, who were totally different from me, started just sharing pieces of their lives with me. And I was really grateful.

And yeah, years later, a lot of them have sadly passed away, which I think is part of this conversation about what we build a livable city and what that looks like. But, a number of the people that I first met when I was 18 at that drop-in, became some of my dearest friends.

When I got married, one of the guys walked me down the aisle. And then there were rumors in the street that I married a guy in an alleyway. That's okay. We sorted that out eventually.

So that is definitely kind of my identity and my understanding of radical care.

ELIZA: Thank you all so much for those really robust, lovely introductions and bring us into the heart of care and how care is community work.

I wanna pick up on something you mentioned, Claire, in your intro, which was this idea that birthing work is often left out of discussions of labour.

And so my question for all of you is about labour and how labour shows up in your work, your community practice, your work of being a neighbor, your relationships, in ways that might not get recognized when we think of Big L Labour. And how does care function in relation to labour or in relation to your community practices of care?

GRISSEL: It brings me to the healing piece. How do we bring community to understand the importance of healing. And in doing this work through the privileges? 'cause we do have a lot of privileges that have been manifested and also earned privileges to be able to do community care and radical care.

Because I learned from so many mentors and teachers and such tremendous radical community to say, you can do this here.

I had to learn first English to learn how to do that. So that then I can go back to my roots. Going back to, you know what we're hearing about the radical rootness is how I had to go back to my roots in Spanish, the colonization in Spanish, and sort of figure out how am I gonna apply that?

Because being a second language in English, it brought me that openness. How do I recognize myself as a person that will be in the labour market, and how am I gonna see myself and define myself knowing that for my gender or my sexuality, or being a single mama 18, how am I gonna define that knowing that there's so many stigma around that?

And that brought in a lot of acknowledgement to the healing work that needed to happen internally, mentally, physically, to say, I can stand up for myself. And I can define myself and walk through the challenges and also support my family and do the community care for that.

You know, many immigrants through their parenthood who got here, who didn't get that, that privilege in many ways. And there's this stigma of how we unvalue so many things because it takes a precedent around money, around consuming, around capitalism and you know your earnings.

Yes, we need to earn, but there's also the love, the healing and the community that it takes to be able to heal.

The amount of work that the center has done and what we've learned and what survivors learn from that, it's another sovereignty of survivorship. And that we're still trying to figure out how do we do that into the future generations. And how do we carry that legacy of everything, you know, of birth sovereignty, roots, why we got here because of other impact colonization somewhere else, or the genocide. And so it's all interconnected. But then it defines that every time I'm not feeling well, I have a difficult time to ask for support and help.

And if I go for support and help, where am I gonna ask that? Because am I crazy or am I not okay? Or am I not good enough? Or only the people who are rich have access to that service, right?

So it's always knowing what does the person before me through that intersectionality also need? Because they come from many experiences of other colonization and exploitation from wherever they are in this world.

And we're seeing it right now again. This whole impact of war. And war for us in the anti-rape movement, is women against rape because it's a weapon of war that continue to violate the rights of humanity. And then we enter another cycle of immigration. How then so-called democratic slavery going on in this many pockets of sustainability to bring up economy.

But what does it really bring economy?

It's not taking care well of our doctors or nurses. You know, the pandemic left us with the medical system being not valued. And at the same time, what is there to be done? '

Because when I started doing the work to become a nurse, they were closing down 85 hospitals during the time. And the career counselor said, don't get into that. On top of not being able to pass the exam. But I was like, you know what, this gives me more time.

And then finding social work field. People were laughing at me. What you gonna be a social worker? That's like so much fun. It's not fun. It's not fun. Social work field, advocating for somebody's right, somebody's healing and trauma and where to go to. The anti-psychiatry movement that happened as well. What is mental health?

Mental health is number one piece to like the loving connection to healing and physical wellness. And so the intersectionality around that, through faith, in spirituality is also a big thing.

And how we connect that here. I remember coming to class here and I was like, my class telling me, my teacher tell me what gender, race and class. And I was like, what do you mean gender, race and class? Go and find the root of that, why you came here to this country. And you'll find your answers around what is the impact of that and how you gonna go do that work with your community in your own language. And know the sovereignty of humanity, how continues to be in the labour, but not being valued? And it don't matter what work you do at times that you continue to fall in that place of " democratic slavery".

CLAIRE: It's interesting because when we're talking and we keep talking about labour, and when you ask questions like, how is labour in your work? And I'm like, well, when somebody's in labour, I go and do my work.

I keep just thinking about labour like birth.

But I'm like, okay, no, we're talking about like a different kind of labour, but sort of the same too.

But one thing I just like kind of latched on to talking about healing and thinking for me being a midwife, and an Indigenous midwife particularly is like so much about body sovereignty. And I mean, I think that connects to a lot of the work that you both do as well.

When I told my story about how I became a midwife, I feel like that's something I really didn't understand or when I was kind of thinking was not recognizing the importance of birth, is like how much body sovereignty for an individual person that then expands though to their family and to the community, is really so tied to healing. And especially when we're talking about Indigenous populations.

I work here in Toronto, but really I think there's lots of similarities across the country, but also globally, thinking about colonization and really the role that the decline of midwifery played, as like a tool of colonization.

How control of Indigenous women and women's bodies and two-spirit and queer people's bodies, was a very intentional goal of colonization and a tool to displace power and take power away. And a certain type of power that was respectful of difference, away from Indigenous people.

So when we are talking about birth and midwifery, we really think about our role as midwives as extending beyond just birth and thinking about sexual and reproductive health more globally.

Thinking about things like understanding consent and understanding what is happening in your body. And knowing those processes then puts you in a position to be able to like articulate things around consent, articulate things around your health.

I think one of the things that gets lost is really the connection between the importance of body sovereignty and Indigenous peoples' sovereignty.

I feel like people very much, especially in these circles, are pretty familiar with the idea of like land back and what that means. And these things can take a priority, right? 'cause that is such an important part. And I don't wanna diminish its importance.

But I often think to myself, land back doesn't matter if you don't have sovereignty of your own body. And that, that is such an important piece that they have to go together.

We at the National Council of Indigenous Midwives, we have a social media campaign that's called "Birth Back". And really trying to make that point that birth back is tied, and body sovereignty is tied to land sovereignty and is tied to the land. And the real connection of those things.

LORRAINE: I think this conversation about body sovereignty is also tied with a conversation with harm reduction, which in our current context is heavily politicized, rooted in morality and not evidence. But harm reduction is this idea that like, hey, people are gonna do the things that they do, how do we reduce harm? So I think that's such an important thing to talk about as well.

Okay. First of all, I witnessed my first birth like maybe two years ago, and I like lost my shit. This is such a crazy story. One of my brothers was like, yo, yo, she's, she's in labour, you need to come now.

And I was like, okay. So like, brought my book 'cause I thought it was gonna be like a whole thing Anyways, she's like, no, you're in the room. And I was like, oh, okay. So like, I sat in the chair 'cause I was like, you know, brother's gonna be holding her hands. I'm sitting in the chair. They're like, no, you're gonna be right here.

And I was like, me? Ah...

You know what? It's gonna be one of like the top things I'll never forget. Watching this baby come out of her. I was like, this is fucking insane. And so I'm so grateful for the work that people do to birth humans into the world and that process.

But one of the things that I walked away thinking too, was like, what would it look like for us to birth a new imagination of what the world could look like?

And that labour is hard. It is hard to reimagine what the world could be.

It is painful, it is long-suffering. It is not just like the actual delivery process, but it's like the process leading up in the pregnancy and like afterwards. And it is all the people who rally around after the child is born to create this imagination of a different world, right?

So I don't have human kids. But like my goal in life is to be the best fun auntie to all of my friends' kids ever. And I'm like, I think I'm a very important person in that context. I don't know, that's what I think. Anyway, just biggin' myself up here.

But I think when we talk about labour and birth in this context, I think it's really important for us to think about in this conversation, what does it look like for us to birth the world we want to live in? And it takes hard, hard, committed work, in so many different avenues.

And so when I think about what labour is recognized and what labour is not recognized in this context of imagining a different world, it's always the people that are maybe on the front lines who are most recognized, right? But I really wanna emphasize that we all have different parts to play in the movement.

And sometimes the really invisible work is the ones that are not recognized. So Surge for instance, just started their child-minding program again to look after the kids while like maybe caregivers need to go to a rally. So important.

You know, everybody wants a feast, but nobody wants the dishes. That's an old saying connected to Dorothy Day.

I think the really unseen labour is often what's not recognized. And I would love for us, as we think about labour, to find ways to actually see the things that we don't see, right?

So it's hard 'cause like you don't know what you don't know.

There is a book by Deepa Iyer, IYER. Deepa writes about different roles we can play in the movement. And I highly recommend that as like a little bit of a tool, maybe do that with other people you're working with.

And of course this conversation is connected to race and class, right? Just the way that our whole society is built on the backs of racialized people.

And I was thinking this morning about, months ago there was a tweet. Somebody was mad about Uber delivery bikers with their bikes on the go train. I was like, ma'am, these people are probably delivering your lunch to Bay Street. Like cut them some slack, okay? They can't afford to live in the city, so they have to commute in with their bikes.

Most of the Uber drivers and delivery people I've seen lately are mostly racialized people, right? So we know that. You know, during early days of COVID we were banging our pots and pans for grocery store workers, how quickly we've forgotten.

And I also think that work that is really important in my opinion, and part of care work is often not measurable. So most of us will end up working in an organization and I think this is an important conversation to have around funding as well, because funding is often tied to reports. And reports want to see your deliverables?

Y'all, if you wanna ask me how many people I've housed in the last 15 years, it's embarrassing. If I ran an organization, probably would fold if it was solely based on that.

But I know that like, ask me how many people have called me when they wanted to jump off a bridge.

I had a brother call me years ago to be like, yo sis, I just like cut off my ankle monitor and I'm on the run.

First of all, don't call me, but yes, call me, tell me. But how do I quantify that in a report?

How do I quantify that I am somebody's next of kin for somebody who has nobody else? That's the care work that is often not recognized. It's hard to form that as a deliverable. And I think it's a really important conversation to have as labour workers, especially in organizations who depend on funding, who look for these things that we cannot actually articulate.

Engineers can get all sorts of letters behind their names, but like, BFF is not gonna get me like a higher paying job, right? And so I think that's the stuff that we need to really think about when we're talking about unrecognized labour within our movements, but also larger.

And one other thing that I think a lot about.

This is a person, his name is Bishop Kamara. He's a Brazilian archbishop. And years ago he said something like, you know, when they feed the poor, they call me a saint, but when I ask why the poor are hungry, they call me a communist.

That's a mic drop. But I didn't say that he did.

People love to honor like, oh, you do such good work. I hear that all the time. Right? Oh my gosh, you do such great work. I'm so glad you're doing outreach. Duh-da, duh-da, duh-da. But then I'll be like, yo, like all of y'all are like voting for death, like voting for Ford. And then it's like, well, I don't know about that.

Also I'm not insulted when you call me a communist, it's fine.

But the second we ask questions about systems, when we start to push for change for systems, that's the work that I think is not recognized.

The work of like frontline is always honored when we're like doing the nice charity stuff, but the grunt labour of justice work is often the stuff that is not recognized.

The hours of meetings and strategizing and collabourating and maybe arrest and like losing sleep over what we do next when new policy decisions are coming. All of those things are not recognized and often diminished. And I think, that's a really important part of the conversation when we think about the labouring of a new world.

ELIZA: Thank you all that was incredible responses all around.

I'm gonna pick up on something you were talking about Low in terms of we all are doing this work while navigating different parts of the State, needing resources from the State, needing to resist the State in an insecure surveilling effects on the radical work of care.

How do you navigate working with and within systems like healthcare, funding bodies, the legal system, the non-profit industrial complex, while also resisting the harms and neglect that those systems can produce?

CLAIRE: kind of gonna answer this question and go off something that you said as well. Yeah, the reporting and when you're a midwife you get paid in these really weird ways where you have to take care of somebody for 12 weeks or you have to attend their birth. And if you imagine the number of people you can care for as a midwife before they get to 12 weeks and then don't end up having a baby, it's quite a few people you're taking care of.

It's like not just frustrating when you're doing that work and it's totally ignored by money. It devalues first of all, the outcome of a birth and a pregnancy, which is like a whole other lane I don't wanna go down.

But it also like really defines what people think is care. Right? And only counts as care or it only counts as labour if it looks a certain way.

And when you're a midwife, you have to like, take care of somebody for 12 weeks or you have to attend their birth. But then there is like all these other things that you do that just don't get recognized and for some people are more important.

So the other thing I do is I work at 7th Generation Midwives Toronto, and we have an Indigenous midwifery program. And part of that is we have a hospitalist midwife who works at the hospital taking care of high risk people. So people who previously would not have been qualified for midwifery care or would've been transferred out of midwifery care can still have a midwife when they're at the hospital.

But luckily through this program we've been able to through like advocacy have been able to change the funding structure. Which means the hospitalist midwife now counts every single encounter.

I'm not gonna get into the funding structure 'cause it's unnecessary information. But there's like a tiny little bit of recognition by the funders, by nobody else, that going to somebody's hospital room and bringing them like underwear and a clean shirt and a toothbrush because they've just been evacuated from like their home because they all of a sudden go to their OB and at the drop of a hat, have a high risk pregnancy and need to go from their community to Toronto with nothing.

And having that hospitalist midwife go and bring those things to that person and say, I'm here for you and you are welcome here and we are gonna take care of you in this way that is like slightly more humane is like maybe a tiny bit recognized.

But I'm gonna say not really because the people we work with don't actually recognize that that's healthcare. And that that's like an important part of the job. And they mostly think, oh, we'll call the hospitalist midwife when somebody wants to smudge because they know how to fill out the paperwork better than we do.

And definitely don't recognize the kind of relationship-building that it takes. Like the hospitalist midwife's name is Claire. So that, like Claire does all this work of trying to make somebody feel comfortable and then when she does that work, the person is able to get better care from the hospital team.

That part of it is totally ignored and not seen. And they're like, oh, well Claire just brings toothpaste and smudges with them. And doesn't recognize that, no, Claire has explained everything that you didn't have time to explain and has made them feel safe and made them feel comfortable and now they understand what's happening. And now they can be actively participating in their care in a way that they previously weren't able to.

GRISSEL: Amazing. Thank you for that.

Very challenging. So the social work field or the frontline work, the frontline work as labour, it's so devalued. When we're doing so much caring, so much support, so much healing going on, so much advocacy. And I find it very challenging that also

the social work field and the frontline work is so burdened because of the massive, the massive increase on issues that's going on on shelters for all genders.

The populations have grown in the last three decades. And so when we're talking about Indigenous sovereignty, we are still so behind on that, even as someone who's been here for 38 years, it's so behind. You know, so the priorities around how do we define that care when there's so much need around the essentials?

COVID would've been like six years ago this month, we were in lockdown and the essentials became food and the liquor store. Now they're called them spirits by this new government, the spirits, let's have them everywhere in the corner. And so I thought that the COVID would bring more, because the challenges were already there before COVID, around how to have public health hospitals, emergency cares, on mental health. Mental health impact on healthcare for humanity has become greater and greater.

Every time I call a shelter, there's no beds. And I have to go back to that survivor and say, I'm sorry, you don't fit the criteria. Or I'm sorry. You know what, they don't have beds.

Or the people have already been around this cycle of being around the shelters. And because also of other challenges around being in a shelter, they're not accessible anymore to the person.

Housing is very important, essential to somebody, right? When they're dealing with trauma, they lost their jobs, they've lost everything, and they have to start from zero.

Our youth an humongous crisis. You know, when I hear harm reduction, harm reduction, right now there's no more budget.

So I feel like, you know, we're going so backwards in so many ways and the challenges are gonna be greater starting April 1st. 'Cause April 1st there's a new budget, and then it's gonna define the next year.

And the elections are gonna define again, who's gonna get, you know, through their Amazing Race. So there seems to be this amazing race that humanity is being undervalued while the impact of stressors of our new generation trying to get to high school, university, finding out define profession, and also the minimum wage.

Now, when I started my first job at 15, I was \$4 an hour in Burger King. \$4 an hour and I felt so rich. You know, my summer job, my summer job. And I was like, wow, how many hours I have to work to buy my first jean jacket.

My mom was like, no, we have to pay rent. You have to pay bills. Whatcha talking about with jean jacket? I'm like, what are you talking about? Because Jean jacket was the thing to do that day. And so there's this ambition of, you know, in terms of how do we provide the healthcare.

Hospitals are suffering in terms of long hours to attend folks, right? And so things are gonna become more challenging. And the shelters, the hospitals, the schools, after programs for children, you know, childcare is becoming more and more difficult and challenging around subsidy. Like everything is becoming this small.

And then you hear the economy of Tkaronto-Toronto is \$444 billion in capital. I hear all this economists, I'm like, oh, so Toronto is so rich, but we don't have money for this, right?

And so the challenges around how to care to community is gonna bring it back to how do we advocate and go lobby again.

The women's movement in parliament is so disempowered. I see them right on the trenches. Every day on the trenches. This is going on, this is going on, this is going on. And they need a lot of support to be out there in terms of the activism.

How do we take the agenda back to lobby for human rights and human benefits, or essentials to everyone everywhere in the world.

And I find it difficult that I'm like, I am ready to retire. I mean, I've been working in the field for a long time. But more Latin American people are coming in. And every time I sit down with a person it is like when I came here 38 years ago, is the story over and over again.

Process of healing, process of resources, process of information. Can I get my immigration case? Can I get housing? Can I get education? Can I get this? Can I get this? Because everybody's looking forward to how, what they had back home, but they couldn't have it. Now we're looking at it somewhere else.

So invite you of all gender folks here to please define yourself. How do we define our passion, our dedication, determination. Because we are all needed, needed, needed. We're all important and beautiful. Thank you.

LORRAINE: So the first part of the question is how do we navigate working with systems?

I spend every day not knowing how to navigate working in the system because the systems keep changing and the systems keep feeling more oppressive and impossible. So I'm not really sure how to navigate working with the systems, except we throw spaghetti against the wall and see what sticks.

But one thing that I've been thinking a lot about lately, and this is connected to like the beginning when I talked about figuring out what it means to try to be a bridge between different communities, also connected to my own personal story. Like I'm really good at code-switching and I think that's a really important part of navigating different systems.

So I can have a really great conversation with people in the community that I'm working with who speaking a totally different vernacular than like lawyers are. And so sometimes the work in navigating different systems is actually helping different systems understand what's happening.

So for instance, like I had a lawyer recently go, oh, can you just leave a message for somebody who's inside?

I'm like, uh, yeah, I can go see them this weekend. And they were like, no, just call them and leave a message. And I was like, uh, ma'am, nobody at the jail is picking up a direct line for me to leave a message for someone inside. And it's not their fault that they don't know, right?

A big part of when I think about doing my work and figuring out like how to navigate these systems well is to code-switch between different spaces.

And as somebody who's a younger female, I also know that I get an easier time in certain spaces than some of my peers do. And I will play the game to work to my advantage.

I have glasses sometimes that I wear. I'll wear glasses to go to court 'cause they'll treat me differently when I advocate for someone's release.

It's wild that we have to do this, but I'm recognizing that that is where we're at right now. So I play the game to try to figure out how we can move a few steps forward.

Yeah, so code-switching is something I think a lot about in terms of navigating and information-sharing and bridge-building.

And connected to that in terms of the second part of the question, which is about resisting harms. I think a lot about like collaborative work between different "care providers". So some of the people in the community that I feel like have been supported the best are people with whom I know there are doctors, there are lawyers, maybe there are neighbors, the supervised consumption sites that they go to. And there is a very open communication set up. And we might hear this framed as like a "circle of care".

And in the professionalization of labour, I realize there's always this conversation about like boundaries and confidentiality. So yes, those things are important. Don't go to some random person and be like, oh, Claire told me this and dah, dah, dah. That's not like appropriate.

But like being able to call somebody at the Moss Park site, for instance, to say, Hey, I'm looking for so and so. They have a really important court appointment this Friday. You see them every day. Can you please remind them? And then like, oh, hey, so and so have you seen this person lately?

And then like a doctor might call their office and say like, Hey, their script is almost up. Can we work on getting a refill as soon as possible?

That collaboration, in my opinion, is some of the best ways to resist some of the harm that does happen. Because I think part of the professionalization of labour is also about siloing these different, what we call sectors. And this creates such disembodiment in terms of how we care for people as a whole person.

So I really, really value people in various workspaces who are willing and understand the importance of collaborating with people who are also doing their best to try to like care for people. So that's something that I think is really important in trying to resist harm.

I think the other piece that is important is sometimes I think when things are happening so fast, we're super reactive. But I think it's important that we play the tape forward. My friend Wong actually was the one who taught me about the seven generation principle. Every decision you make, think about how it impacts like the next seven generations.

I'll tell this joke 'cause it's his favorite joke. So Wong is an Indigenous man who was adopted by an Asian family and his favorite joke is two Wongs don't make a White. Ha. Pretty funny. I thought it was funny. Anyways, it's his favorite joke.

But he's the one that taught me about like, okay, think about how each thing affects the next seven generations. Whether it's something that you do yourself in caring for the person or whether it's a policy that's being enacted that you know is coming down the line. I think it's really important for us as we're imagining a different future, that we actually also think a few steps ahead and not just always react to what's in front of us.

I will name that it feels impossible because everything that's coming is coming so fast. You maybe all have heard the term like flood the zone. But it's really important that I think one of the ways to resist the harm is to try to anticipate what's coming.

And I'll say the third thing that's really important in resisting harm, is really about taking care of ourselves.

And I really hate that self-care has been capitalized as this woowoo wellness thing. Like you're not gonna bubble bath your way out of you know, violence and state oppression. But I will say that some of the people that have caused the most harms to the communities that I've worked with are the same people that are supposed to be my colleagues in the sector. Because when people are burnt out, they do shitty things.

And to Grissel's point, it's hard out here so people are fried. But I think we have a responsibility to not work from a place of emptiness. We cannot pour from empty cups. And so I think it's really, really important that as we think about this bigger

picture of labour or maybe like smaller, like micro interactions with people, that we think about what it means to like take care of ourselves. To make sure that we're able to show up well for people that we're supporting And connected to that is to make sure that we have people in our spaces who can call us in when we're like you know, being a little bitchy one day.

People that I work with know that they have full consent. Like one of the first conversations I have with people is like, if I've offended you, if I've said something that makes you mad and makes you sad, makes you anything, tell me. Because it's really important that we have people to hold us to account when we're not actually behaving in a good way.

So whether those are like people that we work with or organize with or people that we try to support, I think that's really important to have that space, that invitation to like, oh shoot, you're right. You know what, Aunt Flow's here and I'm just cramping and not happy. So like, maybe today's not the day to try to like do too much. That is okay.

And connected to that I think it's really important that we name our limitations. You are not gonna be everything to everyone. And there are people in the community that I've known for years that I just know I don't click with you and maybe you don't trust me. That's okay.

Then maybe somebody else can support the person better. And it's not a personal thing, it just is. Right.

So I think there's a lot of actual like self-reflection that needs to happen in terms of what it means to try to resist harm. 'cause otherwise we just become a cog in the wheel and we replicate the same harms that we're actively trying to not be.

ELIZA: Thank you. So I do have a final question about calls to action, but maybe we'll open it up for a question or two.

AUDIENCE MEMBER: Thank you for your amazing insights, Grissel, Lorraine, and Claire. I find it very interesting how it's not sympathy, it's not empathy, but it's this sort of suffering with, and I'm trying to connect that to what you said Grissel that there is a certain privilege that comes to be a social worker. I was talking about social work to one of my close friends. And he was like, I really like what you're doing, but at the end of the day, I don't want to help anyone if my tomatoes are expensive. And I think the point he's trying to make is that the common person, I guess, for lack of better words, is very selfish. He didn't say that. But I think I can say that based on the interactions I've had that if people get inconvenienced to help people, they would rather walk over that guy, referring to the example you gave at the music store.

How do I deal with feeling at one hand, privileged, but on the other hand, the burnout is so real as well.

Lorraine, you use the business word deliverable. And Claire, you use environmental scan as something that's inspired from marketing and business as well.

So now that we have all these tools here and we want to be sort of interdisciplinary, but then we also want to help people, but then we also wanna recognize our privilege and, you know, all of these problems. Can you help me sort of sniff out what I'm even trying to ask here? Because I feel like I have, I've gotten all these things here and I have these so many opinions, but what do you think I'm getting at here?

AUDIENCE MEMBER 2: So I have a question for all three of you because we are in this new capitalist society that we have to do social work in and midwifery and where you work too.

How do we challenge the system not get fired? Because I learned a lot of that in George Brown, how to be radical and challenge a system. But then we do have to deliver and there's funding and then there's a city. And I feel like what's his name hates poor people. How do you challenge a system but still do care, work and function as in social work and this care sector? Thank you.

CLAIRE: So there is this teaching in many different Indigenous nations that is a shared teaching, which is about the three sisters and how plants grow better together.

So there is the corn, right, which is tall. There's the bean. I'm doing a very simplified version. The beans need, the corn stalk to grow. And the squash provide protection for both the bean and the corns.

I think about this in terms of advocacy and work. And that each level of those things are needed, right? We need people who are like, at the leadership level and are challenging things and are going to talks and are changing people's minds. And we need the people who are within the system, challenging the system from inside it. Doing that work and trying to stay inside the healthcare system, but make little changes, maybe using the kind of tools of like environmental scans and I can't remember whatever it was you said to convince people.

But then we also need the people who are doing like the kind of outside the system work. And all of those levels are needed, but not everybody can do the same thing, right?

But all those levels need to go up to the leadership level too and to inform that change that is happening.

So I don't know if I'm really answering your question except to say that we need people in all of those places and you can't be all of those people. Or I can't be all of those people without burning out because it is just too much. But it is important no matter where you are or maybe at different times in your career, you do different

ones of those roles, to recognize that those other people are needed and you need to respect and help those people too in the lane that you are currently in.

LORRAINE: There's a book called *Abolish Social Work As We Know It*. So highly recommend that one if you haven't read it, if you have. Great.

I think that one of the really important things in advocacy work has been finding moles within the system who can tell us what's happening or like they can tell us what's about to happen. So there is a role to play in that too.

I also think there are micro things we can do as social workers in our interactions with people. So even how you case note is huge, right? 'Cause case notes follow people.

You talk about like the kid to prison pipeline. Notes from a kid's like elementary school will follow them. And now we have a system within the jails where like, you know, their security is determined by what they call a "safer score", which is determined by AI -crazy - and previous like documentation of all sorts that impact their criminal record, which now will impact their scores, which impacts what programs they have access to inside, on and on and on.

So I think a lot about like, yeah, we sometimes we can get lost in the weeds of the big system, but I really do think the important interactions in the micro stuff really matter too.

My friend Ashley talks about two groups of people in a room. There's like slow cookers and microwaves. Microwaves hear information and they like pop off with elaborate long questions and slow cookers need some time to think about things.

I'm a slow cooker, so very mindful that someone might listen to something and five weeks later they're like, whoa, well my stew has popped and I have a question and it's too late. And so my stew has popped. I clearly don't cook. I don't know why I said that. 'cause no stew is popping.

We haven't answered your question. So Grissel? ,

GRISSEL: You know, interesting about the tomatoes, his point of view of that.

We have a great responsibility with love and compassion and healing, that even if that person says that, you say, you know what? You make sure to go donate to a charity organization so that you can actually do some support. If you don't wanna be the social worker and you have the money and you're that privileged, go donate money to that charity organization in your local community in terms of the work that is being there for the social work field, because we also need fundraising.

We hear conversations like that, like all those people there, you know, they're the ones who are fucked up and they're lost and confused. They don't have a life. And

we're like, really? Wow. And so the disrespect that happens, because there's a root to everything, right?

There's a root to the issue whether state violence, community violence, right? Oppression, genocide, war. You know, there's a root of an issue here that continues to happen over hundreds and hundreds and thousands of years. And now because I'm in a more modern world or civilized world, it is being defined as, oh, who gets to have some funding or some money, whereas the billionaires are destroying the world like Trump.

So you wanna define the world by destroying it, while there's so much money to be invested on the immigration, of issues that need support for all the migrant workers in this entire continent and everywhere.

Because that tomato got to your table by somebody who planted it. And even that, you know, our migrant workers are not being valued for that tomato, for that food, for mother nature.

As you talked about, the three sisters, corn, beans, and squash. Without Mother Nature, we have nothing. We're nothing, nothing. So appreciating what we have in value and have much gratitude for that, it's great. Thank you.

LORRAINE: I think I'll just add on the tomatoes thing. I really struggle with this because I don't believe that people are defined by what they do.

But if your friend is stuck on the expensive tomatoes, this is something that I think a lot about. To Grissel's point, like, yo, sir, who put those tomatoes at the grocery store? Like if you can walk through the process of how we get here, cheap tomatoes come at the cost of racialized people working, seasonal workers.

For instance, you might not actually care about the wellness of migrant workers. However, Bill C-12 that's been pushed through the House is actively going to remove a whole lot of people who are riping your tomatoes right now. And so you will actually not get your cheap tomatoes and then you'll be mad about it and then we'll look for people to scapegoat.

I think the crux of your question maybe is how do we teach empathy? And I don't know. But the fact that we have this crisis of a lack of empathy. I have no answer to how we resolve it, but I think people need to see that we are only as strong as the weakest communities are.

Who said that? I think it was like a Nelson Mandela thing who was like, how we judge a society based on how we treat the most vulnerable.

And so I think most people don't realize that we are all closer to being unhoused on the street than we are being billionaires. There was a research done in the last

number of years where I think it's like most Canadians are three to four paychecks away from being unhoused.

But also we're all interconnected.

ELIZA: Thank you all so much for coming. Thanks Grissel, Claire and Lorraine for speaking.

RESH: That was *The Radical Labour of Care* panel featuring Claire Dion Fletcher, Indigenous midwife, leader and educator, Grissel Orellana, Program Director of the Latinx Women's Program at the Toronto Rape Crisis Center/Multicultural Women Against Rape and Lorraine Lam, crisis outreach worker, case manager, and advocate in Toronto's Downtown East and panel moderator Eliza Chandler, Executive Director of the Office of Social Innovation at Toronto Metropolitan University. The panel is part of the Transformation Café series from the Office of Social Innovation at TMU, and was hosted at George Brown Polytechnic's 34th annual Labour Fair.

And this is The Courage My Friends podcast.

I'm your host, Resh Budhu. Thanks for listening.

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