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Interview with Meg Batzer

Meg Batzer

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Interviewee: Meg Batzer

Interviewers: Jade Leavitt and Katarina Cerda

Date: May 7, 2021

Location: Zoom from California and Michigan

Collection: Auntie Sewing Squad Oral History Archive, SBS 112: Women and Social Change, From 1890s to the Present, Spring 2021

Length: 00:30:48

Overseen by: Dr. Chrissy Yee Lau

Biography

Meg Batzer, a lifelong Michigan resident, practices complementary medicine in her self-owned clinic while also serving as a member on the County Board of Commissioners. Having a background of serving her community, Batzer jumped at the opportunity to help during the COVID-19 pandemic. She became a member of the Auntie Sewing Squad, making more than five hundred masks for those in need.

Summary of Interview

(00:00) Batzer begins by describing her family life and her journey towards becoming a healthcare practitioner in complementary medicine. As a young woman who practices acupuncture, Batzer describes some occupational discrimination and gender microaggressions. (06:12) Batzer observes how people in her rural community has reacted to COVID-19, including their varied opinions and approaches to masks and vaccines. (11:47) Batzer explains how and why she joined the Auntie Sewing Squad, how much she has learned about sewing machine maintenance, and the gift of Auntie Care. (18:58) Batzer reflected on how the Auntie Sewing Squad taught her a new model of community building and why she doesn't consider herself an activist. (22:18) Batzer outlined her role as a county board member and some of the board organizing she has initiated in local healthcare.

Meg Batzer Oral History Transcript

00:00

Katarina Cerda (KC): Hello everyone. This is the Auntie Sewing Squad oral history interview for SBS 112 Women and Social Change, Spring 2021. Our interviewee for today is Meg Batzer. And the interviewers are myself, Katarina Cerda, and my partner, Jade Leavitt. It's Friday, May 7th, 2021, 12:21 p.m. and we are interviewing via Zoom. So just to start off with my first question: Meg, I read in the little summary that you sent to us that you grew up and you're from, you made your home and made your profession in rural Michigan. So would you mind just telling us about your background there?

Meg Batzer (MB): Sure. I actually was born in southeast Michigan, so the city of Detroit, and grew up actually in the city of Detroit when I was really young. And then when my dad finished school, he had a job with the state of Michigan and so we lived in the Lansing area for a few years. So I guess it was probably when I was about, I guess I was in sixth grade, we moved up here. Manistee is actually my dad's hometown, so he and his brothers grew up here. His parents were from this area for a fairly long time. It's a beautiful area, very rural for sure. But we're right along the Lake Michigan shoreline so we are very fortunate to be able to live where other people go on vacation. That also brings some downsides with it, too, because the town where I'm from has a traditionally very industrial economy, lots of factories in the area and so there's some tension kind of between those two parts of the community: the newer kind of tourist economy and then the older, more established industrial community as well. So anyway, I went off to college and decided that I wanted to go into acupuncture and Chinese medicine. So I actually went out to Portland, Oregon, to study that and then opted to come back here to start my practice. So here I am, haha, 18, 19 years later, still in my hometown practicing. I do have another satellite office, but I really love being here. The community is generally very welcoming, and there are times where I do miss the bigger city that I do miss having more diversity around. But I have noticed that our area has been changing, especially the last 20 years, and so it's not just that 90 some percent of the multigenerational families here anymore. So that's been pretty exciting.

2:54

Jade Leavitt (JL): Well, that's awesome. Yeah, with your life in rural Michigan and in your family life growing up, how would you describe your current family life?

MB: Well, my current family life is pretty straightforward. I've been single for several years. I live alone with my cat. So in a lot of ways, that's been a really wonderful change for me. My immediate family, so, my parents and my sisters are also in the area. I'm certainly dealing with aging parent issues. My mom has been having some memory issues that have become worse the last couple of years. So, it's both good and bad to be close by. I end up taking on a lot of the duties for that. But, she at this point is still independent but just needs some additional help with

errands and things like that and some oversight of some things. That is both good and bad to be close by.

4:00

KC: So, you said that you were in acupuncture.

MB: Yes.

KC: Can you tell me a bit what that's like in your own clinic and what it's like as a woman in the healthcare industry. What has that experience been like?

4:14

MB: So because I'm in complementary medicine, especially in Michigan, our profession has really struggled a lot for recognition. I would say that's probably the bigger issue. I've had my own clinic now for the duration of my practice. It's really small. I work out of a portion of my home and have for about 14, 15 years I've done that now. So in a lot of ways, it's very convenient, but it can be a little bit oppressive at times, too. But I've had great community reception. As a woman, there are a number of things that I've noticed, especially as a younger woman, people would frequently say to me that I didn't look old enough to be doing that job. The other thing, and I think it's a combination of things, I recently completed my doctorate at the end of 19, so, our profession is changing over time and so that's basically like the direction our profession is moving in is that doctoral degree is the entry level, and because of that, I notice as a woman, like most my patients still call me by my first name, even the new ones, and especially the older men. I do see a lot of the older population, they hear first name and so almost all of them still call me by my first name. That's been an adjustment. The other thing that I noticed is that partly because of my profession, but a lot of times as a woman to that, payment in our field has long been an issue and reimbursement, and so the value for the service, people don't always think that as a woman, you deserve that.

6:12

JL: Yeah, like the respect and everything coming from your industry.

MB: Mm-hmm, yes.

JL: So, also from the perspective of being a healthcare worker during the pandemic, what is your view on the pandemic and the effects it's had on communities in America and worldwide?

MB: That's a really big question.

JL: It really is, so you can choose which part to answer.

MB: Yes. So, thinking about how it's affected communities, I've noticed that a lot of the patients who I've worked with who might have had mild to moderate anxiety and in particular but depression also, it seems to be really aggravated. And a lot of the things that may have been manageable for people before or in some cases weren't are not very manageable for them, the isolation has been a really difficult time for people. The attitude towards COVID in my community is really mixed. There is a combination of people who are taking things so seriously that even now that they're vaccinated, they're still not doing a lot of activities. And then at the other extreme, there's also a huge and very vocal population that's like, "no, no, it doesn't matter." I set really clear expectations in my office that everyone is required to wear a mask while they're in the office. I'm fully vaccinated and incredibly grateful for that. What I do notice, too, is that a lot of those people, I'm still getting people who have just had COVID coming into my office. And some very recently, even though I'm pretty clear in my screening questions, there are a lot of folks who don't think that their exposure matters, that they need to quarantine after and so I see that as an issue. A lot of gatherings are still happening and a lot of indoor gatherings are still happening. But again, there's also a portion of the population who's very, very thoughtful about it. I have learned that careful means really different things to different people. So that there's a very, very broad kind of definition of careful. I also notice that in my small community, even though I think most of us at this point know people who have had COVID and either recovered or in some cases died from it. I see that broadly there's just not that recognition of how serious this illness is. And that people really have that desire to get out and do things. They're tired of being isolated. They were tired of being isolated after two weeks. And so, that "getting back to normal," I hear that a lot. Anything else you want me to add about that?

9:14

KC: I guess it's kind of apparent that you are very pro-vaccination. And do you think that your customers, do you think that the majority of them will get a vaccination? Or do you think that's something that is widespread in Michigan?

9:36

MB: So right now, I actually just looked at our numbers locally. So, for my county, we were at close to 50 percent fully vaccinated. I want to say it was like 46.7. That number is not real exact right now, it's just going from memory earlier looking at the news today (how much) of the population is fully vaccinated, which I think is great, considering that we're still pretty early in this process. I know that there is a real push to get towards that 70, 80 or even 90 percent would be ideal. But I also know that there was the first group of folks who were really proactive about getting vaccinated. And now I think we're getting to the people who are harder to reach for one reason or another, whether they're having access issues, whether they've got transportation issues or whether, you know, it's just not really their priority. Most of my patients, cause I know I put a little sticker on their chart because it changes my screening questions a little bit, once they've

either recovered from COVID or they're fully vaccinated, I make a note of that, so I see that on the whole most of my folks are vaccinated. I'd say probably 70 to 80 percent of my patients recently. But there's still that small percentage who's like, "Nope, I'm not getting it," "No, I'm not getting it yet." So I just asked them about their concerns. I try to really listen to what it is that they're worried about, what they're concerned about, addressed those in an honest way. A couple of them have gone ahead and gotten vaccinated, which I am tickled pink.

(Everyone): Laughs

11:23

MB: I've also been just trying to help people through this time just to access vaccine appointments. Listening to where the vaccines are available in addition to the health department. So, yeah, I'm definitely pro-vaccine. I really support it. But I also have some folks that they've got really legitimate reasons why they don't want it just yet.

11:47

JL: And I feel like access is a really big component during the pandemic, when it was first starting, access to masks, and now access to vaccinations. So then I guess I can bring us to the Auntie Sewing Squad. How did you get started with the Auntie Sewing Squad?

MB: So I actually read about the Auntie Sewing Squad in the news online and I just thought that it was really cool. I don't even remember which newspaper it was online. But there was a story about the Squad and the wonderful work they were doing. I think I probably joined up maybe June last year, and I had been really feeling very, very helpless at that point in time. There was just nothing that I felt like I was really able to do to try and address things in a proactive (way) and really just reminding myself that by staying home, even though it felt like it was doing nothing, I was actually doing a lot. Because I'm kind of a doer, I want to try and make a positive difference in the world and so to have that really helpless feeling was tough, especially with so many health care workers and essential workers out there risking their lives every day for the rest of us. So I found that I had been making just a small handful of masks for family and friends locally. It was kind of at the point where most people locally who needed one had one or two. And so it was just a nice way to know that I was at least contributing in some small way.

13:32

KC: Did you see in your own community an abundance of lack of masks?

MB: Lack of masks, but usually by choice. And especially early on, though, I will say there weren't disposable masks available. I couldn't even get them from my office as a healthcare professional. And so early on, I think a lot of us just kind of threw together some things. And I still see a lot of neck-gaiters and bandanas around locally. I think it's something that everybody

kind of finds their way so that they can have that base comfort covering in a way that feels comfortable for them or as comfortable as possible. I wear a mask at work all day now and so to hear people complaining about wearing one for an hour has always been a little frustrating to me. But I try to address those concerns about what's not comfortable for you, try the style, do this or that, because I think there's a lot of troubleshooting that has to happen. It's new for all of us. I still have people forget to bring their mask in and I know they wear one when they're out all the time. And so I just have some available. But, yeah, early on, I definitely did see a lack of masking. And so I even did things like make camo masks because that's what the guys around here will wear so let's get them on the faces.

JL: So you started making masks for people in your community. Did you end up having a history with sewing before you started sewing masks for your community or even joining the Auntie Sewing Squad?

15:04

MB: So my sewing history is really, really limited. I've owned a sewing machine, probably for, well it's been probably 20 years now. And it's usually one of those things that's up in the closet and I pull it out if I need to hem curtains or if I need to hem pants. And that's truly the extent of my sewing skills pre-pandemic. I know that I have not made as many masks as a lot of Aunties have. I think I'm probably around the 500 mark. But, yeah, a lot of the Aunties have made thousands and thousands, and so I've got nothing on them. These are just incredible people who do this work. So my small contribution I know that it helps some people and if it works for them, great, if it gets them in their rotation and on their face it's wonderful. So, yeah, I pulled the sewing machine out, dug out some old quilting fabric that I had probably from 20 years ago and started making some for myself and for family and friends. So that's my sewing history. Hahahahaha.

KC: Ahaha, so was there, like, did you have to learn how to sew it yourself or within the Auntie Sewing Squad did they have tutorials?

MB: Oh my gosh. They're amazing. They're amazing. I could run the sewing machine and I could do really simple patterns. But a lot of the stuff that I've done, I've adapted patterns, and so I guess I realized I had more skill than I thought, which was really kind of cool. But I didn't know how to clean my sewing machine. I'm like, what sewing machine maintenance? How do you oil your sewing machine? What? I'm supposed to be doing that and I've never done that once. And so, like, miraculously, my machines held up all this time. Oh, my gosh, they've got videos. They're super helpful. The Aunties are amazing. You have a question and you're gonna get a bunch of wonderful answers. And they're so thoughtful and they're so kind and they're just so positive. It's just a really, really wonderful group. I mean, I felt like I just stumbled onto this gem.

JL: Yeah, and 500 masks, that's nothing to look down on. That's an amazing amount to work on. And then also with all of the resources that the Aunties provide you, like that's also amazing. So, then being a part of the Auntie Sewing Squad, how does it feel, like what does it mean to you to being a part of such a widespread and selfless organization?

MB: It has been such a gift. You know, I feel like that's really been one of the bright lights that I found during this really, really difficult time. They're so loving. They're really working to create different models of community. I don't know how much you know about the Auntie Care that they do. Are you familiar with that?

KC: No.

JL: In parts. But you can explain.

MB: Okay. So, yeah, the Auntie Care is basically any, any person in the Sewing Squad, Aunties, Uncles, they've got some name for non-binary, which I forget, but, you can submit a form that you would like Auntie Care, and somebody will send you a little care package in the mail. And sometimes it's little stuff, a lot of it's handmade. These people must do nothing but craft in their free time, which is great, and I know for a lot of folks, it's really therapeutic. It's not my main hobby. I tend to be much more of an outdoors person. And I tend to just enjoy getting out, moving more, but they are incredible. And they send just sweet little notes and yeah, they're just great.

18:58

KC: Has being part of this organization changed your mindset or your perspective on anything in general?

MB: Yeah, actually, it's really changed my mindset on how to build community, how to support one another, different ways of looking at things. I've learned so much about sewing from this group, so much about sewing that I never even had a clue about before, like to adjust my thread tension? That used to be just kind of like, all right, well, I'll just do this. Well, there are actually ways you do that. There are sewing professionals in this group and they're all just so generous with their knowledge, so generous. And my work, compared to the work of all of these other Aunties, is very, very beginner work. And they're all just like, oh, great. It's wonderful. And they're so positive. But I really love how they build the community, how they support one another. I've also learned a lot about communities that maybe were on my radar and I didn't know that much about before. So that's been really wonderful, too. And just about representation, and these are things I've always been aware of, but I love hearing ideas that are updated to me, that are different from the way that I've been operating maybe the last 20 years and changing some of that language and why some of that language is so important for people. **JL**: So then talking about representation and language, that kind of brings us into activism and being a member of the Auntie Sewing Squad, do you consider yourself to be an activist?

21:02

MB: I love that question because I don't, haha, I really don't. I do a lot of community service work locally and I actually serve on our county board of commissioners, so I see myself as a person who tends to work within systems to try to change them. I well realize that my health care work that I've done all these years is kind of outside of the system, but we're working on becoming part of that. So I don't necessarily see myself as an activist. I see myself as somebody who's just trying to fill needs that are there, honestly, and address needs. I can't even begin to express my appreciation for activists because I think they bring up things in ways that the rest of us need to hear. And I really believe that there's a very strong role to be played by activists, but I don't consider myself to be one of those really brave people.

KC: So, you mentioned that you're a community board member or?

MB: County board member.

KC: Ah, county board member. Do you mind going a little bit into explanation about what that is and what your role is?

22:18

MB: Sure, yeah. That's an elected position, so we're up for reelection every two years. I've been on that board for four years now. The County Board of Commissioners kind of basically, we set the budget, we appoint people to other different boards, whether it's library board, road commission, things like that. And then we act as an umbrella organization and collaborate with other county departments, so things like courts, oh, gosh, like equalization where they set what your property tax rate is and then collect those from the townships and the municipalities. Planning is part of that. I'm trying to think what else. We oversee, well I shouldn't say we oversee, we're partners with the county sheriff's office, so I serve on public safety and we really just kind of act as an umbrella group. But there are ways that the county board, while most of it's really routine business, ways that we can do things differently, or ways that sometimes we can block change that I don't see as so positive. So, for instance, a few years ago, one of our county boards here actually was trying to sell our county medical care facility, which in our area is the only nursing home within probably 30 miles that has that level of long-term care that's available. And because it's a county facility, they have to take anybody regardless of ability to pay. So, he wanted to sell that to the hospital that had just bought up our local hospital. So that was just kind of sprung on us. I didn't think it was OK, and so I made sure that I mobilized some members of the community because I knew how they feel about our medical care and how important it is. My own grandmother was there and needed that service. Nobody wants long term care, but we're all grateful that it's there when we need it. Also, county medical care facilities tend to have better staffing and they tend to have a higher quality of care than private facilities, so that's a big issue, too. Anyway, organized a lot of folks and they came to the meeting and they basically said that they didn't want that. And so now we're actually working towards an update to the facility and they'll have a millage on the ballot for remodel for that facility for the fall, so that was a big one. Other things like things that protect watersheds with public health, we kind of have a partnership with the district health department as well. So, there's some things like that. And then also there are some projects that I work on like trails and things like that. So there's a lot of different rules that we have and people kind of pick and choose their areas where they feel like they can make an impact.

JL: So it seems like you're extremely involved and aware about your community needs and where you're heading, even though you don't consider yourself to be defined as an activist, I think that's really interesting and is there anything else that you would like to note about your experience in being a healthcare worker, being so involved in your community, during the pandemic, your experience during the Auntie Sewing or of being a part of the Auntie Sewing Squad, or even just your life in Michigan in general?

26:05

MB: Hmm, so I think, for me as a healthcare worker, to participate in the Auntie Sewing Squad has been really valuable because it was a way I didn't really participate with the group early on when they were sewing for a lot of health care workers who didn't have access to adequate PPE. But I fully support the mission of the work that we really shouldn't have that job. But I'm also a very practical person, that if there's a need that needs to be met, that we need to figure out a way to meet that. And so I am so grateful to them for stepping up and trying to meet the needs as best they can of communities who truly don't have access and didn't have access to personal protection. The farmworkers, we've had a few groups of farmworkers in Michigan who we've sewed for, and all of us really find it especially meaningful if there is a group locally or if there's a group that we've had contact with somehow that we feel pretty lucky to be able to serve them and to give back.

KC: That is very, very selfless of you, Meg, and I just want to know, is there something that has motivated you in your career and the things that you do with your community? Has there been something that motivated you to be just this helping person, or is that just who you are?

27:28

MB: I think it's just who I am. I think that there's a lot of things in this world that need some healing and that need a lot of work, and I know that we all kind of have to pick our battles and where we want to spend our focus and our energy because we can't do everything. So I try to

think about where it is that I can actually have that impact and use those skills and then use the strengths that other people have so that we can support them to make those changes in areas that they see that are important to them. I work with people with a pretty broad variety of backgrounds. I work with everybody from really conservative Christians and anti-maskers all the way through, and I work with some gun nuts, and I work with really wonderful activists and immigrants in our community. I try to find a way to connect with each of them because that's how that healing happens and that's how we build community and that's how we build respect for one another. And I think that if you have a connection with someone, it's really hard to hate them.

28:50

KC: So that is great. That is really awesome. And so we're kind of coming up to the end of our interview. Is there anything else that you would like to add, anything you would like anyone to know, just in general?

MB: Well, I just want to thank you and thank your class for the wonderful work that you're doing. I'm sure that you're hearing some amazing stories from a pretty broad variety of people. So I think that it's important to document the work that people are doing on the ground and just the everyday folks who are really our heroes, not just now, but through the work that people do in whatever way that they're doing.

KC: Thank you so much.

MB: Well thank you.

KC: Haha, it's been a pleasure. And just want to say thank you for, even though you said you only did five hundred, that's still a lot, and so I'm sure everyone appreciates it. And, just know that in California, you got two people who are rooting for you.

MB: Aw, thank you.

KC: And are very appreciative of everything you've done.

MB: Well, I'm definitely rooting for you, too. And I hope your program goes well. I know this is a really tough time to be a college student.

JL: We're getting through it like everybody else.

KC: Yeah, getting through it.

MB: But I hope that you're still able to build those connections with friends and networks and stuff like that, because I find that from my own college experiences that those friendships and those connections, even if you lose touch down the road, those connections still stay. And I hope that you're able to continue to build those two for yourselves.

KC: Thank you so much.

JL: Thank you.

MB: Well, thank you, and good luck with your project.

KC: Thank you so much and this concludes our interview.

30:48