

The mountain man and the surgeon

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KINSHASA, DEMOCRATIC REPUBLIC OF CONGO

## Reflections on relative poverty in North America and Africa

ENOS BANKS tells a cracking yarn about ketchup. One day, he spilled a splurge of it on his shirt. For fun, he persuaded his brother in law to shout angrily and shoot through the window. When their two wives came rushing in, they saw Mr Banks lying there covered in what looked like blood. "My wife passed out," chuckles Mr Banks, "and my brother-in-law's wife shook him till his [false] teeth rattled."

\*\*Mr Banks lives in a trailer in eastern Kentucky, amid the majestically forested Appalachian mountains. He is in his early 60s and has no job—he used to work as a driver for a coal-mining firm, but left after a heart attack 25 years ago. He wears a cowboy hat and talks with an accent that outsiders find nearly impenetrable. He is clever with his hands. When the price of petrol soared this year, he grafted a chainsaw engine onto a bicycle to make a moped.

He is a loud, jovial man, but suspicious of the young folk who live nearby. There is a drug problem in the mountains, and Mr Banks was recently burgled for the painkillers he takes for a bad back, hip and ankle. But he is ready for any mugger. He walks with a walking-stick-cum-rifle, with a plastic cap on the end of the barrel to keep out the dirt. If someone attacks him, he is ready to "shoot them plumb between the eyes." And if he runs out of bullets, he has a big knife strapped to the contraption with duct tape.

When Americans hear the words "poor" and "white", they think of someone like Mr Banks. He has half a dozen cars in varying states of disrepair parked outside his trailer, car-parts everywhere and a pile of crushed Pepsi cans below his porch. \*\*

He "draws" \$521 a month in supplemental security income (a form of cash assistance for the elderly, poor and disabled). He laments that the authorities deduct \$67 a month because he won \$3,600 on the slot machines. Why, he asks, won't they take account of all the money he has lost gambling? It is a fair question. If middleclass America had this problem, accountants would surely find a way round it. Mr Banks also complains that he cannot draw food stamps. In order to qualify, he would have to sell his truck, which he cannot bear to part with. \*\*Mr Banks would probably be surprised to hear that, thousands of miles away in central Africa, there lives a prominent surgeon whose monthly income is roughly the same as his. Mbwebwe Kabamba is the head of the emergency department at the main public hospital in Kinshasa, the capital of the Democratic Republic of Congo. After 28 years as a doctor, his salary is only \$250 a month, but by operating on private patients after hours, he ekes it out to \$600 or \$700.

Given the lower cost of living in Congo, one might guess that Dr Kabamba is better off than Mr Banks. But the doctor has to support an extended family of 12, whereas Mr Banks's ex-wife and three sons claim public assistance. Indeed, the reason Mr Banks split up from his wife, he says, is because they can draw more benefits separately. She still lives in the trailer next door.

Why juxtapose the lives of a poor man in a rich country and a relatively well-off man in a poor one? The exercise is useful for two reasons. First, it puts the rich world's wealth into context. A Congolese doctor, a man most other Congolese would consider wealthy, is worse off materially than most poor people in America. That, in itself, is striking.

The second purpose of the exercise is to shed light on some ticklish questions. What is the relationship between wealth and happiness? And what is the significance of relative poverty? Mr Banks makes \$521 a month in a country where median male earnings are \$3,400 a month. Dr Kabamba earns \$600 a month in a country where most people grow their own food and hardly ever see a bank note. The two men's experiences could hardly be less similar. But which of the two would one expect to be happier? \*\*

Before trying to grapple with these questions, take a look at the places where the two men live. Eastern Kentucky was where President Lyndon Johnson stood by a shack in 1964 to launch a "national war on poverty". Since then, Appalachia has had tons of government cash and seen real improvements in living standards, but it retains large and stubborn pockets of distress. Mr Banks lives in one. His trailer stands in a hollow near a disused coal

mine in Perry county, where the official poverty rate is 24.5%.



The region is poor partly because it is remote. Steep slopes and heavy rain can make it hard to get around. Julie Zimmerman, a professor of sociology at the University of Kentucky, notes that Appalachian folk sometimes make appointments with the proviso that "I'll be there, God willing and the creek don't rise."

Another problem is that region's mineral wealth has corrupted local politics. For decades, argues Mil Duncan, another of the many sociologists to have pondered Appalachian coal bosses poverty, exerted an unhealthy

influence, and politicians won support through patronage. The 13 coal-producing counties of eastern Kentucky have consistently worse poverty than the others, notes Justin Maxson, director of the Mountain Association for Community Economic Development, a local microfinance group. "Corruption by public officials has been a significant contributor to poverty in the region," he adds.

\*\* Congo is also remote, and its politics have also been corrupted by mineral wealth. But corruption in Kentucky consists of mining firms leaning on local officials to go easy on environmental regulations, or school boards appointing their members' relatives to sinecures. In Congo, it means half a dozen armies and dozens of militia groups fighting over the country's gold and diamond mines between 1998 and 2003, leaving perhaps 3m dead.

Sporadic fighting continues in the east of the country, but this does not directly affect Dr Kabamba, who lives in the west. Still, the soldiers in Kinshasa, where he works, are a menace, because they rob civilians to supplement their wages. Dr Kabamba is shaken down about twice a month by men in uniform.

Dr Kabamba's hospital is healthier than it was during the war, or under Mobutu Sese Seko, the leopardskin-hatted

crook who ruled Congo until his overthrow in 1997. There are no medicines unless patients can pay for them, and many of the sick lie huddled on the ground. But it used to be worse. In the early 1990s, patients who could not pay were sometimes held hostage for weeks until their families found cash to free them.

Dr Kabamba's income fluctuates with his country's fortunes. His \$250-a-month salary is a fivefold increase from last year, and the fact that it is paid only two months in arrears is an improvement too. The cause of his good fortune is that Congo was given a huge debt write-off when the civil war ended in 2003, so there is more money around. What do Dr Kabamba's wages buy? He has a four-bedroom house with a kitchen and living room, which would be ample if there weren't 12 people under his roof. His home would be deemed unacceptably overcrowded in America. Even among the 37m Americans officially classed as poor, only 6% live in homes with more occupants than rooms.

Having seen how doctors live elsewhere, Dr Kabamba would quite like running water and a regular power supply. His family fetches water in jars and the electricity comes on maybe twice a week. Airconditioning would be nice, but "that's only for VIPs," says Dr Kabamba. In America, three-quarters of poor households have air-conditioning.

Dr Kabamba earns enough to feed his children, but not as well as he would like. The family eats meat about twice a month; Dr Kabamba calls it "a great luxury". In America, poor children eat more meat than the well-to-do. In fact, they get twice as much protein as their government says is good for them, which is why the Wal-Mart near Mr Banks sells such enormous jeans.

"Poverty" describes two quite different phenomena: utter penury, of the sort experienced by the billion or so souls who subsist on \$1 a day or less; and the situation of people in rich countries who are less well off than their compatriots. \*\*

For the first group, finding enough to eat is a daily struggle, and a \$2-a-day job hand-washing mineral ore in a river is a lucky break. Shortly before meeting Dr Kabamba, your correspondent interviewed a group of Congolese ore-washers who were delighted to have found such lucrative work.

European countries tend to use relative measures of poverty. A household with an income less than 50% or 60% of the national median counts as poor. This has the perverse result that if the country gets richer, the poverty rate can still rise, as long as incomes at the top and in the middle rise faster than those at the bottom.

America, more sensibly, uses an absolute standard. The "poverty threshold", created in the mid-1960s, was based on an estimate of how much an adequate diet might cost, multiplied by three. This figure is adjusted for inflation each year, but is otherwise unchanged. So the fact that, according to the Census Bureau, the share of Americans in poverty rose between 1974 and 2004, from 11.2% to 12.7%, ought to be a cause for shame.

But it is not, because American poverty statistics are misleading. For one thing, the poor rarely stay that way. In 1996-99, only 2% of Americans were poor every month over the full four-year period. And life appears, by most measures, to have improved. Poor people today live longer, spend longer in education and are more likely to have jobs. Fewer live in substandard houses, more have cars, fridges, boomboxes and other necessities that were luxuries a couple of generations ago.

How, then, to account for the apparent rise in poverty? It is partly a matter of definition. Some non-cash benefits, such as food stamps, housing assistance and Medicaid, are excluded from the calculation. And the raw data must be wrong. Nicholas Eberstadt of the American Enterprise Institute, a conservative think-tank, notes that while reported annual income for the poorest fifth of households in 2003 was \$8,201, their reported expenditure was \$18,492. Nobody can explain this vast discrepancy.

\*\* All one can say is that whereas the poor in Kinshasa complain about the price of bread, the poor in Kentucky complain about the price of motor insurance. Fair enough—they need to drive to work.

Granted, the poor in America do not starve. But their relative poverty can hurt in other ways. To be poor in a meritocracy implies failure. Eastern Kentucky is one of America's least meritocratic enclaves, but failure still carries a stigma. Though few Americans say that the poor have only themselves to blame, many believe it. Many of the poor believe it, too.

For a Congolese peasant, there is no shame in living in a hut made of sticks. Everyone you know does too. In America, by contrast, the term "trailer" denotes more than a mobile home, and the people who live in one know it. They are also acutely aware of how richer folk live, because they watch so much television. A typical poor household in America has two televisions, cable or satellite reception and a VCR or a DVD player. \*\*

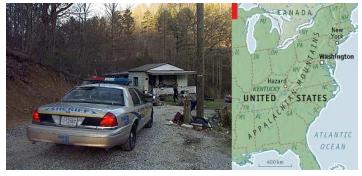
Dr Kabamba, though hard up, enjoys the respect that doctors receive in all societies. Perhaps more, for people can see that he does an essential job under the toughest of conditions. That his hospital still functions despite years of war, corruption, economic decline and the occasional "grand pillage" by unpaid soldiers is, he sighs, "almost a miracle". His compatriots might add that it is almost a miracle that Dr Kabamba, whose skills would allow him to emigrate, has chosen not to.

\*\* Those who know Dr Kabamba treat him with deference. When your correspondent was detained by the police outside his hospital, for the crime of appearing to possess a wallet, one telephone call to the doctor was enough to fix the problem. The officers even apologised.

Mr Banks, by contrast, though outwardly cheery, has no illusions about how other Americans see people like himself. Of the officials who hand him his monthly cheque, he says: "Some are okay, but some act like the money's coming out of their own pockets." His greatniece, Rosie Woolum, tells a story about growing up in the hollows. She was the girl on the school cheerleading team who could not afford shoes. A teacher who lived nearby could have offered her a lift home after practice, she says, but never did. So she had to wait a couple of hours for her mother. At the time, she did not understand why her better-off neighbours shunned her. Now that she has a good job (running a project that provides health care for the homeless), she finds they no longer do.

It is hard to gauge the pain of relative poverty because no one knows how to measure happiness. Simply asking people "Are you happy?" only gets you so far. The answers people give depend in part on cultural factors. Few English or Japanese will offer anything more ecstatic than a "mustn't grumble", but that does not necessarily mean they are glummer than say, Americans, 86% of whom told Gallup this year that they were "completely" or "somewhat satisfied" with their jobs.

Indirect evidence of unhappiness is equally hard to gather, since so many potential proxies, such as drug abuse and wife-beating, are hushed up. Nonetheless, for what it is worth, when your correspondent asked Ms Woolum and three of her local social-worker colleagues to share their life stories, those stories shared a common thread.



All four women had been beaten by husbands or boyfriends, most of whom had problems with drink or drugs. One recalls being knelt on so that her arms were pinned to the floor and punched repeatedly in the face. Another says she was stabbed. Without excusing the abuse, the women assume that it had something to do with their menfolk's sense of frustration at the poor hand life had dealt them. As the last of the quartet puts it: "He wasn't happy. We got hit."

Happily, all four have escaped their abusers. Ms Woolum reckons that the welfare reforms of the 1990s have, indirectly, made local women more assertive. "Welfare is more demanding. [To receive it], women have to get out and work, so we're getting out into a different environment." This, she argues, fosters self-reliance and self-respect, so "Women don't take it as much now."

## The personal is political

Both Dr Kabamba and Mr Banks feel bitter about the state of politics in their respective countries. Dr Kabamba resents the fact that Congo is run by a mob of unelected thieves and warlords, who for the most part only pretend to care about good governance so they can continue milking western donors. The country was promised an election by June this year, but the ruling class somehow never got around to organising it. They now promise to have one next year—they held a constitutional referendum this month—but Dr Kabamba is not holding his breath. He takes such a dim view of the probity of Congolese politicians that he once turned down a job in the cabinet. In his spare time, he is the leader of one of Congo's many opposition parties, but no one is tipping him to be the next president. He is neither rich nor ruthless enough.

Mr Banks, for his part, expresses an intense dislike of President George Bush. "If someone shoots that sonofabitch, I'll celebrate," he says. Some of his complaints echo those of the coastal intelligentsia—he thinks the president should create more manufacturing jobs, for example. But some of his gripes are of the sort rarely aired in the *New York Times*.

For example, he berates Mr Bush for allowing too many foreign doctors into the country. In eastern Kentucky, as in Congo, those with marketable skills often leave as soon as they graduate. Unlike Congo, however, Kentucky can attract doctors from poorer parts of the world, such as South Asia. Mr Banks does not think much of these immigrant medics. He fears they may give him the wrong medicine, perhaps deliberately, and threatens to "shoot them plumb between the eyes" if they try. He is not serious about this threat, one assumes.

but his sense of grievance is no less real for being incoherent.

The point of this article is neither to mock Mr Banks nor to praise Dr Kabamba. Both have their virtues and flaws, and your correspondent cannot reliably judge which is the happier. But here are two concluding observations. First, if poor Americans were to compare their standard of living with what is normal elsewhere in the world, let alone in Congo, they would see they have little cause for discontent. Then again, were Americans not so incurably discontented with their lot, their great country would not be half as dynamic as it is.