

## Seeing Poverty After Katrina

### TRANSCRIPT

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**KRISTA TIPPETT, HOST:** I'm Krista Tippett. One year ago this month, Hurricane Katrina brought horrific pictures of urban poverty into all of our living rooms. With helpful clarity, my guest today, David Hilfiker, tells the story of how concentrated poverty and racial isolation came to be in cities like New Orleans. Two decades ago he left a Midwestern medical practice to work and live with his family and with the homeless in Washington, D.C. He lives creatively and constructively with questions many of us began to ask in the wake of Hurricane Katrina.

**DR. DAVID HILFIKER:** We live so easily in a society in which other people don't have a chance, and there's something wrong with that. Martin Luther King said, you know, "None of us is well until all of us are well." When we live in a society with such deep injustice as ours, you suffer spiritually.

**MS. TIPPETT:** This is *Speaking of Faith*. Stay with us.

[Announcements]

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Program:

**MS. TIPPETT:** I'm Krista Tippett. In the wake of Hurricane Katrina one year ago, then-director of FEMA Michael Brown said, 'We're seeing people we didn't know existed.' The world was shocked by images of residents of a great American city left to fend for themselves in subhuman conditions after a natural disaster. I interviewed my guest this hour, Dr. David Hilfiker, in the days following Hurricane Katrina. He's worked as a doctor to the homeless and studied the sources of urban poverty for two decades. His insights remain unusually helpful now as we all continue to process Hurricane Katrina's spiritual and societal lessons.

From American Public Media, this is *Speaking of Faith*, public radio's conversation about religion, meaning, ethics, and ideas. Today, "Seeing Poverty After Katrina."

When the levees broke in New Orleans last summer, the low-lying, poorest areas of that city were the first to flood and the worst devastated. One year later, recovery is proceeding slowly, especially in those same poor neighborhoods. Sixty percent of the houses and businesses in New Orleans still don't have electricity. Thousands of poor New Orleanians who've come back are jobless and living in government-constructed trailers. But urban poverty is not exclusive to New Orleans pre- or post-Katrina. On average, a quarter of the residents of U.S. metropolitan areas live below the poverty line, and that rate is higher for African-Americans and Hispanics.

As we saw pictures of human squalor and despair from the New Orleans Convention Center last summer, many of us wondered with a new urgency how structural urban inequity came to be, what does it have to do with the rest of us, and what can we do about it.

My guest today, Dr. David Hilfiker, began asking such questions two decades ago after he moved his medical practice and his family from the rural Midwest to Washington, D.C., another great American city marked by concentrated poverty and racial segregation.

**DR. HILFIKER:** I realized when I asked myself the question of where this had all come from that I didn't know. I had worked there for 10 years and still didn't know how the ghetto had formed. So I did some reading, and what's fascinating is that it doesn't take any research at all to find the story. It's right there in history books. There's almost — as far as I could tell, there's no debate about what happened, it's just all out there.

**MS. TIPPETT:** In the wake of Hurricane Katrina, the former director of FEMA was quoted as saying, "We're seeing people we didn't know existed." But how can it be, commentators asked, in the richest country in the world that so many residents at the core of New Orleans were invisible even to authorities and left to fend for themselves in sub-human conditions. And how did the rest of us become isolated from their despair in the first place? My guest today, Dr. David Hilfiker, began asking such questions two decades ago after he moved his medical practice and his family from the rural Midwest to Washington, DC, another great American city marked by concentrated poverty and racial segregation.

**DR. HILFIKER:** I realized when I asked myself the question of "Where this had all come from?" that I didn't know. I worked there for 10 years and still didn't know how the ghetto had formed. So I did some reading, and what's fascinating is that it doesn't take any research at

all to find the story. It's right there in history books. There's almost, as far as I could tell, there's no debate about what happened, it's just all out there.

**MS. TIPPETT:** In his 2002 book, *Urban Injustice: How Ghettos Happen*, David Hilfiker traces the history of urban poverty in America and how it is carried forward across generations. The story he tells is straightforward but rich with irony. For a half-century after the Great Depression, federal programs raised many Americans out of poverty, but those same programs often unintentionally disadvantaged poor African-Americans.

For example, beginning in the 1930s, the Social Security Act signed by Franklin Delano Roosevelt excluded domestic and agricultural workers, fields in which two-thirds of black Americans were employed at that time. His Federal Housing Administration brought many post-Depression Americans into the middle-class by helping them get mortgages, but this program redlined most black neighborhoods as too risky. From the 1950s through the 1970s, federal urban renewal initiatives created subsidized housing, but they concentrated the poorest people more exclusively together. And when the federal interstate highway program of that same era connected up most of America, poor African-American neighborhoods with little political clout were often razed or divided. Dr. David Hilfiker.

**DR. HILFIKER:** And so what had been, to some degree, fairly well-integrated neighborhoods before 1910, by 1930 had changed almost completely so that the boundaries of the ghetto by 1930 were drawn, and inside the ghetto it was almost all black and it was very difficult to move out. What was different about those ghettos that had formed by 1930 was that they were vertically integrated, that all African-Americans had to live there, so you had affluent African Americans, poor African Americans, middle class, working class, living in relative proximity. It had stores and churches and, you know, Masonic lodges, and other kinds of informal and formal social organization so that these neighborhoods were perfectly good. They were poor, there was segregation, there was, you know, prejudice, all that, but within the neighborhoods, these neighborhoods really worked, and that remained true up until about 1950 or so.

**MS. TIPPETT:** You also talk about there was a loss of jobs that paid a living wage, and that integration itself, in fact, worked against the poorest African Americans.

**DR. HILFIKER:** Right. The possibility of integration, which was obviously a good thing, made it possible for more affluent people to move out, which meant that you left neighborhoods of only poor people. At almost the same time, you had the industry moving out of the cities for a bunch of reasons, some of which were good and some of which weren't. What had been true prior to 1950 was that a person moving up, say, from the South with no formal education could get a job at a factory — because of the unions, the wages were reasonable — and within 10 years could move up into a middle-class income. So it was a way out of — these industrial jobs were a way out of poverty. Well, for many, many reasons, those jobs moved out of the city, and first they moved out into the suburbs, then they moved into the South and the Southwest, and finally, of course, they're moving abroad.

**MS. TIPPETT:** They're moving abroad. Mm-hmm.

**DR. HILFIKER:** So what happened within a very short period of time, 15 years, from 1950 to 1965, is that these neighborhoods were decimated, and you now had neighborhoods that we kind of recognize where there — only poor people live, where there's no businesses, where there's very little formal or informal social organization.

**MS. TIPPETT:** And any of us who've lived in any American city, I mean, we can think of those neighborhoods.

**DR. HILFIKER:** Yeah, we know that.

**MS. TIPPETT:** Washington, D.C., Detroit, even Minneapolis, and New Orleans, of course.

**DR. HILFIKER:** Yeah. And our tendency as affluent white people is to suspect that, you know, that the ghetto was somehow originally the fault of some inherent flaw in African Americans. We don't articulate that to ourselves, but that's sort of an inner belief. But it simply isn't true. The ghetto was the result of structural forces beyond the control of the people who live there.

**MS. TIPPETT:** And what I think is helpful about the story you tell is that, at the same time — I mean clearly, yes, as you say, structural things happened, policies happened. None of them were designed to make people poor. In fact, some of them were very successful anti-poverty programs seen on a grand scale. So, I mean, there's social culpability here, in a way.

**DR. HILFIKER:** Right.

**MS. TIPPETT:** There wasn't sort of an evil intention.

**DR. HILFIKER:** In most cases, that's absolutely true. I mean, you can point to programs, you know, where that's not true. But from my point of view, by and large, that's true. What's very interesting, the head of FEMA was quoted as saying, 'We're seeing people we didn't know existed.' Well, that's exactly right.

**MS. TIPPETT:** These people who suddenly — these poor black faces we saw who had been left behind in the hurricane, yeah.

**DR. HILFIKER:** Right. The same thing can be said of many of these other programs. We really didn't know what these neighborhoods were, what they were like, didn't think through the impact of the programs, because the fate of those people wasn't so important to us. So while there wasn't anything done intentionally to create poverty, our ignorance of the situation, the fact that we didn't know each other, meant that it was very easy to create programs that had side effects that we didn't know about.

**MS. TIPPETT:** When you say that we didn't know each other, what you mean is we affluent or middle-class people didn't know our poorer fellow citizens who in the inner cities often tend to be — not exclusively, but often tend to be African American.

**DR. HILFIKER:** Right. You know, coming from a small town, there were poor people in our town, but you knew who they were. They went to school with your kids. As a doctor or as a lawyer or as a shopkeeper, you saw them, and so their issues were much more obvious to the people in this town.

I remember one woman from our town who was pretty severely schizophrenic who lived alone. Well, every time she got out of control, a little committee formed that would just kind of shelter her through those attacks. And that happens when you know each other. You know, there are other stories from this small town in which people took care — it doesn't always happen, of course, but at least you knew who they were and you could respond personally.

When you have the deep residential segregation that we now experience, it means that very few affluent white Americans know poor people, don't have them in their homes, don't have dinner with them, don't talk with them, don't know anything except what they see in the media about who these folks are. And that ultimately leads to ignorance and decisions that hurt poor people.

**MS. TIPPETT:** Physician and author David Hilfiker.

Two decades ago Dr. Hilfiker gave up his medical practice in the Midwest and moved to Washington, D.C. He was driven more by spiritual questions than religious answers, but he was drawn to the idea that God is somehow revealed in the poor. He and his family joined an unusual faith community, the Church of the Savior, that stresses both contemplation and action.

Over the past 50 years, the Church of the Savior has innovated a web of sustainable local responses to poverty, mostly in the poorest area of Washington's Adams Morgan neighborhood. Dr. Hilfiker and his wife Marja helped to found a medical shelter for chronically ill homeless men who were turned away by hospitals. They lived with three other doctors and their families above the shelter called Christ House, in community with their patients. Later, he and his family founded Joseph's House, a supportive residence for homeless men with AIDS. Dr. Hilfiker came to understand, he says, that his spiritual well-being is wrapped up with the poor.

**DR. HILFIKER:** The original concept intellectually came from Dorothee Soelle, a theologian. And the concept is that when an affluent person benefits from structures in society and when those same structures oppress other people, then the affluent person experiences a degree of alienation from himself, from God, that he may or may not be aware of, but is there. And I think what Marja and I were experiencing was that sense, something is wrong here. We live so well, so easily, and — again, at the beginning we couldn't articulate it to ourselves, but we live so easily in a society in which other people don't have a chance, and there's something wrong with that. Martin Luther King said, you know, 'None of us is well until all of us are well!' And I think that captures it.

When we live in a society with such deep injustice as ours, you suffer spiritually. Now, again, I believe many people aren't aware of the suffering that they experience because of this structural injustice, but I believe it's spiritual reality. Certainly when you examine the Christian spiritual tradition, you find just every place this notion that God's kingdom cannot tolerate injustice.

**MS. TIPPETT:** And I think that's there throughout the traditions, I really do.

**DR. HILFIKER:** Yes, absolutely. And those traditions are an expression of an underlying human reality that we want to live in a just society. We do not want to be the causes of injustice or even benefit from injustice. And again, those human feelings may be buried deep in many of us, but I think we suffer when we're not at least aware of that dynamic. So the way that you overcome that, or at least one of the ways you overcome that, is to put yourself in solidarity with those who suffer from the same systems that benefit you. I can't give up my privileged position. I'm educated, I'm white; those are things I can't, you know, give away. But I can do what I can to put myself into solidarity with folks, to get to know them, and that makes a difference.

**MS. TIPPETT:** You know, and I think the pictures from Hurricane Katrina awakened, you know, that deep impulse that you described, that maybe people didn't even know they had.

**DR. HILFIKER:** Yes.

MS. TIPPETT: I think it would be very helpful to know what you had to face in yourself, what challenges you had in yourself as you took that step of finding a way to, as you say, create solidarity, to be in relationship with the poor.

DR. HILFIKER: Well, you know, the biggest obstacle was really that very personal one. The hopelessness that you can feel when you come into a situation was — a situation of just immense poverty — was a constant kind of threat to me. So what I first needed to deal with was, OK, so how am I going to...

MS. TIPPETT: To live with this, just...

DR. HILFIKER: ...live with this deep reality of the pain, and yet take care of myself emotionally. So that was the first block, I think. The question that I always get when I talk about this is, 'So, what about your kids?'

MS. TIPPETT: Yeah. I was...

DR. HILFIKER: 'What about your wife?'

MS. TIPPETT: I know, I was about to ask that question. Because you moved there with your wife and your three children, who at that time in 1983 were 12, nine, and four.

DR. HILFIKER: But that — first of all, Majja, my wife, was ahead of me and has remained ahead of me in all of this. So I was not dragging her anywhere, and sometimes it was she dragging me. So that was one thing. The second thing is that we were aware of our privilege and we were aware that we could privilege our children. Nevertheless, we used some of that privilege to protect our children.

MS. TIPPETT: You kept them safe and comfortable.

DR. HILFIKER: Yes.

MS. TIPPETT: You put them in schools where you felt good about them being in.

DR. HILFIKER: Right. And when we built Christ House, for instance, we made a separate residential entrance so that the kids, as they got older, if they didn't want to see homeless men when they came home, they could go up a separate way. It was only when we moved in 1990 into Joseph's House, which is our home for homeless men with AIDS, where we also lived for three years, it was only then that we really moved into a place where the children could not avoid our work, because we had our own bedrooms, where otherwise at Joseph's House we had our own, you know, the common kitchen, dining room, living room, that kind of thing. But at that age, the children were old enough to participate in the decision, and actually it was my daughter who pushed us over the edge in deciding to go for Joseph's House.

MS. TIPPETT: How old was she then?

DR. HILFIKER: She was 15. And she had been living at Christ House for five years and was aware of those separations in Christ House that are necessary there.

MS. TIPPETT: Between her and the homeless men who were being treated there.

DR. HILFIKER: Yes. Yes. And she, you know, went downstairs, she'd help make meals, do that kind of thing, but she wanted to live in closer relationship. So for us, the issue of exposing our children to this was not a liability but actually something that we valued then and continue to value deeply. Now our children are grown, and they value that experience as well.

MS. TIPPETT: But, I mean, you do describe in your books, especially your book *Not All of Us Are Saints*, which is a lot about your experiences in those years as a doctor living in that neighborhood, living together with homeless men. I mean, you describe — I mean, your children were living blocks from where people were shot or, you know, once one of your children discovered someone just after they'd been killed.

DR. HILFIKER: Right.

MS. TIPPETT: And even though they were going to schools in other neighborhoods, they were confronted with the dark side.

DR. HILFIKER: Yes. And I think that's really important. Obviously, children have to be protected to some degree, but we can overprotect

children. And when children grow up not knowing that there is a dark side, not knowing that other people don't have the same privileges that they have, then that is damaging spiritually. You know, the inner city may be dangerous, but affluent segregated neighborhoods are very dangerous spiritually, in my mind. And so, sure, there was some risk. There's a risk to almost anything you do. We estimated that the risk to our children of living where we did was low enough and the value to them was so high that it easily balanced itself out. And, you know, I think our kids would back that up.

**MS. TIPPETT:** Dr. David Hilfiker. I'm Krista Tippett, and this is *Speaking of Faith* from American Public Media. Today, "Seeing Poverty After Katrina."

**MS. TIPPETT:** You talked about the pain in yourself, how overwhelming it could be to experience people whose lives — where there was so much wrong and where they were in so much pain.

**DR. HILFIKER:** Yeah.

**MS. TIPPETT:** I think when my children and I walk past someone on the street who's homeless who asks us for money, that's very painful for them. And I often weigh that decision about whether I think they're going to use that money responsibly or not. You know, it's often a quick decision.

**DR. HILFIKER:** Right.

**MS. TIPPETT:** When I don't give someone money, maybe because I smell alcohol on their breath, my children will often tug on my sleeve and say, 'How can you be so mean?' I mean, they experience that as really painful and difficult to live with. I think that when the pictures from Hurricane Katrina, when there were not just adults but families and children in that convention center, I think a lot of us didn't let our children watch that because it was too awful and confusing. How did your children — was that a problem that you had with them, and how did you work with them on that?

**DR. HILFIKER:** Sure, it was an issue. It was a problem. I remember very clearly one episode with my daughter when I came in one night and she was crying in her bed. And I just asked what was wrong, and she said, 'Well, it's that homeless man that we passed on the street today. He doesn't have any place to sleep tonight.' So I sat down with her and we tried to talk about that, let her kind of sort through her pain at that and recognize that, yeah, that was — that is — painful, that is out there. And so then we said, 'So how can we respond to that?' And the decision was, 'Well, let's go down to a homeless shelter and get to know some of the people there.'

So a couple weeks later, I used my contacts and we went into a women's shelter and spent the evening, where Karin got to talk with some of the women who were there and got to know them in a different way. That didn't stop the pain, but it did interpret it for her. It gave her a handle on it so that as she grows up she is aware of the pain and doesn't need to hide from it. You know, if you're protected all your life from it as a child, the tendency as an adult is to hide from it and not to see — you know, hopefully — if there's a good thing that can come out of Katrina, hopefully these images will make it more difficult for us as Americans to hide from that reality, I think.

**MS. TIPPETT:** You know, the story you told about your daughter, then responding to her confusion and her despair that she couldn't help a homeless person you'd encountered and then taking her to a shelter so she spent an evening and got to know some people, I mean, it almost brings me back to that image earlier when you talked about the difference between poverty in a rural community will be that people live in conditions that are inferior, but people know their name and they know their story.

**DR. HILFIKER:** Yes, yes.

**MS. TIPPETT:** So you're saying that one response to the pain of that specter of poverty was to take your children deeper inside, to get to know people. I mean, what is it that happens that is helpful? It's counter-intuitive, in a way, right...

**DR. HILFIKER:** It is counter-intuitive.

**MS. TIPPETT:** ...because now she knows more, she knows more. But what is it that, in fact, is helpful in that?

**DR. HILFIKER:** You know, I'm not enough of a psychologist to know exactly, but I think what's helpful for me is that a large part of that emotional response initially is fear, and a large part of that fear is fear of the unknown. So that it's possible...

**MS. TIPPETT:** It's just incomprehensible, unfathomable.

**DR. HILFIKER:** Yeah. 'Who is this person?' You know, just at a very basic level, 'Are they going to hurt me?' 'Because this person is dirty and smelly and lives on the street, does that mean that he's probably going to hurt me if I get next to him?' Once you get to know people, the dirt and the smell and the living on the street are still there, but you know that, you know, the vast likelihood is that he's not going to hurt you. I mean, I think it's true of any emotional pain that we hold, that the deeper you go into it, the more deeply you know it, you may

not be able to get rid of it, but at least you are no longer afraid of it.

MS. TIPPETT: And you can live with it somehow.

DR. HILFIKER: And you can live with it. And so if we allow ourselves to go more deeply into the pain of the poor, that fear goes away. And we also integrate that in some way in ourselves and find ways of working against it, which may be, you know, becoming a social worker, it may be becoming active politically, it may be having friends who are poor, different — we may choose different things, but we find some way of integrating that pain into ourselves.

MS. TIPPETT: You're very careful in all your writing to not glorify the poor or to glorify the religious virtue or the Christian virtue of working with the poor. Here's a passage from one of your books. You wrote, "My daily experience of a dreadfully fallen world makes it important to demystify this 'love of neighbor' business. Love for neighbor has little to do with my feelings. It has little to do with whether I like my neighbor or trust my neighbor. Rather it has to do with a simple question: Do I want the best for my neighbor? 'Forgiveness' is continuing to want the best for my neighbor even after he or she has spit in my face."

Is there a certain story or a person that comes to mind when I read that passage of your own writing back to you?

DR. HILFIKER: I don't think I had anybody spit in my face. But yeah, there's a story that I wrote about in the book actually, of a young guy — he was actually a white man. We have very few white homeless men in Washington, but he was a young white man who was severely addicted to methamphetamine, we think.

And he was exceedingly manipulative and got to know my son, actually, and took my son to the — was wonderful with my son. I mean we trusted him completely with my son. Took him down to the pet shop and go out for walks and that kind of thing. But when it came to working with social workers or me as his physician, he was exceedingly manipulative. And over time, he just sort of betrayed us in so many ways. At least we felt betrayed.

And so in the end what I came to is that I didn't need to like him. I don't like him, I didn't like him, but I wanted the best for him. And it seems so obvious to me now — I'm having a difficult time explaining it. Why would we not want the best for anyone, even if they have hurt us in some way? Not that I was deeply hurt by poor people. But it just seems sort of obvious to me that what we should want is the best for everyone else.

MS. TIPPETT: Dr. David Hilfiker. This is *Speaking of Faith*. After a short break, his reflection on the limits of charity, and why, in the long term, poverty can make our entire society unsustainable.

At [speakingoffaith.org](http://speakingoffaith.org), learn more about the causes and cures of poverty in U.S. cities. [Read David Hilfiker's booklet, "Poverty in Urban America."](#) Also, each week I provide a behind-the-scenes look at the topic explored. You can sign up for our e-mail newsletter at [speakingoffaith.org](http://speakingoffaith.org). I'm Krista Tippett. Stay with us. *Speaking of Faith* comes to you from American Public Media.

[Announcements]

MS. TIPPETT: Welcome back to *Speaking of Faith*, public radio's conversation about religion, meaning, ethics, and ideas. I'm Krista Tippett. Today, "Seeing Poverty After Katrina."

My guest, Dr. David Hilfiker, took his family to live and work with the homeless in our nation's capital two decades ago. His experience there sheds spiritual and practical light on our national response to the worst images from New Orleans after Hurricane Katrina. David Hilfiker says that the religious virtue of love of neighbor is about wanting the best for one's neighbor whether you know him or like him. We're talking about how it happened historically and sociologically that the poorest people in a major U.S. city could be overlooked even in planning for a calamitous natural disaster.

MS. TIPPETT: I do think it's easy when people become statistics, which poor people do in our society, and then those statistics get batted around...

DR. HILFIKER: Yeah.

MS. TIPPETT: ...in terms of policies and when budgets are tight. Then there are lists of the vices of...

DR. HILFIKER: Yes.

MS. TIPPETT: ...poor neighborhoods, of crime and, I don't know, broken families and abuse and drug addiction and guns, right?

DR. HILFIKER: Yes.

MS. TIPPETT: And so — and then there's a sense in which those statistics kind of can harden all of us to not knowing what to do with those people. And maybe that doesn't naturally translate into — I mean, maybe in some abstract way we want the best for them, but I'm not sure that that's really the feeling that we get.

DR. HILFIKER: Well, that's one reality, that the feeling is different. The other reality is that we just may feel hopeless about it. I mean, even if we want the best for them, is the best thing this program or that program? And you have to go back to this reality that we don't know these people as neighbors. And one of the things that has happened — and, again, I don't know that it's anybody's fault, but one of the things that happens because of the kind of exposure we get on the media to people who are very poor is that, by and large, these are very, very negative images. And just today, as we've been talking, almost all the images I've given you have been negative ones. And yet, you know...

MS. TIPPETT: Right. Even from people who are working with the poor and want to help them, the images that come out are negative.

DR. HILFIKER: Absolutely.

MS. TIPPETT: Yeah. OK.

DR. HILFIKER: In fact, one of the books I read just mentioned that one of the problems we have is that even first-person accounts that — you know, if you are a white person, affluent person, you may have a neighbor who's a social worker in the inner city, so what you hear about, you hear about the problems that this white social worker has.

MS. TIPPETT: Or it's just terribly, terribly sad, so that it's overwhelming in that sense.

DR. HILFIKER: Yes. Yes. All those things happen, and so it's very easy to deaden that, I think, innate desire we have for everybody else's well-being. If I — you know, if what I do isn't going to help anyway, if everything I see shows that these people are kind of responsible for it, if they're a little bit scary, if I think they've been hurting other people as well, then it's very hard for me to blame people for turning off their compassion.

MS. TIPPETT: So I want to ask you, as somebody who has moved in that direction of relationship, you know, let me ask you the positive question then. I mean, what have you learned about the power of love, the power of good will and good work to help?

DR. HILFIKER: Well, one of the things that I've learned is the depth of generosity within the poor African-American community. Startling, actually, how many people within that community feel utterly bound to help others if they can. So if they don't have much money but they've got a little extra in their pocket and somebody else really needs some, often it's just given away. I knew a person, one of my patients, who had a reasonable job and she could have saved up money to get out of the ghetto, but payday came around and her friends and neighbors needed diapers or formula or whatever, and she gave the money that she didn't need away. And that's not a unique story within the poor African-American community. That happens all the time.

Another thing that I saw was the willingness to look at the dark side of things, the willingness to acknowledge that things — acknowledge their own faults, but also to acknowledge that — how should I put this? The story I think about is that when 9/11 happened, I went over to Joseph's House and watched, like everybody else...

MS. TIPPETT: And Joseph's House is this...

DR. HILFIKER: Joseph's House is our home for homeless men with AIDS. And sat down and watched television, like everybody else did, with the men all morning. And what I was struck by at that time was not that the men — the men were filled with compassion, were as upset as anybody else about what had happened, but they weren't surprised. It wasn't as if, 'Well, how could this possibly happen to us?' They somehow knew that bad things can happen to people, and they had a much—from my point of view, a much more reasonable response to that tragedy.

MS. TIPPETT: That the world can be a treacherous place.

DR. HILFIKER: Yeah. And that you still go out every day and do your best to, you know, love your neighbor and to make your way in the world. The degree of forgiveness that I have felt within the black community, you know, I represent, for many people, the white power

structure. I am white, I'm affluent, I'm powerful as a physician, and so on, and yet I can't remember an incident in which I've had that thrown back in my face by...

MS. TIPPETT: In all those years.

DR. HILFIKER: In all those years. Well, excuse me, there was one, and he was drunk. He was...

MS. TIPPETT: One. OK, one in 22 years is not bad.

DR. HILFIKER: One in 22 years, and he was drunk and actually was a pretty good friend of mine. But otherwise, people were willing to say, 'You're here. We will start from the beginning with you.' Just astonishing, really, given some of the experiences that some of the men have had with the white community.

MS. TIPPETT: Dr. David Hilfiker. I'm Krista Tippett, and this is *Speaking of Faith* from American Public Media. Today, "Seeing Poverty After Katrina."

Though David Hilfiker helped found two religiously based programs for homeless men in inner-city Washington, D.C., he reveals in his book *Not All of Us Are Saints* that he has never held a deep intuitive faith in God. I asked him how two decades of work with the poor have helped him think about the nature of God. Does he still struggle with his faith?

DR. HILFIKER: Every day. I can't even answer the question. I don't experience God in ways that I recognize from what other people say about their experiences of God. So while I'm a member of our faith community, I struggle with even the definition of being a Christian. What I know is that struggling with the realities of injustice, living in a community of people — I'm talking about our faith community now — living in a community of people who are also struggling with those issues and are unwilling to settle for pat answers, those two things plus others, but those two things make a far richer, deeper life than any I could imagine anywhere else. And it's that depth of life that I sense that is as close as I can get to defining God. I actually just read a passage from Walter Brueggemann's book on Jeremiah, who quotes this passage from...

MS. TIPPETT: The prophet Jeremiah, the Hebrew prophet.

DR. HILFIKER: The prophet. Jeremiah 22:16 says, 'He cared for the poor and the needy; is not that what it means to know me?' And Brueggemann comments, 'It's not just that caring for the needy acquaints you with God, but caring for the needy is God.' And I don't know exactly what he means by that, but I experience something like that. It's something about living this way that is the deepest way that I can imagine to live.

MS. TIPPETT: Yet you talk about the limits of charity, and I sense that you are critical, in a way, of a move in our culture to locate justice strictly within faith communities, or to put a lot of the responsibility for this kind of practical justice on faith communities. Is that right?

DR. HILFIKER: Yes. Yeah. I don't count the work at Christ House or Joseph's House largely as justice work, I count it largely as charity work. My understanding of the difference is that within the Christian tradition there is a mandate that we give charity and that we work for justice. And basically we give charity for ourselves. We give charity because it's the right thing to do for our own spiritual health. We are in control of charity, we decide where it goes, who gets it. Often we decide what people have to do with our charity. We're the ones on top, they're the ones on the bottom. I mean, there is a whole host of problems associated with charity. I don't criticize charity. It's mandated, it's something that we should do, and it's what I've spent most of my career doing. But it's different from justice.

Justice is working to change the structures so that the charity becomes less necessary. And that's what is so essential and that doesn't get touched by this turn in our country towards saying that faith communities will take care of the poor. I mean, there are practical reasons why that won't work, but I think there's a deep spiritual reason that charity is not enough, that we have to change these structures that benefit us and hurt them.

MS. TIPPETT: And, you know, it's hard even to find people in our public life, politicians who are talking about poverty, justice in the sense that you're talking about justice, structures of poverty, and making that any kind of priority for our public deliberation.

DR. HILFIKER: Well, that's certainly true. I mean, we have come a long way. The last 25 years have seen a turn. What we earlier called "greed" or "selfishness" is now called something like "the market," and it's this fascination that we have with the market, that everything has to go through the market.

MS. TIPPETT: Do you think that's happened in the last 25 years?

DR. HILFIKER: Well, sure. I'm just taking back to the '60s, for instance.

MS. TIPPETT: Right.

DR. HILFIKER: You know, Michael Harrington writes a book called *The Other America*. All of a sudden people discover poverty. You know, 'Oh, dear, we didn't know this, but we've got poverty in our country!' And the general response is, 'Oh, Well, we need to do something about that. And not only that, but we can, and we've got the power to do that.' So out of that comes, you know, President Johnson's Great Society program.

Today, you know, my fear out of Katrina is that we will once again see the poverty, but that will fade into believing that if we just, you know, encourage these folks to make better use of the market that then we'll all be fine. This notion that we are responsible for one another, that we belong in a community together, that we need to create just structures, is a very foreign one now. My wife's from Finland and we visit there frequently, and they have a very, very different social structure there.

MS. TIPPETT: Right.

DR. HILFIKER: And the thing that I notice over there is how people see each other, how Finns see the Finns as their people. Now, there are a lot of reasons for that in terms of homogeneity and everything else.

MS. TIPPETT: Yeah, and they're all very much alike too, right?

DR. HILFIKER: Absolutely. Absolutely. Yeah. I'm not saying they're better people than we are. All I'm saying is that in that country, they see each other as brothers and sisters, and in our country we don't.

MS. TIPPETT: I wonder as, let's say, the immediate response to Hurricane Katrina is also the way we tend to respond to need when it is suddenly exposed, which is by writing checks, sending clothes, and that's all good and, you know, and the Red Cross is out there saying, 'Send money. Send money. That will do the most good.'

DR. HILFIKER: Right.

MS. TIPPETT: But I'm aware also, you know, raising children, that what they're learning about how they help other people does have to do with writing checks and, you know, participating in a walk for hunger, you know? Which I would not want to discourage, I mean these are clearly good things with good intentions and good results, but somehow the way we do charity now also keeps us at a remove from what you're talking about, which is real relationship.

DR. HILFIKER: Yeah. Well, I think maybe that's the third leg of this. You know, we've talked about doing charity, which is mandated, we've talked about changing the structures, and the third leg is real relationships. And without those real relationships, you don't have any good idea about how to change the structures. So that the mandate, if you will, from our spiritual depths is, yes, we have to change political structures so that the next time the levee breaks in New Orleans there'll be a plan for getting 100,000 poor people out of there. But in addition to that, we have to develop relationships with people who suffer from the structures that benefit us.

MS. TIPPETT: And, you know, I keep coming back to your idea that — the remark of the FEMA head, that 'We didn't know these people existed,' the invisibility. I mean, I suppose that kind of relationship would contribute to just the visibility.

DR. HILFIKER: Yes, yes. I mean, ultimately what we're talking about is breaking down residential segregation. I mean, right now, the only way that you can get to know a poor person is by going into a neighborhood that's vastly different from yours and doing something there. So it becomes sort of like charity anyway, it's not part of your real life.

MS. TIPPETT: Right.

DR. HILFIKER: So that until we deal with these structures, these powerful systemic structures that keep African Americans far more segregated than any other group, until we deal with that and actually know each other — again, it's not just racial segregation but, you know, economic segregation's utterly legal. You can zone neighborhoods so that poor people can't move in there. That's legal. And until we change that so that our kids go to school with poor kids, we won't really get to the bottom of this, I think.

MS. TIPPETT: It's a tall order, though, I mean...

DR. HILFIKER: Oh, it's a very tall order.

MS. TIPPETT: ...given how things have evolved to get to this point.

# Speaking of Faith®

with Krista Tippett

**DR. HILFIKER:** Right. And if we don't do it, we will not survive as a culture that we recognize. I mean, this prophetic mandate in the Bible that God will not allow countries that don't take care of their poor to exist, that describes a fundamental social reality that cultures that allow the kinds of inequality that we have will lose their sense of democracy, their sense of all people being equal, their sense of freedom, and so on. And we will lose those things if we don't take care of our poor.

**MS. TIPPETT:** David Hilfiker writes on the history of poverty and teaches at the Servant Leadership School, which was founded by the Church of the Savior. He continues to work with Joseph's House, a home for homeless men and women with AIDS and cancer in Washington, D.C. His books include *Urban Injustice: How Ghettos Happen* and *Not All of Us Are Saints: A Doctor's Journey with the Poor*.

Contact us and share your thoughts at [speakingoffaith.org](http://speakingoffaith.org). Read David Hilfiker's exploration of the history of poverty in urban America. Sign up for our e-mail newsletter, which brings my journal on each week's topic straight to your inbox. All that and more at [speakingoffaith.org](http://speakingoffaith.org).

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