



About Affluenza

There is currently an epidemic of 'affluenza' throughout the world - an obsessive, envious, keeping-up-with-the-Joneses - that has resulted in huge increases in depression and anxiety among millions. Over a nine-month period, Oliver James travelled around the world to try and find out why.

He discovered how, despite very different cultures and levels of wealth, affluenza is spreading. Cities he visited include Sydney, Singapore, Moscow, Copenhagen, New York and Shanghai, and in each place he interviewed several groups of people in the hope of finding out not only why this is happening, but also how one can increase the strength of one's emotional immune system. He asks: why do so many more people want what they haven't got and want to be someone they're not, despite being richer and freer from traditional restraints? And, in so doing, uncovers the answer to how to reconnect with what really matters and learn to value what you've already got. In other words, how to be successful and stay sane.

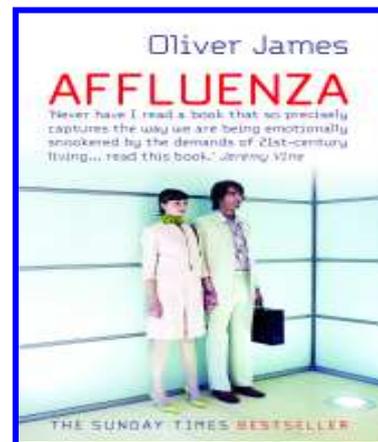
Reviews

"Oliver James is excellent at showing why social scientists think that the surge in material affluence can produce the opposite of happiness." - Avner Offer, Professor of Economic History, University of Oxford

"Should be mandatory reading for everyone" - Will Self

"Never before have I read a book that so precisely captures the way we are all being emotionally snookered by the demands of 21st-century living... read this book" - Jeremy Vine

A wonderfully clear and cogent thesis" - *Guardian*



EXCERPTS FROM AFFLUENZA, BY OLIVER JAMES

The widespread depression and anxiety created by the Virus are crucial for Selfish Capitalism. To fill the emptiness and loneliness, and to replace our need for authentic, intimate relationships, we resort to the consumption that is essential for economic growth and profits. The more anxious or depressed we are, the more we must consume, and the more we consume, the more disturbed we become. Consumption holds out the false promise that an internal lack can be fixed by an external means. Compensation for personal misery is why people with the Virus are at greater risk of substance abuse (alcohol, illegal drugs), but more important, of the legal “aholias”, shopaholia (till we drop), workaholia, sex and the other compulsions of mass consumption. We medicate our misery through buying things; its purveyors have never pretended otherwise.

A fine illustration of the subtleties of relative and survival materialism came the morning after I met the millionaire Sam, when I got chatting to Chet, a taxi driver. He looks to be in his early thirties but is in fact forty-seven, and arrived from Nigeria three years before. Although he now earns £300 more in a month than the £750 he was paid in a year working for KLM in Nigeria, he is adamant that although they are much richer, the people in New York are less happy. 'There's too much tension, everything is about money because there is nobody you can run to if you are short of it. You have to solve your problem yourself, nobody will help if you fail or fall. If you don't earn money for two months, you are on the street.' That would not be true in Nigeria. 'Someone would come to your aid there. If you are penniless your family would keep you going for the next six months, a year even, you could never be homeless. It's not that anybody has much money, but they are contented. All an average Nigerian worries about is food and trying to find money to send their child to school, which must be paid for out of your pocket. They don't care if they have a video machine.' This bears out the findings of the WHO study of emotional distress in fifteen different countries: in the previous twelve months, nearly six times more Americans than Nigerians had suffered (26.4 per cent versus 4.7 per cent – see Appendix 3). Whilst poverty fosters survival materialism, it does not result in illness. Materialist values cause emotional distress only when countries, or classes within them, become affluent.

The differences between the Life of Sam and Chet did not end with the taxi driver's uxoriousness and contentment. Chet has a whole sackful of adversities. He is stuck working as a cabbie because he cannot get the Green Card that would enable him to work legally. 'my plan is to get a job with an airline. The work I know, but I can't get a Green Card without a letter from an employer. Really, I need someone who is rich to sponsor me. [Sam flashes into my mind – and then straight out of it.] My wife does a proper job working with old people, like cleaning out their beds and stuff, but even she cannot get one and it doesn't look like she ever will.' Chet suffers from diabetes and hypertension, the pills for which cost him a lot of money each month. Although he and his wife's joint monthly income amounts to £2,000, £450 of that goes on rent and a further £150 on utilities. By the time she has bought the food and he has paid the expenses of running his taxi, what's left has to go towards his children's education.

Let's recapitulate the differences between Chet and Sam. Chet's annual income is one thousand times less. He is contented, optimistic, sexually faithful and religious; he is courteous, friendly and open but with serious health problems and no medical insurance, and has little prospect of being able to save any money or ever own his own home. Sam is discontented, pessimistic, sex-addicted and an atheist; he is curt, domineering and unfriendly yet he has no medical problems and lives in a big apartment (in which several families of Chets could gladly fit), just one of a varied portfolio of properties between which he flits in his private jet. One suffers from Affluenza; the other does not, even though the need for money – survival materialism – figures high on his list of priorities.