

Public Education, Dialogue, and Informed Consent Prior to Application of the CHPEM to the General Economy

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The author would like to emphasize that he does not recommend application of the Children's Hospital Public Economy Model (CHPEM)¹ to a general economy (i.e., creation of a CHPEM-inspired public economy) until/unless two important conditions have been met:

First, public education: The general public should be provided with thorough information regarding the nature of the CHPEM and the option of applying the CHPEM to the general economy (i.e., the option of creating a CHPEM-inspired public economy).¹⁻³ There should be extensive respectful dialogue about what a CHPEM-inspired public economy would look like and how it would operate. The public would need to thoroughly and freely discuss its concerns and fears about a CHPEM-inspired public economy and would need to become well-versed in the social philosophy, foundational principles, spirit, and practical organizational aspects of a public economy.⁴ This public education should include careful comparison of the CHPEM-inspired public economy with corporate capitalism and other economic models. It should also include preparation of the public to quickly recognize potential deliberate attempts on the part of corporate capitalists to sabotage the public economy.

Second, after the above education and dialogue has sufficiently occurred, the public should have opportunity to democratically decide whether it wants to proceed with actual development and implementation of a CHPEM-inspired public economy. One way to make this democratic decision would be via public referendum. A referendum would protect the public from Congresspersons who have succumbed to "corporate capture" and ceased to truly represent the public.

The above-described first and second conditions are analogous to the "informed consent" process that should always be followed in Medicine, whereby a patient is fully informed of a proposed treatment option, is also informed of all other options, is informed of the advantages and disadvantages associated with each option, is given opportunity to ask questions and adequately study the matter, and is then given final say as to which option is selected. Informed consent represents one of the most important foundational principles of Medicine, Ethics, Democracy, the CHPEM, and application of the CHPEM to a general economy.

In short, plans for a CHPEM-inspired public economy should never be implemented in the general economy until/unless the public has received thorough, honest information about the CHPEM and application of the CHPEM to a general economy, and has democratically voted to implement the model in a way in which the public is comfortable. The CHPEM honors the court of informed public opinion.

A further fundamental principle of the CHPEM is that the public education it offers should not represent propaganda. Propaganda is manipulative and is often deliberately misleading and dishonest in its attempts to persuade. Propaganda is often delivered in an intolerant, repressive manner, such that disagreement with it can endanger those who dissent. Propagandists are quick to label and censor dissenting views as “misinformation,” “disinformation,” or “mal-information.”

Public education about the CHPEM and application of the CHPEM to the general economy, like the information provided during a proper informed consent process in Medicine, must be honest and non-manipulative, and it must not be delivered in an intolerant, repressive, sanctimonious, self-righteous, moralistic, priggish, or pontifical manner. Information about the CHPEM and a CHPEM-inspired public economy can and should stand on its own merits, and it should be delivered in a calm, caring, humble, non-defensive, open-minded manner that encourages constructive critical analysis of it. The CHPEM protects and encourages free speech and encourages critical thinking and respectful dialogue. The CHPEM discourages demonization, ridicule, hateful intolerance, censorship, persecution, intimidation, coercion, and violence. Constructive criticism helps proponents of the CHPEM to improve their understandings, including recognition of their own mistakes and recognition of how to best proceed. The CHPEM, including education about it, seeks to model the best of human behavior (the best aspects of our Human Nature) and encourages emulation of that behavior throughout the general economy and society as a whole.

It cannot be emphasized enough that the CHPEM strongly encourages **avoidance of intolerant, overzealous, reactionary responses to those with dissenting views**. For example, the CHPEM strongly warns against the reactionary and repressive behavior exhibited during the COVID pandemic by many (including President Biden) who have favored the prevailing COVID narrative and have been intolerant of those who have questioned that narrative, particularly its mandatory mass vaccination campaign. Although President Biden and his followers may have been well-meaning, many of them have engaged in reprehensible censorship, demonization, shaming, persecution, and hateful intolerance. Not only has that behavior been overzealous, reactionary, and wrong, but also the prevailing COVID narrative, itself, has been full of scientifically unsound information and has involved gross violations of fundamental principles of science, medicine, ethics, and democracy. The CHPEM strongly discourages such reactionary, intolerant, overzealous, and hateful behavior. We should learn from these mistakes made during the COVID pandemic. (For further explanation and justification of the above critical statements about management of the COVID pandemic, please see the **“Notes on COVID-19”** section of the **“Notes From the Social Clinic”** website

Instead of the behaviors that have been exhibited throughout the COVID pandemic, the CHPEM encourages extensive, honest analysis and healthy, respectful dialogue⁵ about social and economic (and medical/public health) issues, followed by fully informed democratic decision-making. The CHPEM discourages “narrow labelling of people’s social and political beliefs” and promotes the notion that we consider being conservative, progressive, radical, liberal, and revolutionary---all at the same time.⁶

It is hoped that thorough public education about the CHPEM, with extensive analysis and respectful dialogue, will shed light on concerns about application of the CHPEM to a general economy, as well as the potential benefits of a CHPEM-inspired public economy. Again, the option of a CHPEM-inspired public economy should not be implemented until/unless fully informed public consent has been obtained.

Gradual implementation of a CHPEM-inspired public economy versus sudden widespread implementation:

Dialogue about the CHPEM and a CHPEM-inspired public economy should include discussion of **how** it should be implemented, **if** a democratic decision (perhaps, through a nation-wide referendum process?) is made to implement it. Should it be gradually implemented? Or should it be suddenly implemented? It would seem that gradual implementation would be wiser, more palatable, and more instructive. Gradual implementation might look like this:

Once an informed democratic decision has been made to at least temporarily transition (i.e., on at least a trial basis) from a predominantly corporate capitalist economic model (CCEM) to a version of CHPEM-inspired public economy, major public investment could be budgeted for “vast fields of public activity,” That is, funds could be mobilized for development of a vast array of public projects---e.g., a public train industry, public (as opposed to private) construction companies, public pharmaceutical companies, public health care institutions, public agricultural and grocery companies, public timber industry, public technology companies, etc. In the beginning, a limited number of these public entities might be funded and might serve as demonstration projects, much like children’s hospitals (during the altruistic era) have served as an instructive and convincing demonstration of the CHPEM. These initial public entities would focus on being exemplary demonstrations of application of the CHPEM to the general economy. Then, the number and variety of public entities could be expanded.

While the above gradual expansion of public entities is occurring, private free enterprise businesses would be welcome to continue their businesses, including their practice of Price-Based Costing. These private businesses would find themselves competing with their public

counterparts. Citizens will notice which entities—the public entities or the private businesses—are serving them in a way they wish to be served and treated. Just as parents noticed that their children were better served by children’s hospitals during the altruistic era versus during the corporate era, citizens will likely find that they prefer the behaviors and services of the public entities, rather than the behaviors and services of the private businesses, particularly the large corporate businesses.

It is likely that, gradually, citizens will decreasingly use and support the private businesses and increasingly use and support the kinder and more affordable public entities. It is likely that citizens will become increasingly grateful for the public entities. It is likely that support for the public entities will become increasingly high-spirited and confident. The private businesses will be welcome to try to compete with the public entities, but they will likely lose in that competition. Many private businesses will fold, due to lack of citizens’ interest in patronizing them. The better model will prevail. The corporate capitalist model may fade away, peacefully, we hope. But, realistically, as history has shown, the corporate capitalist model, particularly the giant transnational corporate capitalist entities and their financial institutions, may refuse to fade away peacefully.

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FOOTNOTES:

The footnotes refer to related “companion” essays that further explain the concepts and terms used in the current essay. These related essays are posted (or will soon be posted) on the **Notes From the Social Clinic website**: www.notesfromthesocialclinic.org

1. The Children’s Hospital Public Economy Model (CHPEM)
2. The Social Beauty of Children’s Hospitals
3. Application of the CHPEM to the General Economy
4. Addressing Concerns About the CHPEM
5. The Dearth of Dialogue
6. Narrow Labelling of People’s Social and Political Beliefs