

## **An Interview Regarding the Book: *Sowing Seeds of Social Beauty***

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March 2026

What follows is a simulated interview about *Sowing Seeds of Social Beauty*. It is not the transcript of an actual interview. It serves to summarize key messages of the book.

**Q: You have written a book entitled *Sowing Seeds of Social Beauty: The Untold Story of the Children's Hospital Public Economy Model (CHPEM)*. Can you summarize what the book is about?**

**RMR:** It is about the Social Beauty of children's hospitals throughout the world, and it is an analysis of what creates that Social Beauty and what threatens that Social Beauty. The book posits that it is practice of what I call the Children's Hospital Public Economy Model (CHPEM) that generates the Social Beauty.

The book provides a detailed explanation of the CHPEM and explains how the set of foundational social understandings upon which the CHPEM is based are completely different from and more accurate than the set of social understandings that are promoted by the current prevailing economic model, corporate capitalism.

The book contends that because the social understandings upon which the corporate capitalist model is based are highly flawed, that model predictably creates **Mean Social Arrangements** and **Social Atrocities**, whereas the CHPEM and its foundational social understandings predictably create **Kind Social Arrangements** and **Social Beauty**. Accordingly, the CHPEM is certainly a far more appropriate economic model, at least for the health care sector of society.

Unfortunately, over the past 20-25 years the corporate capitalist model, with its unwise social understandings and practices, has been increasingly and undemocratically imposed on children's hospitals and has increasingly replaced the CHPEM. For example, corporate capitalism's emphasis on monetary incentive and revenue generation has replaced the CHPEM's focus on moral incentive and altruistic patient care.

When I started in medicine (in 1972), I was a physician who served patients. Serving patients was the top priority. By the late 80s, I was a "provider" who took care of "clients." By the time I retired, I was regarded as a "revenue generator" who served the financial interests of the institution. Revenue generation, not patient care, was imposed as a physician's top priority and responsibility.

My book is a warning about this corporatization of health care---a transformation that has been detrimental to patients and the altruistic practice of medicine. The book explains how we can retrieve and further the Social Beauty of children's hospitals and the altruistic practice of medicine.

The book further contends that the corporate capitalist model, particularly because of the highly flawed social understandings upon which it is based and the resultant practices it promotes, is a major root cause of many of the profound problems currently facing Humanity (e.g., forever wars, potential nuclear war, global economic collapse, and the specter of hideously technocratic totalitarianism)—and that an alternative social and economic model, like the CHPEM, might substantially reduce these threats.

The CHPEM has already been demonstrated to be an excellent and feasible social and economic model, at least when practiced in children’s hospitals. The book encourages dialogue about potential application of the CHPEM not only to healthcare in general but also to the general economies of nations, as a healthy alternative to global corporate capitalism.

I emphasize the word “dialogue” because the primary purpose of the book is to stimulate, facilitate, and inform much-needed healthy, respectful dialogue about the strengths and weaknesses of the corporate capitalist model and the strengths and weaknesses of the CHPEM, and whether we, the general public, want corporate capitalism to continue to be the prevailing social and economic model or whether an alternative model, like the CHPEM, might be better.

There has been a dearth of respectful dialogue about the pressing issues facing Humanity. This lack of dialogue, and the highly contentious and intolerant polarization that has resulted, has contributed greatly to the lack of progress in resolving these pressing problems.

**Q: There is a lot to unpack there but before I ask you to explain the CHPEM and the set of foundational social understandings upon which it is based, could you explain what you mean by Social Beauty? I don’t think I have ever heard that phrase.**

**RMR:** Just as there is beauty in Nature (Nature’s Beauty)---e.g., the inspiring beauty we see, experience, and appreciate when we are out in a pristine wilderness ---there can be inspiring beauty that we can see, experience, and appreciate in social settings. For example, when parents take their sick child to a children’s hospital and experience the kind, altruistic, and expert medical care provided by the hospital’s physicians, nurses, and staff, and that care is provided free of charge to the parents, those parents are experiencing Social Beauty.

The opposite of Social Beauty is Social Atrocity. When a sick person hesitates to go to the hospital because it will cost money that they don’t have, and/or the staff at the hospital provides care that is rushed, dispassionate, and uncaring---that is not a thing of Social Beauty, that is a Social Atrocity.

Likewise, nations that mutually and altruistically help each other to improve the lives of their citizens are creating Social Beauty; whereas imperialistic nations that exploit the resources and people of other nations and then wage war to protect and expand that profit-making exploitation are creating Social Atrocity.

Social Beauty is what we see, experience, and appreciate when Kind Social Arrangements and healthy social activities prevail and inspire. Social Beauty is the byproduct of those

arrangements and activities. Social Atrocity is what we see, experience, and suffer when Mean Social Arrangements and unhealthy social activities prevail.

Excellent publicly funded health care, excellent publicly funded education, excellent publicly funded training in the Arts, and peace among nations are things of Social Beauty. Unaffordable health care, unaffordable education, unsupported development of the Arts, and exploitation, colonialism, wars, and racism are Social Atrocities.

So, here is my definition of Social Beauty:

*Social Beauty refers to any social arrangement, social activity, or social behavior that, when witnessed or experienced, warmly touches the human heart, nourishes the human soul, uplifts the human spirit, reminds us of the best behavioral capacities of our human nature (e.g., our capacities for empathy, compassion, altruism, kindness, and artistic creativity), elevates feelings of gratitude for Life, Nature, and each other (including gratitude for opportunities to contribute to the well-being of others), and makes one proud to be a part of humanity.*

*Social Beauty is the product of Kind Social Arrangements (and the social activities and social behaviors generated by those arrangements) and those Kind Social Arrangements are, themselves, things of Social Beauty.*

In my view, a top priority in healthcare and a top goal of nations should be to create Kind Social Arrangements that, in turn, generate great and widespread Social Beauty that all can enjoy. And an associated priority in healthcare and among nations should be to stop creating Mean Social Arrangements, disassemble existing Mean Arrangements, and thereby markedly reduce Social Atrocities, globally.

**Q: Okay. It strikes me that it is sad that the phrase “Social Beauty” is not part of our culture’s lexicon. Now, could you please explain the Children’s Hospital Public Economy Model (CHPEM) in more detail.**

**RMR:** The best way to describe the CHPEM is to cite the historical development of children’s hospitals in Canada. Many decades ago, Canadian leaders and the people of Canada asked two fundamental questions: “What do children need (regarding healthcare)? And how can we best meet that need?” It was decided that each major metropolitan area in each province needed to have an excellent children’s hospital and that the health care at those hospitals should be provided at no charge to the patient. It was decided that these hospitals should be publicly funded and operated, rather than privately run. The provincial governments committed to providing ample funding, based on responsible annual cost-based budget requests, submitted by each hospital’s leadership. The hospitals were expected to altruistically provide kind, unrushed, appropriately efficient, expert care. Leadership positions at the hospital were to be populated by those physicians who best exemplified competence, trustworthiness, and the altruistic spirit of the hospital. The hospitals were not expected to generate profits. Revenue generation was not a purpose of these hospitals. The hospital workers (physicians, nurses, etc.)

were to receive fair, appropriate salaries for performing an appropriate workload with appropriate efficiency.

So, the CHPEM is a needs-based, appropriate budget-based, cost-based, non-profit, altruistic, democratic, publicly-funded and operated model. In contrast, the corporate capitalist model is not a cost-based, budget-based, non-profit, altruistic, democratic, or publicly funded and operated model, and it is not primarily a needs-based model. It is a private, price-based, for-profit model that focuses on seizing opportunities to generate private wealth.

As already mentioned, there is an important set of foundational social understandings and social behaviors upon which the CHPEM is based and which guide the hospital's behaviors and practices. Chief among these are specific social understandings regarding Human Nature, Motivation, Competition, Leadership, and Freedom. In great detail the book explains how these social understandings of the CHPEM profoundly differ from the social understandings upon which global corporate capitalism is based. For example, the understanding of Human Nature promoted by the CHPEM is a very positive and nuanced view of Human Nature; whereas the capitalist view of Human Nature is negative, simplistic, pessimistic, and incomplete. The CHPEM promotes moral incentive rather than monetary incentive. The CHPEM understanding of the nature and role of competition is completely different from the capitalist understanding. Likewise, the CHPEM's understandings of leadership and freedom are different from those of global corporate capitalism. The book explains these differences.

It is the practice of this set of wise foundational social understandings that enables the CHPEM to create Social Beauty.

Another important characteristic of the CHPEM is that it is, of course, committed to the fundamental principles of science, medicine, ethics, and democracy. It is also committed to the notion that healthcare is a Human Right.

I hasten to add that the above description of the CHPEM and the Kind Social Arrangements and Social Beauty associated with it applies to what children's hospitals were like during the 1960s, 70s, and 80s---what I call the Social Beauty Era (or could be called the Altruistic Era). Unfortunately, since the 1990s (at least in the USA) children's hospitals have become increasingly corporatized. That is, the social (mis)understandings and practices of corporate capitalism have been imposed on children's hospitals and have replaced the social understandings and practices of the CHPEM. For example, as mentioned earlier, monetary incentive and optimization of revenue generation have replaced moral incentive and non-profit meeting of needs. The Social Beauty Era has been supplanted by the Corporate Era.

**Q: Please explain more about the transformation of children's hospitals from the "Social Beauty Era" to the "Corporate Era." What happened? What changed?**

**RMR:** In the USA the "Corporate Era" began during the 1990s. At that time corporate business consulting firms (e.g., McKinsey & Company, a global business management consulting firm) were flourishing and were highly respected by institutions that were interested in becoming

more financially successful, more efficient at revenue generation. At many children's hospitals the Board of Trustees included wealthy successful business persons, many of whom believed hospitals could benefit by being run "more like a business." At the recommendation of these powerful board members, capitalist management consulting firms were brought in for advice.

The advice, in essence, was to apply corporate capitalist business philosophy and practices to operation of the hospital. This included adoption of the social understandings upon which capitalism is based---a pessimistic view of human nature, the absolute need for monetary incentive, practice of capitalism's inaccurate understanding of competition, and installment of leaders who enthusiastically embraced the idea of maximizing revenue generation.

Specific recommended policies included the following:

During the Social Beauty Era, the salaries of pediatricians employed by a children's hospital were usually paid by funds appropriated by state (or provincial) legislatures. Since they were already receiving this salary, the pediatricians were not expected to charge a fee for their services. Under the new business plan, this was to be dramatically changed. Henceforth, a physician's salary was to be based on and provided by actual net revenues that the physician generated via fee-for-service patient billing. Instead of automatically receiving a certain annual salary from the state or province, physicians were expected to generate net revenues that equaled or exceeded the salaries they had been accustomed to receiving. A physician's personally generated net revenues (at least a portion of them) were then used to pay that physician's salary.

In order to meet these revenue expectations, many pediatricians found that they needed to see many more patients per week and markedly reduce non-revenue-generating (non-billable) patient activities (activities like answering patients' phone calls, spending extra time to provide patient education, meeting with colleagues to collaboratively discuss patients' difficult clinical situations, and researching latest knowledge about how to best manage specific patients). This policy change adversely affected patients and physicians but generated greater revenues.

Another recommended policy was the "see and drop" policy. This policy was based on the fact that physicians could receive more fee-for-service reimbursement from health insurance companies for a one-hour "new patient visit" than they could for four 15-minute "follow-up" visits. Accordingly, the recommendation from the corporate business consultants was to populate a physician's outpatient clinic schedule with as many one hour "new patient visits" as possible and minimize the number of follow-up visits. In other words, "see" as many new patients as possible; then "drop" them so that you can see more new patients, instead of attending to the follow-up needs of previously seen new patients. This generated greater outpatient revenues, but was a disservice to patients who needed and deserved follow-up care.

These and many other capitalist business practices were increasingly implemented, and they created a new culture. Altruism and altruistic leaders were marginalized, even considered to be a business liability. Many patient needs (e.g., those for which there was no adequate billing mechanism) were left unmet. Increasingly, most leadership positions throughout the hospital

were populated by individuals who enthusiastically embraced and practiced these business practices.

The corporatization of healthcare has continued to increase and is at an all-time high at the moment--as most patients and physicians have come to know. The altruistic practice of medicine has continued to be under great threat.

**Q: You talk about the “set of foundational social understandings” upon which the CHPEM is based and how that set of understandings is profoundly different from the set upon which corporate capitalism is based. In your book you particularly emphasize how the CHPEM view of human nature differs from that of the capitalist view. Could you elaborate on this difference?**

**RMR:** Yes. One of the most important differences between the two models is the difference between the CHPEM view of human nature and the capitalist view.

The CHPEM view honors the complexity of Human Nature and acknowledges the full spectrum of human behavioral capacities that we all have. All of us have capacity to behave in kind ways, and all of us have capacity to behave in unkind ways. Some people may have above-average capacity for kind behaviors, while others may have above-average capacity for unkind behaviors. We are not all the same.

But there is more to human nature than just inherent capacities. The extent to which capacities are expressed or not expressed is also important. People vary regarding the extent to which they are inclined (inherently and via learning) to express this or that capacity. They vary regarding the extent to which they are interested (inherently and via learning) in expressing this or that capacity. They also vary regarding the ease with which they are able to upregulate or downregulate the expression of this or that capacity.

Adding to the complexity is that one’s social milieu can greatly influence the extent to which a person is inclined to, interested in, and easily able to upregulate or downregulate this or that capacity. Some social milieus (e.g., the social environment created within a children’s hospital) upregulate expression of people’s kind capacities and downregulate expression of unkind capacities; other social milieus (for example, the culture created within ultra-capitalist corporations) upregulate expression of unkind capacities and downregulate expression of capacities to be kind.

The CHPEM view of human nature is a positive, optimistic, nuanced one. Although it acknowledges that capacity for unkind behaviors is certainly one aspect of our human nature, it emphasizes that human beings, individually and collectively, also have great capacity for kind behaviors. Moreover, it emphasizes that the way a society organizes itself can influence the extent to which certain capacities are expressed. It emphasizes that the social milieu created by the CHPEM helps us to upregulate expression of our capacities for kind behaviors and helps us to downregulate expression of our capacities for unkind behaviors.

In contrast, the corporate capitalist view of human nature is negative, pessimistic, simplistic, and incomplete. It strongly and almost exclusively emphasizes the selfish aspects of our human nature, and it discourages faith in human goodness. It promotes the notion that people, by nature, are primarily selfish and largely hopelessly so. It largely ignores the fact that most, if not all, human beings have considerable capacity for kind, unselfish behaviors; and it ignores the fact that the social milieu can upregulate or downregulate the expression of capacities.

Conveniently, corporate capitalism uses this negative, incomplete view of human nature to justify its model and to discourage acceptance of a model like the CHPEM. Namely, it claims to be the most “realistic” economic model because it takes into consideration the “reality” that human nature is primarily selfish and rather hopelessly so. That, however, represents a simplistic, incomplete, and inaccurate assessment of human nature and of reality. I would also suggest that capitalism’s view of human nature is anti-human and abusive. To me, capitalism’s promotion of such a negative and incomplete view of human nature is tantamount to gaslighting people to accept a negative view of themselves and to accept an economic model that is not in their best interest.

**Q: In your book you also emphasize the difference between the CHPEM’s view of leadership and Capitalism’s view. Please elaborate.**

**RMR:** The CHPEM places great emphasis on selection of leaders who are “altruistic natural leaders.” By altruistic natural leaders I mean people who have demonstrated great inclination to express their kindest behavioral capacities, great commitment to doing so, and are able to do so easily and naturally. Indeed, during the 1960s, 70s, and 80s (the Social Beauty Era), the Heads of the Department of Pediatrics at children’s hospitals were altruistic natural leaders, who exemplified the behaviors, practices, and priorities that are valued and promoted by the CHPEM. Their altruism, fairness, competence, and incorruptibility came naturally to them and were obvious to their colleagues. They were unanimously recognized by their colleagues to be the best fit to lead and the best people to emulate. Usually, these altruistic natural leaders did not seek to lead, they were unanimously asked to please lead. Once they assumed leadership, they were good at recognizing and encouraging other “altruistic natural leaders” to fill other positions of leadership.

In contrast, leadership positions in corporate capitalist institutions tend to be filled by individuals who have enthusiastically embraced the behaviors, practices, and priorities of the corporate institution. For example, they are committed to maximizing revenue generation. They strongly believe in monetary incentive and their distorted “cut-throat” version of competition. Their ascendancy to a leadership position is not based on demonstrated altruism, fairness, kindness, and incorruptibility---it is based primarily on the extent to which they are thought to be capable of leading the corporation’s pursuit of profit. Unlike “altruistic natural leaders” these corporate leaders have demonstrated inclination to express their non-altruistic behavioral capacities, great interest in doing so, great commitment to doing so, and are able to do so easily and unapologetically. Once in a leadership position, such leaders promote like-minded, like-

behaving people to other leadership positions. At such institutions, “altruistic natural leaders” are not asked to assume leadership positions---instead, they are marginalized, or worse.

A root cause of the many serious problems currently facing humanity (military wars, economic wars, social illness, etc.) is that leadership positions throughout our most powerful governmental and corporate institutions have become increasingly filled with corporate capitalist leaders, not altruistic natural leaders. Predictably, these corporate capitalist leaders make decisions that benefit corporate interests, not the interests of Humanity. They are prone to create Mean Social Arrangements that, in turn, lead to Social Atrocities. In contrast, “altruistic natural leaders” are far more likely to make decisions that benefit all of Humanity---i.e., far more likely to create Kind Social Arrangements and Social Beauty, rather than Mean Social Arrangements and Social Atrocity.

**Q: You frequently mention Mean Social Arrangements and Social Atrocity versus Kind Social Arrangements and Social Beauty. What do you mean by Mean Social Arrangements?**

**RMR:** The phrase “Mean Social Arrangements” is a concept that I borrowed from Victor Hugo. In *Les Miserables*, Hugo used the phrase “Mean Arrangements of Man.” To be more inclusive and specific, I use the phrase “Mean Social Arrangements.” Both phrases refer to the same thing---social policies and decisions that are harmful to Humanity. Examples of Mean Social Arrangements (and Mean Arrangements of Man) include: arrangements that permit apartheid, genocide, colonialism, corporate exploitation of other countries’ natural resources and laborers, wars to protect that corporate exploitation; and arrangements that fail to protect human rights, including the right to publicly-funded health care.

**Q: Your “set of foundational social understandings” includes views on competition, incentive, and freedom. Could you briefly elaborate on these.**

**RMR: Regarding competition:** The word “competition” is derived from the Latin words “petere,” which means “to seek,” and “com,” which means “with.” Accordingly, the CHPEM interpretation of the word “competition” is that it means “to seek [new heights] together,” so that all who engage in a competition can improve. Competition is not about defeating, beating, or eliminating an opponent. The purpose of competition is to create a fun, spirited atmosphere that helps all to become better, or at least to have fun.

Competition plays a great role in athletics. Athletic competition helps all who participate to become better. Even in athletic competition, however, becoming better is more important than winning—if the concept of competition is properly understood. In sports competition, finding out who wins is interesting, but all becoming better and all daring to see how much better they can become if they work hard are more important.

In CHPEM-inspired children’s hospitals there is little, if there is any, need for competition, primarily because of the goals involved and because of the moral incentive practiced. The goal is not to beat or dominate other hospitals, it is for all hospitals to get better. The opponent is

childhood diseases, not other hospitals or each other. Accordingly, competition is not emphasized in CHPEM-inspired children's hospitals.

In contrast, the corporate capitalist model greatly emphasizes competition and promotes a distorted understanding of the word. According to the capitalist view, competition is all about winning, beating, dominating, even eliminating one's opponent. It is a zero-sum game, instead of a win-win game. The capitalist model insists that competition is an absolutely essential element in any economy. In the capitalist view, if there is no competition, people will not work sufficiently hard, will have no incentive to improve, will become lazy, and will under-perform. This view is consistent with their negative, anti-human view of human nature and their strong belief in monetary incentive.

Regarding moral incentive versus monetary incentive: According to the capitalist model, people will not work hard or perform their best unless there is monetary incentive to do so. Monetary incentive is viewed as an essential component of any economic model, if that model is to be successful. According to the capitalist model, it is unrealistic and naïve to think people will work hard and perform optimally in the absence of monetary incentive. Accordingly, the capitalist model greatly emphasizes monetary incentive.

In contrast, the CHPEM does not emphasize monetary incentive at all. In fact, it strongly discourages monetary incentive and favors moral incentive, instead. During the "Social Beauty Era" the exemplary behaviors of physicians, nurses, and other hospital workers were guided by natural moral incentive, not monetary incentive. They naturally performed altruistically and superbly because such performance was necessary to optimally meet the needs of sick children. Being on a fixed salary, they did not exert extra effort because they could make more money by doing so. They went "above and beyond" because that was what children needed them to do. They naturally wanted to provide what children needed, and they were happy to do so. They did not need or want monetary incentive. A fair and appropriate salary and work-load were sufficient.

So, the behaviors of physicians, nurses, and other hospital workers during the Social Beauty Era disproves the capitalist notion that "people will not work hard or perform their best unless there is monetary incentive to do so." In fact, during the "Corporate Era" the strong emphasis on monetary incentive has resulted in fewer physicians making the extra efforts that their patients' need.

Regarding freedom: The corporate capitalist model strongly emphasizes opportunity for individual freedoms. Individual liberty is paramount. While the CHPEM honors the importance of individual freedoms, it also honors what I call "a most precious freedom." By "a most precious freedom," I mean the freedom to participate in comprehensive public efforts to genuinely look after others; the freedom to enjoy widespread up-regulated expressions of the human capacity for kindness---in oneself and in society; the freedom to enjoy the meaningful effects of "vast fields of public activity." This freedom is provided by the social arrangements and social activities promoted by the CHPEM. This freedom is denied in societies dominated by corporate capitalism---societies in which "vast public activity" is discouraged.

Most people, whether they are aware of it or not, are desperately yearning for this “most precious freedom” and the meaningfulness it generates. The corporate capitalist model does not provide this most precious freedom and hides the path towards it. Ironically, the corporate capitalist model that champions “individual liberty” and “freedom of choice” denies an individual’s freedom to enjoy “a most precious freedom.”

**Q: I can see how the set of foundational social understandings upon which an economic model is based can profoundly influence the behaviors, culture, and outcomes of a given economic model.**

**You mention that the set of social understandings upon which capitalism is based is the source of its great power but also its Achilles’ heel. Explain that further, please.**

**RMR:** The set of social (mis)understandings upon which capitalism is based and which capitalism promotes is the source of its great power and wealth, but only as long as the general population accepts those understandings as being accurate and wise. For example, capitalism’s view of human nature is used to justify the capitalist model and capitalist behaviors. That view discourages faith in human goodness and, thereby, discourages faith in models such as the CHPEM. That view, as well as capitalism’s distorted view on competition and absolute need for monetary incentive, encourages acceptance of capitalism’s emphasis on self-interest seeking. Public acceptance of these understandings has allowed corporate capitalists to freely practice self-interest seeking behaviors, including cut-throat competition---practices that do, indeed, lead to ever-increasing wealth and power among the most aggressive practitioners of capitalism.

However, this same set of social (mis)understandings is capitalism’s Achilles’ heel, because, once a critical mass of the general public realizes that this set of social understandings is highly flawed and has caused great harm to most of Humanity, and once that critical mass also realizes that the set of social understandings upon which the CHPEM is based is far more accurate and wise, then the general public will become appropriately critical and unsupportive of corporate capitalism---i.e., the general public will have discovered corporate capitalism’s Achilles heel, where it is most vulnerable. Corporate capitalism’s strength—its power, its wealth, and its control over Humanity—has depended on unawareness of its Achilles’ heel. Once that Achilles’ heel is exposed and attacked (via informed and informing dialogue), corporate capitalism will no longer be able to walk its walk (due to its severed Achilles’ tendon). It will lose its power and control over Humanity.

**Q: I imagine that you often encounter a lot of pushback regarding the views you have expressed in your book---particularly your suggestion that the CHPEM could be applied to a general economy. What are the main criticisms, concerns, and fears that have been expressed to you?**

**RMR:** When I have shared my writings with others (primarily US citizens), most have been deeply skeptical, at best---particularly regarding the thought of applying the CHPEM to the general economy of a nation. Many react immediately with feelings of fear. Thoughts of loss of freedom immediately come to their minds. They immediately think of oppressive, totalitarian, even fascist regimes. They assume that “people would not be allowed to start their own businesses.” Some assume that private property would not be allowed, and that “the government would own everything.” Both of these assumptions are incorrect. They assume that if the CHPEM were to be applied to the general economy of a nation, that effort would surely result in disastrous failure, “just as all socialist efforts have failed in the past.”

A common concern is that the CHPEM places too much faith in human goodness and does not adequately acknowledge the “reality” that human beings are too selfish and too corruptible to allow a model like the CHPEM to succeed. In other words, they parrot the capitalist view of human nature and cite it as a definitive and wise reason for deeming the CHPEM to be unfeasible and destined to be a disastrous failure.

They insist that monetary incentive is essential, and that moral incentive is a noble thought, but impractical. They also insist that competition (as understood and promoted by capitalism) is essential. They also insist that “power corrupts” and that anyone who ascends to a powerful leadership position, even an “altruistic natural leader,” inevitably becomes corrupt. And they insist that innovation and creativity would suffer. Again, they parrot what capitalism preaches.

The bottom line is that they do not think human beings are good enough to successfully apply a CHPEM-like model to a general economy. Despite their acknowledgement of the deep flaws and consequences of capitalism, they would rather stick with the known flaws of capitalism than put trust in a less-known alternative such as the CHPEM.

They hold the above fears and concerns, despite the fact that the CHPEM has already been successfully practiced for decades in children’s hospitals throughout the world, and has demonstrated great innovation, creativity, and altruism while doing so; and despite the fact that this success faltered only when capitalist practices and attitudes were undemocratically imposed on these hospitals and altruistic natural leaders were replaced with corporate capitalist-abiding leaders.

Furthermore, my suggestion that a model like the CHPEM could be successfully applied to a nation’s general economy often transforms their opinion of me. It raises concerns, in their minds, that I have somehow become harmfully influenced or have otherwise developed dangerous ideas and become dangerous myself. Even if they think I have been well-meaning, they still think I have become “an enemy of the people” whose ideas are highly problematic, even deplorable, and are best ignored.

I get the impression that my writings make many people very uncomfortable. My writings seem to shake people’s long-held beliefs so much that they can hardly stand to read more than a fraction of the full manuscript. In fact, most people with whom I have shared my manuscript seem to have read only a few pages, at most, or even just a few paragraphs before deciding not to read any further. For many people, dealing with these issues (e.g., the threatening problems

facing humanity, and the merits of the CHPEM vs the merits of corporate capitalism) is “too stressful.” Many even take pride in their decision to “avoid such stress” by declining to engage in dialogue about these issues.

The above reactions are reminders of how extensively propagandized, fearful, pessimistic, and stressed the US population has become.

On the other hand, it depends on who the readers might be. I suspect that many (perhaps most) readers in the “Global South” might find my writings to be uplifting and liberating, rather than dangerous and deplorable---especially if they are among the large oppressed and exploited classes.

**Q: I imagine that many people assume that you are a socialist. Are you a socialist?**

**RMR:** I believe in the goodness of Humanity, and I believe in creating “vast fields of public activity.” I believe in the CHPEM and the core set of social understandings upon which it is based ---because I have worked in children’s hospitals for decades and have personally experienced the Social Beauty created by practice of the CHPEM. I believe in democracy, education, critical thinking and the importance of healthy, respectful dialogue.

I prefer to avoid labels. I never know what people might mean by “socialist” and “socialism.” Some mean “democratic socialism,” which means different things to different people. Some “democratic socialists” primarily believe in a very high “wealth tax” on the 1% so as to generate ample revenue for expansion of governmental social programs---and are not necessarily against corporate capitalism being the prevailing economic model. Some mean the kind of “socialism” practiced in Scandinavian countries, which use a capitalist economic model but provide generous government social programs (funded by high taxes) for their relatively small populations. For others “socialism” means that “the government owns all the means of production” and private enterprise is not allowed. Others mean a “hybrid” system, with state-owned enterprises, private sector businesses, and “joint ventures”--- but most of these “hybrids” are a combination of state capitalism and private sector capitalism, both of which adhere to the foundational social understandings upon which capitalism is based. Some people equate “socialist” countries with undemocratic regimes that are totalitarian, even fascist.

If forced to use a label, I would say that I am a “Hugoist” or that I would be a member of the Progressive Public Party, if such a party were to exist. Such a Party would be pro-Human, not anti-Human, and would advocate for the democratic creation of vast fields of public activity, alongside private sector counterparts, so that people could have a choice of services to use and to support. I am confident that with increasing public education (about social understandings and economic models) the public would increasingly use and support public services and decreasingly use private for-profit services.

I am not okay with corporate capitalism continuing to be the prevailing social and economic model. I think Humanity needs and deserves a far better model. Far too many people have

suffered for far too long from the social arrangements created by corporate capitalism. In my view, it is time for a public economy model.

**Q: In closing, what messages in your book do you think are most important for people to consider?**

**RMR:** I would like people to realize that:

- There is such a thing as Social Beauty, and there is an economic model (the CHPEM) that creates Kind Social Arrangements that result in Social Beauty. So, we need not settle for an economic model that creates Mean Social Arrangements and Social Atrocity.
- The capacity we all have to be selfish and unkind represents just one aspect of our human nature. Another aspect of our human nature is our capacity to be altruistic and kind. Corporate capitalism emphasizes and gives practice to our capacities to look after our self-interest. The CHPEM emphasizes and gives practice to our capacities to compassionately look after each other.
- For decades pediatricians at children's hospitals throughout the world have successfully practiced a social and economic model---the Children's Hospital Public Economy Model (CHPEM)-- that is foundationally based on a set of wise social understandings. That innovative model succeeded magnificently in helping sick children, and it created great Social Beauty within those hospitals. However, subsequent corporatization of children's hospitals has threatened the CHPEM and the Social Beauty it creates.
- Physicians have an obligation to reverse the current trend of increasing capitalist corporatization of healthcare and to recapture and further the altruistic practice of medicine.
- The CHPEM could be applied not only to healthcare in general (including the pharmaceutical industry) but also to the general economy of a nation(s).
- Corporate capitalism's unwise and incomplete social understandings are in great need of critical examination. This inadequately examined set of flawed social understandings is the source of corporate capitalists immense wealth, power, and control over humanity, but also represents capitalism's Achilles' heel.
- If the majority of the general public were to become fully aware of capitalism's flawed social understandings, and also aware of alternative economic models (such as the CHPEM), capitalism would likely lose public support.
- Healthy, respectful dialogue about the strengths and weaknesses of the corporate capitalist economic model and the strengths and weaknesses of the CHPEM is desperately needed. Indeed, the primary purpose of the book is to stimulate, facilitate, and inform such dialogue.
- Corporate capitalism, particularly the set of flawed social (mis)understandings upon which it is based, is a major root cause of the horrible problems currently facing Humanity (wars and other Social Atrocities).
- These horrible problems will only worsen, as long as corporate capitalism and the leaders it favors continue to prevail. To expect otherwise is utterly unrealistic. The most

realistic way to solve these problems is to emulate the spirit and practices of children's hospitals and, thereby, create "vast fields of public activity" and Social Beauty.

- These horrible problems will only worsen, as long as hateful polarization prevails. Division allows the status quo to persist and worsen. The highest promoters and beneficiaries of corporate capitalism prefer division, not dialogue. Respectful dialogue would lessen division and promote successful problem-solving.
- Excessive fears about the thought of applying the CHPEM to a nation's general economy stand in the way of our doing something wonderful---as already demonstrated by the Social Beauty created by the CHPEM in children's hospitals.

Finally, I would ask: Why have we chosen (or allowed ourselves to be ruled by) an economic model (corporate capitalism) that is anti-human and predictably creates Mean Social Arrangements and Social Atrocity, when we could choose an economic model that is pro-human and has already proven to be capable of creating Kind Social Arrangements and Social Beauty? Is it not time to Sow Seeds of Social Beauty?

#### **ADDITIONAL READING:**

For further explanation of the views expressed in this simulated interview, please download the full manuscript of ***Sowing Seeds of Social Beauty***. The full manuscript is posted on my website ([notesfromthesocialclinic.org](http://notesfromthesocialclinic.org)) and may be downloaded for free. By perusing the Table of Contents of ***Sowing Seeds of Social Beauty*** you can find Chapters that further discuss specific issues raised in this interview.