



SOCIAL MEDIA, SEO AND HEALTHCARE

WHERE WILL SOCIAL MEDIA CONVERGENCE END UP?

No one knows for sure, but recent trends and the forecasting press are now leading us to believe that **social media platforms** will become the new aggregation and distribution point for personal healthcare information. This article will attempt to connect the emerging and converging points of social media, technology and personal health information.

Focusing on social media trends, the bevy of recent publishing illuminates some of the major forces of our time moving in the direction of initiating and innovating to solve a problem that the healthcare institution has wrestled with since the dawn of healthcare. The personal healthcare social marketing trend fits the classic wave of change that escalates to a tidal wave.

So, what's the discontinuous innovation this time that will revolutionize in a decade what has been toiled with for hundreds of years?

Empowering individuals through social networks to aggregate in real time and on a 24/7 basis, comprehensive, detailed data on their bodies' functions that become instantly accessible and sharable personal health information. This new capability will be accomplished with the help of the technology giants and "on-body" monitoring (wearable technologies) documenting the body's output or real time conditions and physical reactions occurring in the body— inclusive of chemical/biological reactions, not just myo, heart, or respiratory reactions.

Think 1.0 of this trend is Nike bands..2.0 is Apple Watch..Google will be 3.0 within the next 18 months as they continue their long march to harnessing the data most relative to each of us individually. The forces of Google's data aggregation and indexing capability will open the trend to a free-for-all of independent innovation by carrying all the heavy data warehousing, protection costs and infrastructures.

This can appear as an "old" story for forward-thinking vets of the healthcare industry. But, leading thinkers have been trying to manifest the possibility for years. For all of those that think to themselves, "been there, done that," consider this truism of our current society of change: the innovations that change our world are those that are NOT new ideas, but old ideas that are attacked in new ways. Think portable music players and then the iPod. Think of the smart phones available for a decade before the iPhone changed the game completely. Think of the internet's first 10 years and how much real estate it has consumed in the last 10 years. Discontinuous innovation is simply a game changer.

Discontinuous innovation outmaneuvers or works around all previous restraining forces, although disruptive innovation also has its own teeth and its forces continuing to play simultaneously in this area as we speak.

The difference we see now is that our economy is solving what doctors and the healthcare system as it was funded could not get patients to do and government to pay for: 24/7 unvarnished, comprehensive feedback directly from the person's body that is stored instantly and sharable instantly to whomever and whenever the patient decides.

In addition, the costs of creating a nation "wired" with this kind of computing power and focus on health, storage, stewardship and privacy of data as well as sharing ability are now carried by the individual this time around and seeded by the world's four most powerful technology innovation companies simultaneously for the profits that are down line.

And finally, we must consider the impact of the coming wave of "wearables" and exponential computing power in everyone's pocket as well as the resulting low cost and super high-quality monitoring connections now technically possible directly from the human body. This new paradigm becomes possible when we think about the difference between what the first mobile phones could do then, and a fully-loaded smart phone of today. The progression took 10 years. We are three years into the start of the "wearable technologies" era.

When we consider the new ability to offer every person the monitoring capability that only the medical industry had to offer over the last 20 years and do so within the stride of their everyday life and willing social interactions, many new opportunities are discovered. Also, consider the tech advancement we are now experiencing and the difference in the fidelity and penetration of personal use, personal accountability and real time patient feedback becoming 100x what we perceive is possible from the perspectives we have built from past experiences.

Social media platforms will drive the personal accountability of the individual via empowering constant contact with the patient and real time, 24/7 feedback to the doctors coupled with instant, efficient, two-way feedback to patients. This new possibility will propel patient accountability and follow-through with the doctors' directions and provide the insights needed for our healthcare systems to consistently perform at an efficacy level that is dimensionally more in the favor of the system's current capability. Better healthcare results and lower overall costs will be the final lever to influence system-wide investment within the new and emerging healthcare social platforms for the sake of better personal health and wellness.

The bottom line: Simultaneously, the focus of the healthcare industry's "social" efforts will be moving away from bulletin boards of randomly posted content and towards subject-specific semantics that are personally relevant in the terms of the users.

Imagine that our social networks of today transform into connection points of information about health education. While social media debuted as a toy and amusement, it is changing quickly as a "mobile" and "personal source" of information. Social online integrations are now trending across all industries as the most penetrating communication platforms possible for reaching sub groups of people who are commonly interested in information and knowledge about a niche area of emphasis, especially if people are using it to access and report personal health information.

It is so critical for those of us serving in public healthcare to continue to lay the infrastructure and develop the content now as the world will be plugging into these "subject-centric networks" with keenly focused niche or "subject-specific" intent. Think of specific areas with aggregated interests such as "advancing technology" or in healthcare "whole person healthcare" as subject matters relevant to individuals.

Personal empowerment of health feedback will enable and motivate consumers to seek more and more information. Delivering the information, they need and want, in the manner in which they search, will be the difference between the successful enterprise and the failure.

From a corporate **strategy** perspective, the newest social media trend and associated articles demonstrate why it is so important for an enterprise to build hyper-connected online infrastructures leveraging esoteric semantics. The reason? The organic nature of internal **content development**, in-house or enterprise-generated content usually starts as technical or esoteric industry insider speak. The semantics inside an industry most often do not fit the

semantics of its consuming target audiences. Technically and literally, internal semantics do not match the vernacular of the target audience in the way or condition that target audiences reference such information.

Think about a technical reference of using the scientific description of *Bellis Perennis* rather than using the word "daisy." This is similar to the faux pas we now see with internally controlled and influenced social media content now published: for instance, merchandising a degree online as "DHsc" versus referencing a degree as a Doctorate in Health Sciences.

Therefore, social relevance requires that we understand the deltas between technically accurate reference and how the public references and accesses such information and then leveraging that insight to publish with external relevance (customer or subject-centered semantics).

This methodology also requires a synchronization reflecting the core business/vision/mission/subject centric areas of concentration that are focused on within the enterprise mission or vision. It is also important to keep relevant **brand** mapping to the enterprise stakeholders' attributes on the outside walls of the enterprise.

References:

Sun, L. (2014, October 12). *Why Facebook Could Become the World's Biggest Healthcare Network*. Retrieved from <https://www.fool.com>

Williams, L. C. (2014, October 3). *Why You Should Be Wary Of Facebook's Plans To Enter Health Care*. Retrieved from <https://thinkprogress.org>

Schawbel, D. (2013, December 17). *Geoffrey Moore: Why Crossing the Chasm is Still Relevant*. Retrieved from <https://www.forbes.com>

Nunes, P. and Downes, L. (2014, January 10). *The Five Most Disruptive Innovations at CES 2014*. Retrieved from <https://www.forbes.com>

Wikipedia contributors. (2018, November 20). *Disruptive innovation*. Retrieved from <https://en.wikipedia.org>

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