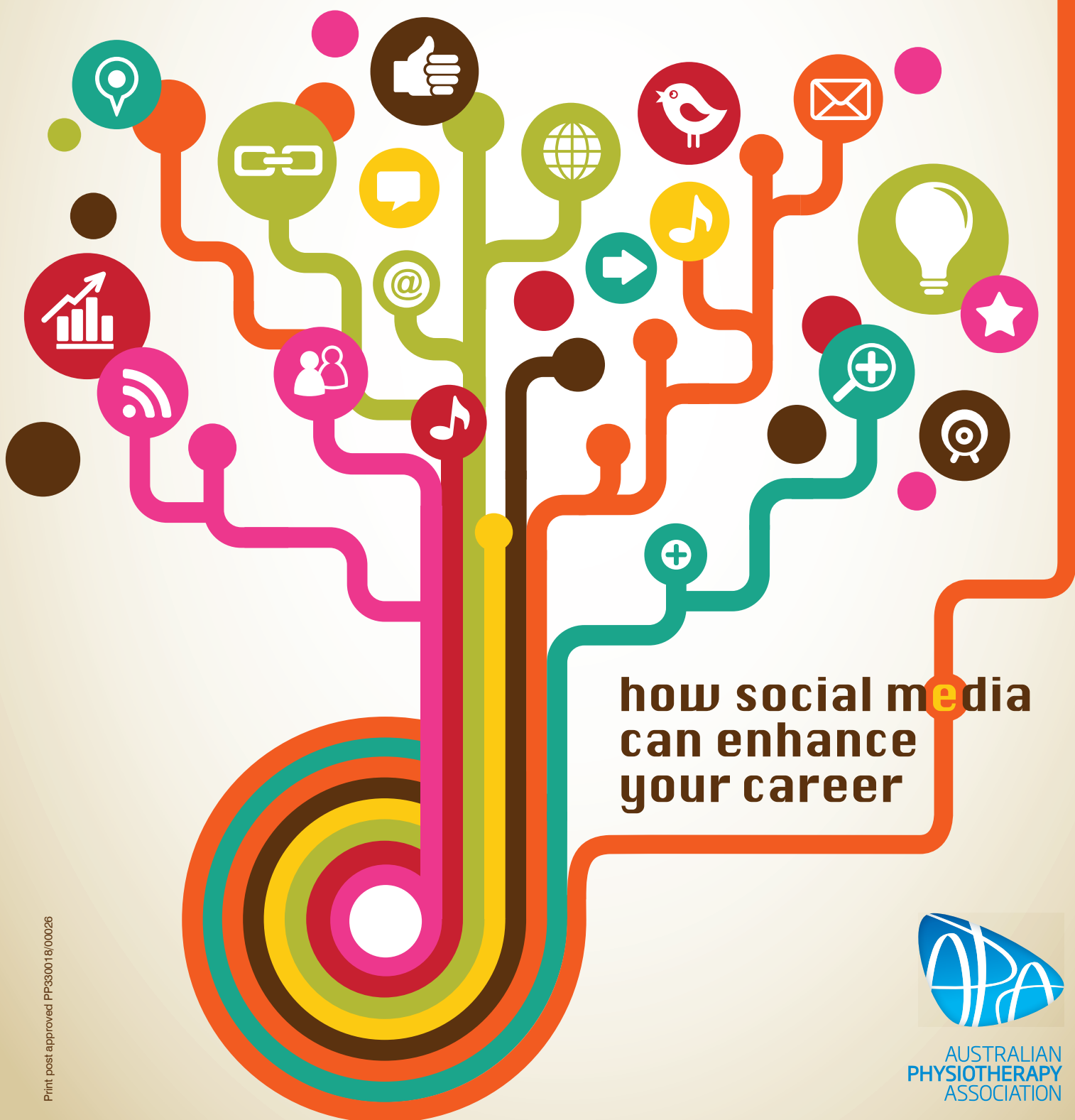


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SEPTEMBER 2011

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Why social media matters for physiotherapists

By Erik Froese

The value of social media is not an easy sell to physiotherapists. Maybe the objections to networking platforms like [Facebook](#), [Google+](#) and [Twitter](#) are running through your head right now: not enough time; don't work on a computer; it's just for kids; don't see the point.

If that's your view, it's time for a reassessment. Social media is on its way to [surpassing email](#) as the primary vehicle for online communication. More to the point, it offers valuable opportunities to grow as a physiotherapist, connect with your profession and influence the direction of healthcare.

'For individual clinicians, it's quite hard to know how to use social media because they don't necessarily want patients contacting them on Facebook for advice and that sort of thing,' says digital strategist [Heidi Allen](#), who had 15 years' experience working for healthcare publishers like Radcliffe Medical Press and Elsevier before taking her career online.

'It can be difficult for them unless they have a strategy in mind.'

The strategy that Allen is referring to is basically just the product of your professional goals: what do you want for your career and how can social media help?

Here are eight common physiotherapy-related goals, and examples of how social media can be used to achieve them.

Become a better clinician

One of the websites Allen manages is BodyInMind.com.au, a research-orientated site focused on chronic pain. It is run by respected physiotherapy researcher (and APA member) [Lorimer Moseley](#).

‘Body In Mind has a community of clinicians that are talking about what they’re doing, different treatments and research,’ says Allen. ‘So it provides a forum and a clinical setting that is really quite healthy.’

Body In Mind is social media at its simplest. It’s basically a bunch of posts from credible and knowledgeable healthcare researchers, which can then be commented on by readers (and shared on other social media platforms like [Facebook](#) and [Twitter](#)). Body In Mind is one step up from a static webpage, but it’s a good example of how social media can be an effective and straightforward collaborative learning tool when utilised by people with expertise and a common interest. By participating you can gain clinical knowledge; because it’s a two-way communication tool, you can direct the conversation towards the knowledge you’re interested in.

Contribute to the body of physiotherapy knowledge

A more sophisticated way that social media has been harnessed to provide clinicians with knowledge is Physio-pedia.com. Physiopedia is a collection of webpages that can be edited by physiotherapists and physiotherapy students. The site provides information about evidence, treatment, anatomy, resources—anything a physiotherapist could find useful in their work—but often focuses on particular conditions or parts of the body.

The power of websites like Physiopedia (which is built on the Wikipedia.com template, a collaborative online encyclopaedia and one of the most popular websites in the world) is that they are living documents—they can be updated instantaneously and if you have the desire and knowledge, you can influence what is being communicated. Contributor guidelines, policies and moderators work to ensure that content is as balanced and accurate as possible. Importantly, contributors are asked to cite original sources and when they don’t, the site will highlight to readers that the sources are missing, which encourages participants to either find the sources or change the content.

Admittedly, some Physiopedia content is imperfect. However, an argument could be made that participating in the correction of those flaws is more useful than many forms of traditional learning.

What is social media?

There are about as many definitions of social media as there are users of social media (which, when you consider that there are [750 million active Facebook](#) users, is a lot).

One of the simplest definitions comes from Wikipedia.com (which is, aptly, a form of social media itself): ‘The term Social Media refers to the use of web-based and mobile technologies to turn communication into an interactive dialogue’. In other words, unlike a static webpage, social media is a two-way street.

Examples of popular social media platforms can be found in ‘Social media starter kit’ on page 31.

Many social media ‘coaches’ like to get warm and fuzzy about couching social media in terms of conversations (often using ridiculous inventions of marketing jargon, such as ‘social media helps to storytise your brand!’). This narrow definition undermines the value of social media, because it makes it seem unserious and overly casual.

For the most part, social media is informal, but the seriousness or worth of the communication is dictated by the users, not the platform (although the platform can be limiting or enabling).

Influence healthcare conversations

Make professional connections

Mike Pascoe is an American physiologist and physical therapy instructor from the University of Colorado. Despite being busy and not working from a computer most of the day, Pascoe is an active social media user and an advocate of its value to physiotherapists. He presented on the subject at Regis University in June. (You can find a video based on that presentation, ‘[Social Media & Physical Therapy](#)’, by searching for it on the social media site [Vimeo.com](#).)

One of the main benefits Pascoe sees in using social media is its capacity to create professional relationships you wouldn’t otherwise have. ‘It’s mainly for networking,’ says Pascoe. ‘I’ve met some really great people through Twitter specifically, just by getting connected to them, whether [through a] Tweet that they sent about a particular conference or about a particular topic. And we’ve connected and now by sharing our conversations I have these people I can rely on.’

In his presentation, Pascoe uses an example of how following a particular conference hashtag—the thing that marks keywords that you can monitor on Twitter—he built a relationship with [The American College of Sports Medicine](#), which led to him building a demonstration video for them. In return, he was given a free membership to the association.

If your goal is to make professional connections through social media sites like Twitter (a micro blogging site: see ‘[Social media starter kit](#)’), the key is to be focused and a little ruthless in the way you use. Follow people or groups that you trust and who provide healthcare-specific information—journals, conferences, associations and researchers are good examples. Don’t allow yourself to be swamped by the flood of information on Twitter: immediately stop following individuals you don’t want to hear from.

Even if you don’t desire to get involved with social media, you need to be aware of three things:

1. persuasive conversations about healthcare are published online that will influence your profession
2. by not being a part of those conversations, you have no influence on them
3. the trend is that more healthcare-related communication will be done through social media in the future.

In February, a [Sydney Morning Herald](#) article warned of ‘catastrophic consequences’ because 80 per cent of Australians are using the internet to research health conditions and nearly half of those users are using it to make a self-diagnosis. The reasons for concern are obvious, but it seems equally clear that doomsaying will have little impact on public behaviour in this regard. The internet is just too convenient.

The other reason doomsaying doesn’t work is because whether we want to admit it or not, useful and accurate healthcare content exists on the internet (many scientific journals can be found online, for example); the problem is in finding it and interpreting it. Social media is a good tool for filtering and explaining information, especially if experts are involved—for instance, a few thousand Australian physiotherapists. Counterintuitively, social media can also be used to direct people away from Dr Google when they should be getting face-to-face care instead.

[Healthshare.com.au](#) is an example of how social media can be used by both healthcare practitioners and the general public to capitalise on a shared interest in health. Healthshare is an Australian site created exclusively for healthcare discourse that has clearly delineated sections: the public can ask questions to healthcare practitioners; healthcare practitioners and the public can create groups discussing specific ailments; and associations can engage healthcare practitioners about advocating for their profession. There’s even a directory where the public can look up practitioners in their area.

The advantage of a social media site like Healthshare over a static website (or even a book) is that the communication is collaborative. An individual can ask you a specific question about their health. In your response, you can also include questions, to clarify meaning. These interactions are not meant to replace actual treatment; because you’re the one doing the writing, you can say exactly that. You can even direct them to where they can get professional care.

Importantly, sites like Healthshare also provide a great opportunity to raise awareness about what physiotherapists do. Where else do you get access to a large, engaged audience eager to hear about your profession?

Get educated

To this point in its existence, social media has been primarily an informal way of communicating, but there is nothing inherent about it that requires it to stay unstructured. Education might be one of the places where social media can be integrated into a formal program and make an instant difference.

A 2010 American study titled '[The effect of Twitter on college student engagement and grades](#)' divided 175 pre-health professional students into two groups. One group went through the course in the traditional way, with no social media component. The other group had Twitter formally integrated into the program. When engagement and grades were measured at the end of the course, the group using Twitter were significantly ahead of the control group in both areas.

Closer to home, the [Australian College of Physiotherapists](#) started using a program six months ago called [PebblePad](#), which is a web-based e-portfolio designed for learning. 'It's a system where the candidates can record their activities, but they can also use it to share information and start discussion forums on various topics,' says Specialist Musculoskeletal Physiotherapist [Darren Beales](#).

Beales is a training facilitator for the specialisation program. He says PebblePad is particularly useful because candidates are often located in different geographical regions. They can use PebblePad as a repository of their learning, but also start conversations about subject matter with facilitators or other candidates that are hundreds of kilometres away. 'From the uptake that we've had, there's been some really good, interesting, thorough discussions of topics on there,' says Beales.

Promote better health among the public

One assumption that some healthcare practitioners make is that social media is only useful in the private setting. However, you don't have to be selling something to find value online. Even large public health institutions are now using social media to convey the messages that they think are important.

[Alfred Health](#), Victoria's main provider of health services, uses [Twitter](#) to raise awareness about health checks, to share inspiring stories of patient survival or to discuss infectious disease risks, among other things. On [their Facebook page](#), a staff member has commented on the negative impact of drink driving and a patient thanked hospital staff for helping a loved one.

Physiotherapists with a very specific interest area can particularly benefit from sharing their message and connecting with patients and other practitioners through social media.

Peer review research

Sell your services

The most direct thing social media can do to help your career is get you a job or, if you own your own business, make you money.

If you're an individual interested in work opportunities, getting engaged on a business-related networking site such as [LinkedIn](#) provides a place for you to find and interact with potential employers. There's also a good chance that when your name is typed into a search engine, your LinkedIn account will show up, meaning you get to control some of your professional online presence.

If you run a private practice, social media offers an endless number of opportunities to promote your business. Like any other business activity, the trick is in constructing a strategy and measuring whether the work is worth the reward, because you could spend a lifetime trolling Twitter and Facebook for clients.

In January, an article titled '[Trial by Twitter](#)' was published in the journal *Nature*. The article describes how 'Papers are increasingly being taken apart in blogs, on Twitter and on other social media within hours rather than years, and in public, rather than at small conferences or in private conversation.'

For many researchers, this trend is unwelcome because it can feel like an uncontrollable attack. To others it's a way to get instant feedback and weed out poor research before it has the chance to influence policy or the mainstream media. Whatever the case, researchers who do not participate in social media have a reduced capacity for right of reply.

In July, *The Lancet* published an [article by Glazener et al](#) that stated, 'in settings where information about pelvic-floor exercise is widely available, one-to-one conservative physical therapy (continence physio or nurse) for men who are incontinent after prostate surgery is unlikely to be effective or cost effective'. After examination, a few prominent APA members raised objections about the efficacy of the training protocol and therefore the conclusion of the research. These critics then prepared to write a traditional letter to the editor.

In the meantime, because *The Lancet* has a strong social media presence, more than 18 000 [Twitter followers](#) have potentially been alerted to the Glazener article and a [podcast featuring the lead](#) author was published and disseminated online. As the critics of the paper prepared their formal rebuttal, the original article was being re-tweeted (basically, forwarded to other people) and written about by the mainstream media. The letter to the editor still hadn't been published in *The Lancet* a month and a half later.

A proper, referenced response is still an important way to make a point, but by not raising concerns online, the critics of the Glazener article missed an opportunity to influence the conversation about the effectiveness of pelvic floor exercise as it was happening in real time and in public.

Compare that to the response received by a [Science paper](#) claiming to have identified a set of genes that can predict life expectancy. Concerns were raised about this paper (as described in 'Trial by Twitter') in blogs the day it appeared. One week later, the paper's authors made a public statement saying they had been made aware of a technical error and that they were 'closely re-examining the analysis'.

'When some of these things sit around in the scientific literature for a long time, they can do damage: they can influence whole fields,' David Goldstein, the director of Duke University's Center for Human Genome Variation, is quoted as saying in 'Trial by Twitter'.