Walking among giants
Marketing dentistry in the global connected economy
By Chris Barrow, UK

In an information-rich world, the wealth of information means a dearth of something else: a scarcity of whatever it is that information consumes. What information consumes is rather obvious: it consumes the attention of its recipients. Hence a wealth of information creates a poverty of attention. Hence a wealth of information means a poverty of attention. Hence a wealth of information.

The connected economy and growth in population have created statistics that are beyond our comprehension. There were 60 trillion websites at the last count and every year the Internet grows by eight million new songs, two million new books, 16,000 new films, 30 billion blog posts and 182 billion Tweets. Google handles 33 billion e-mails every day alone, and 1.8 billion photographs are uploaded to the Cloud from everywhere around the globe. I speculate as to how many of those photographs are of happy, smiling faces.

IBM tells us that we are “a world awash in data,” 80 % of which is currently invisible to our computers; however, with the IBM Watson project, the company intends to use cognitive computing to bring that data into a usable domain. With global health care data expected to grow by 99 % in the next 12 months, the search is on to find a new unified theory that will bring all of this information to the fingertips of government, business and individuals.

The question is, can we cope with this? In his book Homo Deus: A Brief History of Tomorrow, Israeli author Prof. Yuval Noah Harari visualises a completely connected world in which “Data-ism” dominates. There he writes: “Sapiens evolved in the savannah thousands of years ago and their algorithms are not built to handle 21st Century data flows. We might try to upgrade the human data-processing system, but this may not be enough. The Internet-of-Things may create such huge and rapid data flows that even upgraded human algorithms won’t handle it. When cars replaced the horse-drawn carriage, we didn’t upgrade horses—we retired them. Perhaps it is time to do the same with Homo Sapiens.”

A rather grim and ominous suggestion perhaps, but by joining our sensibilities, Harari makes us pause for thought. Let us narrow our field of vision from these impossible numbers and facts. Pandita suggest that you and I are interrupted by advertising and brand exposures 3,000 times in an average day and mentally register around 350 of these. We note 50, think briefly about 80 and pause at 12 to think about whether they are relevant to us at this time. Thus, the challenge facing the dental marketer is how to become one of 12 out of 5,000 at the right time, on the right day, for the right person.

Big business has a simple solution to this problem; it is called big money. Whether it is a Super Bowl television commercial, a giant billboard on a motorway or, nowadays, massive expenditure on Internet visibility via paid media, those with the deepest pockets are the winners in the race to attract that poverty of attention. Whether it is a Super Bowl television commercial, a giant billboard on a motorway or, nowadays, massive expenditure on Internet visibility via paid media, those with the deepest pockets are the winners in the race to attract that poverty of attention.

1. Use good search engine optimisation (SEO) to optimise your position in Google’s organic search. SEO is a technical skill that has to be delivered by experts. Google changes its goalposts regularly and the savvy SEO guru will know that and take appropriate action quickly.

2. Massively encourage the collection of Google reviews, user reviews via Facebook and critic reviews via proprietary sites like WhatClinic.com, NHS Choices and Comparetheretreatment.com in the UK. In September 2016, Google changed the rules twice, first by including external reviews alongside its own in searches and second by altering its own search criteria to favour businesses with in excess of 100 Google reviews. It is necessary that your marketing activity be adjusted to reflect such changes.

3. Connect to your patients through a well-maintained social media channel like Facebook or Twitter (and deliver daily human interest content). Remember that those 1.8 billion photograph uploads per day include the average false share. Many of my clients now take

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7. Deal with initial enquiries directed through the Internet, by telephone or in person in a polished manner.

8. Create a memorable new patient experience from initial consultation all the way through to treatment delivery.

9. Employ a strict end-of-treatment protocol to capture reviews, testimonials and social connections (as well as plan membership).

I have given you nine marketing actions designed especially for the smaller business. Actions that should be avoided by the independent dental practice are seeking to gain attention by paying through the nose for Google or Facebook advertising, broadcasting non-human interest material or selling services on price, discount or special offer. This is because every week I hear from dentists and their marketing teams that advertising to strangers, using jargon and cutting prices at best attract nobody and at worst attract bargain-hunters, price-shoppers and moozers.

A wealth of information creates a poverty of attention.” We end where we began. The challenge is for the mouse to gain attention without competing with the herd of elephants. You can only do that by stepping away from the herd of elephants and delivering your story in a different way and a different place. For me, that means human interest, personal service and recommendation, and so when I am working with clients on their marketing plans, we focus on and mobilise their most valuable asset: the goodwill of their existing patients.

Chris Barrow is the founder of Coach Barrow consultancy practice. An active consultant, a trainer and a coach to the UK dental profession, he regularly contributes to the dental press, social media and online. Chris Barrow can be contacted at coachbarrow@me.com.