Thought Leadership is Transforming

The rise of Digital Opinion Leaders (DOL)

and they are making a difference!

Thought Leadership changed dramatically during the pandemic. Lockdowns and travel restrictions forced a new dynamic by which healthcare professionals networked and interacted. Research Gate has long been a steady platform used by many HCPs, however, the number of HCPs that moved actively to LinkedIn grew significantly during the pandemic. In our recent network profiling examples, LinkedIn has overtaken Research Gate to become the leading social media platform being used by HCPs. That dynamic is rapidly evolving and differences between generations, countries and different Medical Professions are becoming more apparent in the use of such platforms.

HCPs are branching out further and exploring other platforms for networking. We are seeing growth in use of Twitter, Facebook, Instagram and even TikTok. All being used professionally as opposed to personally, and for different purposes.

This rapid change is not slowing even though travel restrictions have eased globally. If anything, it continues to grow and complement traditional networking and congresses. With this rapid change, how do companies adapt to meet their key customers in an area they are operating prolifically? The term for this group are Digital Opinion Leaders (DOLs). As a group they are growing and rising far more rapidly than traditional Thought Leaders. They have the advantage of speed and breadth, they network beyond borders and time zones. Their message can reach recipients on the other side of the globe in an instant, and can be liked, reshared and commented on. They can even become positively viral.

A Digital Opinion Leader is still a mere term, title, or label. What needs to be understood, is the underlying motivation, which is often altruistic. What drives their behaviour, why are they (mostly unknowingly) a DOL. When did this process start and why. And what does this behaviour mean for them? These questions may enable insight into who they are and what their drivers are.

To gain a deeper understanding, Rock8 Science spent time with a Digital Opinion Leader to answer these questions.

We met with A. Prof. Dipti Talaulikar, a clinical and laboratory haematologist, who has created global impact through a university-led program called The Link

The LINK | ANU Medical School



Associate Professor. Dipti Talaulikar

Dipti is an experienced Clinical and Laboratory Haematologist. She is a well-known medical professional with fellowships of the Pathology (FRCPA) and Physician (FRACP) Colleges in Australia and a Doctor of Philosophy (Ph.D.) in Medicine from The Australian National University. She completed her MD in India from The MS University and DM from CMC, Vellore.

She is the program lead for The Link program which aims to connect people for collective learning and excellence in healthcare.

<u>Dipti Talaulikar I</u> <u>LinkedIn</u>

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Your profile indicates you are ranked quite highly as a DOL among your Haematology peers in Australia, how did this journey start?

This was something that was very organic. You may be surprised that it has been only 12 months or less since I opened a Facebook or Instagram account or started using my LinkedIn account actively. I learnt from a younger generation of students how it all worked and then how to find my way within each platform.'

What objective do you keep in mind when using social media?

The objective was not for my own profile, but for the <u>Australian National University (ANU) peer support program</u> that I started during the pandemic to support health professionals in India. My team which has several medical student volunteers thought of a different approach to reach a wider audience for our weekly webinar series on COVID-19 that aimed to counter misinformation and connect health professionals across the globe for collective learning. Using social media platforms, and word of mouth we built up a following and a community on FB/Insta/twitter/LI.

The key driver for me and my team was a passion to reach beyond borders to resource-limited settings – because the health of everyone person matters, no matter where in the world they may be.

My confidence has grown significantly over that time in using the different platforms. I choose to be authentic, fearless, and to always stand by my convictions, but also be empathetic and respectful when engaging with those who may not always agree with what you write.'

What has been the impact?

Education programs that focus locally do not have the same impact as when they are shared globally. To date our program has reached 2500 healthcare professionals across 38 countries.

'The international COVID-19 <u>webinar series</u> allowed health professionals to talk as peers and share experiences across different countries and continents. The ability to share crucial information, irrespective of where they were in the world was important.

We continue to harness these networks to provide peer support to health professionals, especially those who are part of minority groups. Through specific programs and through social media, we are in the process of creating a support community for women health professionals.

All of these things make a difference and have an impact.'

You profile other team members and students in your social media posts a lot – what is the thinking behind that?

'I have learnt a lot from and about the younger generation from the volunteers in my program – their concerns, their challenges and their aspirations. I am awed by their thinking and by their commitment to wider social issues. Supporting the new generation of doctors through social media with supportive posts on their achievements;



boosting their morale and confidence is something I have taken on as a mentor – and I really enjoy that!'

Writing a supportive post means more than being taken out for a coffee and a chat by your mentor, it is more tangible, it travels further, it reaches more people.

You are also seen as a high potential Haematologist for Pharma companies, did you know that?

'In cancer care we tend to work closely with industry i.e. Pharma. There is always the need to manage conflict of interest and many people may not agree but my experiences and those of many of my colleagues in Australia have been positive'.

What would you suggest to make these engagements more mutually beneficial?

You need to give thought and consideration as to how to build the relationship.

Keep the relationship patient focused- WRAP IT AROUND THE PATIENT FIRST in a meaningful way. Look for newer ways to benefit patients and the community and recognise that while there is a commercial interest for pharma, they are keen to fulfil their corporate social responsibility like all other big companies.

The path to the patient has always been through the doctor, e.g., patient education, patient support and empowerment through understanding etc.

When used for a civic purpose, the partnership can be a powerful thing that can benefit many.

Pharma has clout and funding; this can be useful for seed funding for projects for example to understand lymphoma patient wellness during the journey from diagnosis to survivorship. This can have an impact on where you put in additional resources to support patients. You can work with pharma to drive change – and the patient is the main beneficiary'.

I start from a point of optimism and believe that everyone who works in the healthcare industry has a streak of altruism in them – a sense of a greater purpose and responsibility. I like to harness that to deliver change.'

Your digital profile indicates you are more than just a Haematologist, you are actively driving change in other areas, can you tell us about your work to support girl education in India?

'Education can be so much more than a means to a job; it can uplift families and communities and allow people to make a greater contribution to society. It should not be only available to those who are privileged to afford it, we need grass roots change and hierarchy shifting.



My work with Pratham Australia has meant that staff specialists in Canberra Health Services have contributed funds through their medical education expenses to support education of girl children in India through the Second Chance Program.'

And you are creating educational modules to address healthcare in resource limited settings?

'Yes; while I am a Haematologist, through my work with ANU and The LINK, I am partnering with amazing specialists to create educational modules in other global health areas such as renal disease, maternal and child health, and mental health. We are currently running an international case study competition in frugal innovation to identify low-cost solutions to some of these global health issues.'

How can others support your work?

'My team and I are continually learning and growing. We are getting more volunteer HCPs wanting to contribute to LINK from all over the globe. We are growing our reach and making an impact; that impact needs to continue to grow. And we are not afraid to ask for help and support, it all makes a difference.'

The link for tax-deductible donations to our program are here: https://engage.anu.edu.au/giving/give-now?id=02964cd8-c87e-4e16-9fda-a5fcadbeed30.

Sponsorship packages are also available.

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Guest Contributor

Associate Professor Dipti Talaulikar

