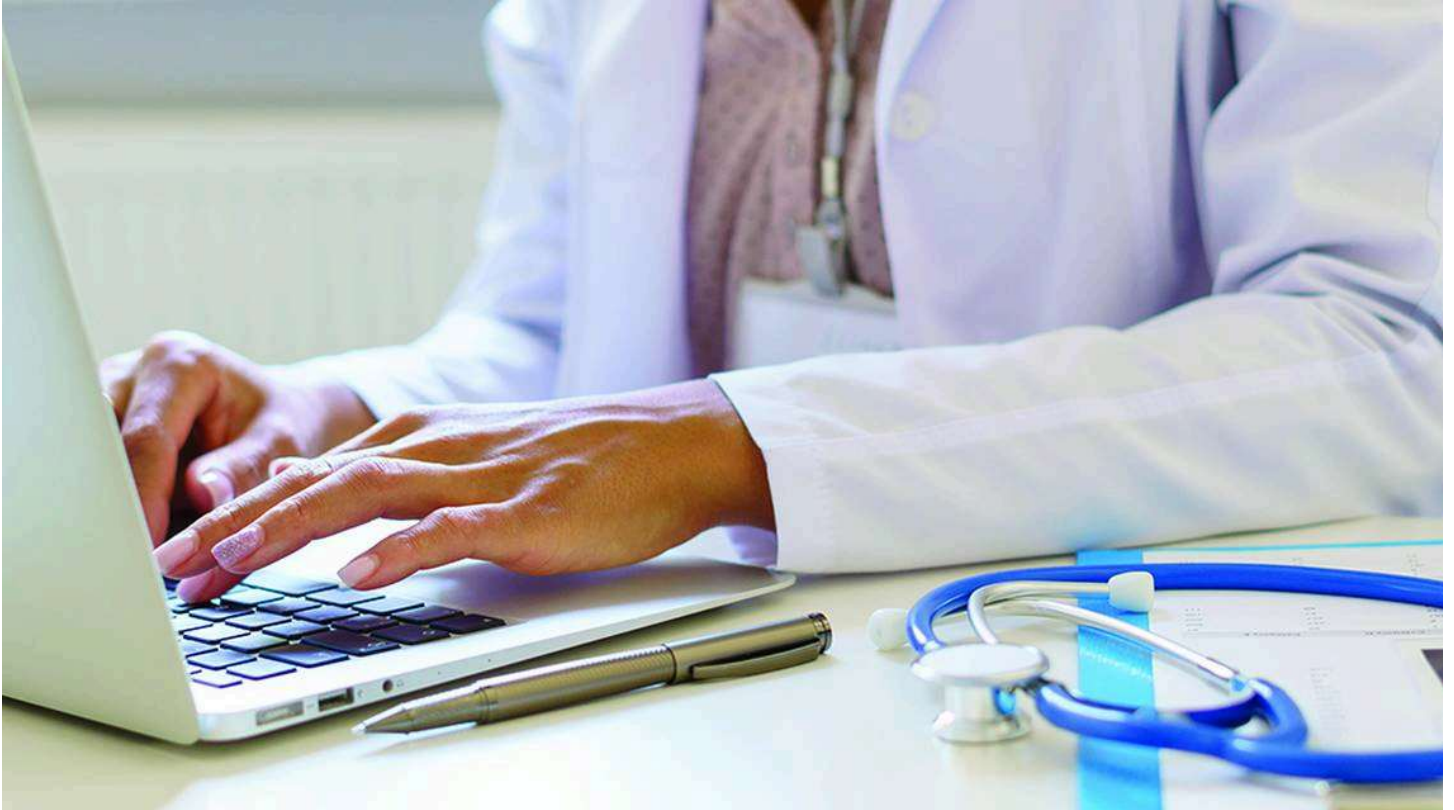


How to Ensure 'People-First' Content

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As members of the medical community, we have a strong sense of purpose and ethical responsibility to our patients and communities. Google's notion of "people-first content," accordingly, aligns well with our commitment to the greater good through our expertise in health care.

Google remains the go-to search engine and a household name. It has even spawned its own verb. There are quite literally hundreds of billions of pages and content within Google's index. Can you imagine sifting through even a tiny percentage of that information to find a local doctor that you can trust? This is where Google's automated rankings come into play. They do the sifting and sorting so no one else has to and, in theory, present the most relevant and helpful results in a fraction of a second.

The algorithms that power such lightning-fast search results account for several different factors when returning certain content or pages to the user/searcher. These factors include:

The query itself (meaning and relevance)



The freshness of the content, which can vary depending on the nature of the query and search (for instance, “newsy” content regarding hot topics in laser treatments or fillers vs. “evergreen” topics related to basic skin care terms or definitions that remain largely unchanged)

- Location, context, and settings
- Usability of pages (such as mobile navigation and optimization)
- Overall quality of content

How well an online page achieves its goal—ie, page quality—is closely tied to the notion that algorithms prioritize people-first content. Once the content has been successfully vetted for relevance, the “machines” dive deeper. They reward those pages and content that are most helpful to the searcher (in our case, healthcare consumer). Quality content largely conveys considerable experience, expertise, authority, and trust—what Google summarizes as E-E-A-T. This approach to content appears to put the public and those individuals it is communicating to before anything else, which is a stark contrast to “search-engine-first” pages and content. The latter approach prioritizes employing certain tactics to rank higher in the search results to potentially outwit the search engines or machine learning/algorithms.

Assessing for People-first Content

To favorably propel online rankings, the first step toward knowing if your website pages and other communications align with this notion to favorably propel you forward in the rankings is understanding your core audience. The ideal, quality community or patient base can change over time as your practice grows, acquires new skillsets and talent, and even pivots in its focus toward certain services or interests. Ask yourself, “Is this the type of information that I would provide to my patients at my office?” Furthermore, you should be able to confidently answer the question, “How does this information help the reader?”

Beyond these basic questions, it is important to assess how the content you provide on your website pages differs from what other dermatologists (especially competitor practices) offer on their sites. You want to be able to demonstrate and deliver a unique level of expertise. Give them something that they cannot find elsewhere. It is also not enough for you to communicate your training and education. It is critical to also convey the depth of expertise. Be sure to share any unique or advanced certifications, continuing education, and other ways you excel in given areas or with certain types of technologies and procedures.

Always try to put yourself in the patients’ shoes. Just in the past week alone, think of all of the motivations for individuals to visit you and to seek out your team’s expertise. Ensure that the information crafted and posted on your website aligns well with those goals and motivations for visiting you. Does it provide the breadth and depth of content that would result in a would-be patient feeling like they had enough insights to potentially reach their goals by partnering with you? Also, does the content further confound or confuse the prospective patient by, perhaps, needlessly dropping technical terms without proper (or colloquial) explanations for said terminology?

Don’t Overdo It

Depending on how well you follow the above recommendations, your pages and content may be well-positioned to rank well and garner quality patients, depending on how you answer. Or it might languish with poor or stagnant rankings that do nothing to help potential new patients find you. Additional elements of patient-first content that further contribute favorably to E-E-A-T include:

- The integration of original research, study findings, and insights that provide unique value to readers
- Honest descriptions of the service, topic, or technology that are not overly or unnecessarily dramatic or misleading
- Consistent and proper style, spelling, and grammar
- Share-able content that would resonate with and be recommended by other practitioners.
- Content that clearly leverages your practice's clinical expertise
- The use of credible journals and research findings, which are also clearly cited (when leveraging external resources)
- Error-free information (eg, minor spelling errors or bigger factual errors that may be easily verified with simple searches and detract from your overall credibility and professionalism)

Taking an inventory of and evaluating your online content to ensure it adheres to the concepts outlined in the previous bullet points prevents common pitfalls associated with search engine first-page content. As previously noted, your content can fail to appear when tactics to rank higher backfire on you. Bots—and savvy health care consumers—can detect certain “flags” in your content and affect your search engine optimization. The following are potential triggers and signs that you need to revise your online content to be more patient- or stakeholder-centric:

- Mass-production of content on a variety of different dermatology-related topics and treatments, some of which may be outside of your office's scope
- Empty and unnecessary refreshes of content unless there really is something new to be told about the technique or technology
- Risky and potentially manipulative changing of dates to old posts or only minimally altering content
- Over-reliance on summarizing other professionals' and practices' content

You put your patients first at the office. Now, put those patients and the public first online or in your digital space. Assess. Align. Adjust or overhaul as needed.

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Overview

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