Privacy has lost its "cool factor"…

Neil Seeman

According to the Talmud, there are two times you're allowed to boast: when courting a potential spouse, or when looking for a job. In the current recession, many people are searching for a job, and so put their best résumé forward for everyone to see. Scanning the world of healthcare résumés posted freely on social networks such as Linkedin reveals a trend: privacy is out, "publicness" is hot.

As of the time of writing, Linkedin – the leading business professionals' network online – included the résumés of 653 people working in the "hospital and healthcare sector" who described themselves as privacy professionals. More than twice as many (1,559) described themselves as patient advocates. The largest professionals' discussion forum dealing with privacy had 867 members; the largest "health 2.0" discussion forum (of which there are many) had 4,888.

A limitation on my analysis: by definition, the very people who use Linkedin to look for employment or to connect with other professionals in their field – 35 million registered users and growing – are people who believe in what author Jeff Jarvis calls "publicness".

Web 2.0 means social collaboration on the Web. Most "health 2.0" enthusiasts embrace "publicness." "Publicness" is the new ethic of transparency in all things. Social networking sites such as Facebook, Linkedin, Twitter and MySpace trade off people's growing willingness to disclose details about their personal lives, accomplishments…and their failures. Twitter, the fastest-growing Web phenomenon, is completely open source. Every entry is searchable on Google.

Contrary to popular myth, the ethic of publicness is much less about vanity than about a fundamental belief that "letting it all hang out" is a value system to be admired. This is part generational (so-called "Generation G") and partly a function of our loss of faith in Wall Street and its culture of opaqueness. Even Swiss bankers are embracing publicness. Healthcare is not far behind. As the Wall Street Journal's L. Gordon Crovitz has written, "a right to privacy seems to be transforming into a duty to disclose. We can know more, so we expect to know more."

…it's about control

Health 2.0 websites such as patientslikeme – which boasts a heavy contingent of Canadian users – allow members to share treatment and symptom information in real-time in order to monitor and to learn from real-world outcomes. As of March 2009, there were reportedly more than 11,000 users with multiple sclerosis, 8,000 with mood disorders, 3,500 with amyotrophic lateral sclerosis, 3,000 with Parkinson's disease, and 2,000 users of the site with HIV.

As Jarvis writes in [What Would Google Do?](#), "Privacy is not the issue. Control is. We need control of our personal information, whether it is made public and to whom, and how it is used." Patients who "let it all hang out" on [patientslikeme](#) – name, age, location, symptoms – care more about controlling how their information gets used than about whether fellow sufferers can access it.

The same is true for job-seekers. In the old world, the perfect candidate for the CEO's office – or for the entry-level position – was someone with an unblemished past. Today, the perfect candidate is someone who has disclosed his or her past missteps online. The superstar healthcare employees of today still boast about their accomplishments, but also about how they have learned from failure and humility.

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