

0080 Stuckness in Marketing

You're listening to the Abundant Practice Podcast. Where we work through the stuck places folks hit while building their private practices. Each week we dive into a practice building through different lenses. You'll get trainings, listen in on mini-consultations and conversations with other consultants. Each month there is a niche deep dive where we flush out a niche from a marketing perspective. Plus every now and then we throw in a "Where are they now" episode, and check in on the clinicians who were on before to see how the advice played out. When relevant, the show notes will include a worksheet for you to bring the content into your practice or life. Because I love you listening, but I want you to take action, too.

This podcast is sponsored by the Abundance Party, where for only \$39 a month you get courses on honing your niche and marketing your practice, scripts for the business side of things, monthly trainings, a chance for a one on one with me, and a much more intimate Facebook group. Where I currently respond to every post. You can check that out at Abundanceparty.com. Alright, onto the show.

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Guys, I'm here with Tracy Rodriguez-Miller. You can check her out at manspacecounseling.com. Tracy, how can I help?

Tracy: I'm just starting the practice. I've done the website. [broken audio 1:40.4] All that good stuff. But, I'm almost wondering, I'm kind of stuck on stupid I guess? Wondering if this is the niche I should be doing, because then I have other ideas. And I'm wondering if I should, before I actually get into it real deep, whether I should go with the other idea. So, I'm kind of going back and forth. And I don't know if I'm just keeping myself stuck.

Allison: Got it. Is that a pattern you have in life?

Tracy: Probably.

Allison: ok. So, this is good to know. That it could just be you doing life the way you do life. And its leaking into your practice. Which is...you know.... that's how we all work. So, lets talk about the different options. Can you kind of flesh out the current niche and then we'll look at the other options?

Tracy: Ok. So right now, my niche is male survivors of childhood sexual trauma. A strictly online practice. And the focus is more on the sexual issues that occur because I have my PhD in Clinical Sexology, so I kind of wanted to bring that into it.

Allison: Yeah.

Tracy: So, focus on those sexual issues that occur. As well as addiction that happens. You know, all those things that kind of fall into play with that type of trauma.

Allison: Awesome. What's making that feel like it might not be the thing? And that these options are options?

Tracy: You know, there's nothing saying this might not be the thing. But I like the options, too.

Allison: Got it. Got it. Okay.

Tracy: I did the EMDR training. Got trained in that. Then, I started thinking about the possibility of doing an online EMDR, focus on that type of practice. I still would be doing that with the guys I've been working on, because it is trauma. But then I was thinking, well maybe my niche should be EMDR and it being an online practice for EMDR. So, I don't know. That's where I am at.

Allison: Ok. Well, if you had come and said to me, okay, well I've chosen my niche. Its online therapy with EMDR. I would have said, we need to niche more. So, I think it could be that you initial plus this other niche, might be your niche. Right? Because from a client perspective, while there are some people looking for EMDR, and there are some people looking for online, that's not their pain point. But some of the sexual issues that come up. Some of the addiction issues that come up. Because they've been through this hard thing that they need some help sorting through, that's a pain point. So, I think if you were to continue with your population, and you already have online on there and you put EMDR with it, too. That's a really great niche. That's really well defined. And I think there's also a certain level of safety that online provides trauma survivors. In a way that might get their foot in the door sooner, then if it was in person. Like ultimately, I think its all staying to the end, hopefully. But it really helps it feel less daunting to start seeing someone if they can do it not in person.

Tracy: Right. Right now, my website is focused on the man and the childhood sexual trauma and all that. And by the way, I do EMDR. And that it is an online practice. So how would I pinpoint it where people would look for me for that? The EMDR or the man with childhood sexual trauma?

Allison: Well I think, ultimately, most people don't care how the sausage gets made, they just want to feel better. So EMDR is one of the few modalities people might seek out. So, I think you maybe could even have a page called EMDR. And that might pop for some search engines and things like that as well. But to talk about, instead of it being this boring description of what EMDR is, too, instead, talk about what EMDR does for clients. Like, the things it might save them from, so to speak, from other modalities that might feel more doable for them. The rapid change that people can experience with the EMDR. Most people aren't going to read it anyway. But, people are not going to read to the end if we try to explain EMDR in the terms we're taught it in. They'll be like {snoring sounds}. So.

Tracy: Sure. Absolutely.

Allison: So yeah, creating so its really specific to your guys and their experience. So like EMDR can be helpful in processing the trauma and this is the impact it can have on your difficulty to maintain an erection. Or, this is how this can impact people that find that their drinking more than they needs to every single night. And that leads to XYZ.

Tracy: Okay. Alright. That makes sense. I don't even know how to start. I have a Psychology Today page. And I really haven't gotten anything from that. So, I'm sure it could be a lot of things. But, how would I even start marketing it? You know? Would I reach out to other therapists? Would I reach out to doctors? Something? I don't even know where to start as far as that's concerned.

Allison: okay. So, you've got your website. You've got a Psychology Today. What city are you in?

Tracy: North Miami Beach, Florida.

Allison: Okay. So, you're in a big sized city. It seems like the people who are like, man, Psychology Today is amazing! It filled my practice, are often in small cities. You just have a lot more competition in the scrolling part of Psychology Today. I mean, I would make sure if you're using it, you're optimizing it. Have you done the course in the Marketing Fundamentals Course about online listings?

Tracy: No.

Allison: So that would be a really good one to do. Laura Long teaches it. And she's brilliant. Like she basically lays out here's the structure to get those calls rolling in. so like. So, I'd tweak it that way. So, I would network with other therapists for sure. Are you able to call yourself a sex therapist?

Allison: Okay. Good. So, like there are so few sex therapists, period. That to be able to market that, and to be a sex therapist with the emphasis on trauma for men, people aren't going to be greedy. They are going to want you to see all their clients. So, if you [inaudible 8:16.5]

Tracy: You're really good!

Allison: Yeah, out there right now, I promise you there are therapists trying to find someone for these people who are calling their office, that they might not feel competent to treat. So, your niche is really underserved. Partly, because they are not coming to therapy in droves. And partly because they've got big deal things going on that not all of us, as therapists, are trained in. So, you are doing the whole community a service by getting out there and working with other clinicians. And I would say primary care docs and neurologists could be really great folks to network with, too. As well as psychiatrists.

Tracy: Okay. Yeah, I was concerned because men have a tendency not to go to therapy. Not to seek it out as much. So, I was concerned about that. Whether I'm going to be able to bring in clients. And I'm also private pay, only. So, I didn't know if I was pigeon-holing myself by just focusing on those things. And where am I going to find clients if, yeah.

Allison: Right. But focusing on those things is what allows you to be private pay. Because if you were like, I work with everyone. People are going to go with this person that takes my insurance. But if I specialize in the things you are struggling with, that you are afraid to talk to people about and you want to get the right person that knows what's going on, instead of some rando, you're setting them up for success in therapy, ultimately.

Tracy: Right.

Allison: So yeah, that very intense niching is really powerful. I think there may be some people that you network with who don't get the online counseling thing. And so, that might come up and you can just kind of sell them on what its actually like. Because I do online counseling, too and its great. I don't [both talking 10.09] with my in-person people. They are my online people.

Tracy: So I was thinking, because I'm licensed in Florida, I'm also licensed in Georgia. I haven't marketed anything towards Georgia yet. I don't even have the Psychology Today in Georgia, because I would have to do another one. But, hopefully, get to the place where my ultimate dream, get to the place where I can one, work with individuals in Georgia. But, two, maybe do a group type practice, and find therapists in all different states, that would focus on this particular niche.

Allison: So, you're an empire builder. I get it.

Tracy: Right. But, you know, I have to start with me first.

Allison: Absolutely. Yeah. And once you kind of figure out your formula for getting clients in, it won't be hard to fill other people's practices, too right? I would definitely reach out to other sex therapists, because there aren't a ton of them. Like just getting all the sex therapists on the list in Florida and Georgia. And shooting them emails to see if they want to do a skype date. That way, when they are full, they got someone to refer to. Because of a lot of them will be full. And a lot of them are looking for competent people. Because there aren't just sex therapists out there.

Tracy: Yeah. That's a good idea. Okay. I can do that. I can definitely do that.

Okay, so the web page. I guess tweaking that a little bit, because I don't necessarily, like I said, focus on the EMDR or necessarily the online. I do put there its an online practice. But the focus, the majority of the focus is on the men. Should that be tweaked in any way?

Allison: I think that focusing on the men is the right pass. And then, there might be some questions about like, wait, how does online therapy even work? So, making sure that, do you have an FAQ page?

Tracy: Yeah.

Allison: Ok. Good.

Tracy: Actually, my FAQ page, that's what it focuses on. Answering those types of questions. Regarding the online counseling. Not necessarily the other stuff. It focuses on that. And then not taking insurance. But other than that, yeah. So, you say doing a page or a tab on EMDR, how it affects, the impact for men, right?

Allison: Yeah. I would just look at every single paragraph of your website. Whether it's the EMDR or the FAQ's or the home page. Like, do they care about this? Because sometimes we get caught up in, oh, this is a really cool modality. Or something like that. But they really, usually don't care. So, making sure that they care about it. I find, too, that the longer we're in grad school, and since you have your doctorate, like the longer we are in grad school, the more natural that academic writing seems to feel. And we have to deprogram ourselves, basically, and we talk about it. So, making sure that its written in a way that feels really accessible and really easy to read for folks. And making sure the images you have on your website are of your people. Who you love to see. So, and then living their best lives. Not sad or lonely.

Tracy: Not sad. Right! Okay, then, my stuckness. Moving past being stuck. And it's almost like I continue to look for, what else do I need to do? You know?

Allison: So, like spending the time adding things to the list instead of crossing things off the list?

Tracy: Yeah! Because its daunting. It's a lot. And I want to be at a place, I work full time. So, I want to be at a place where I can transition out of that. To move forward.

Allison: Yeah. So, what's the fear, if you really give it your all, and you just start crossing things off the list. Imperfectly, and a little bit messy, and all of it, and you just cross the things off the list? What's the fear?

Tracy: I think the fear has been that I won't find the clients. That I won't be able to find the clients and I won't be able to sustain a full practice without having another job.

Allison: Right. Which is exactly, so your fear is exactly where you are right now. But haven't tried.

Tracy: OH nice. Yeah. Thanks!

Allison: [unknown 14:40.9] or anything. But, you are living your greatest fear right now around this practice. So, to that end, I wonder if there's a way of making it feel lighter? Maybe more playful? Or maybe if you love data, finding some data gateway to do it? So that you're moving forward and you're tracking progress, and maybe tracking progress that's not necessarily client hours per week. Or revenue but looking at when do I get to give notice at this full-time job. Like, what percentage of the way there am I? And how is it feeling to do this therapy that I've been wanting to do? This dream that I've had, how does it feel to finish a session? And, schedule for the next one. And hang up and go, hey, look, I'm cozy, in my own house.

Tracy: Ya! Absolutely. Okay I guess its just a matter of doing it. Its just a matter of doing it. Okay. Then, the next question, since you mentioned revenue. You know, I do have the cost on my website. I didn't necessarily look at other people's websites and check what they made. I kind of looked at what I needed to make.

Allison: Good! Perfect!

Tracy: So, it may be higher than some other people, but not everybody. And I think I'm okay with that. It's a matter of talking to people when they call. And selling that.

Allison: Yeah.

Tracy: Letting them know that as far as no insurance, I know that I have on the Frequently asked questions and all that, but actually having the conversations a little different.

Allison: Absolutely.

Tracy: I know people have a tendency of wanting to go to their insurance. For going about that.

Allison: Well, first let's talk about your fee. Because the fact that you created it based on what you need, is exactly right. So often, I talk to people who are like, well I just chose what's average in my area. But average in your area is not necessarily what you need for sustainability in this field, right? Because we can't work one million hours. And keep doing it.

Tracy: Right. Exactly. Yeah.

Allison: So, figuring out what is sustainable is awesome. And, the good news is you don't have to convince or sell anybody. I know it doesn't sound like that, I mean, doesn't feel like that. But you are able to take that off. And if you just shove that away, its going to take a lot of the pressure off you. Because ultimately, if you were the best in the world at what you did, the same people might be calling. And right now, because you're like, I'm new to private practice, I don't know, you might feel a little weird and cagey when you are talking to them and trying to justify your fee in some way. Either internally or verbally. So, if you are the best in the world at what you did, you'll be like, yeah, my fee is X.

Tracy: And that's it.

Allison: yeah. And does that work for you? And one thing I say to my folks is, I start off working with people weekly. And that's a really important part of people making progress, because my client population, like clinically, that's what's usually necessary. So, I let them know that, so they don't come back with, oh, I can only do that every other week. Because if they can only do that every other week, I would much rather send them to somebody else. So that they can get the weekly help that they need. So, it might mean that some people are like ugh, but you're in Miami. There is plenty of money in Miami.

Tracy: Yeah.

Allison: So, if somebody is at that perfect vin diagram part of feeling ready to work on this, and has the money for it, and they are perfectly within your ideal client population and they found you, I mean, they are going to choose you. Over somebody who's like, I like working with people who are depressed and anxious, or bipolar or eating disorder, or substance abuse.

Tracy: Right. Right.

Allison: They are going to be like, we need you. So, I think its standing in your confidence, your power, your knowledge that what you provide is valuable. And knowing that probably 30% of the people who

call you will convert to clients. And that's not about you. That's United State's wide percentage for private pay. And you might get more than that in Miami. I don't know. But that's what's showing up. So, if you get 30%, you're on a great track. And if you don't, its also tweaking it, so like going in the What to Say When course. And we've got scripts and templates for that first phone call. And that way, sometimes just having it printed out or having it pulled up when you're calling someone back, or when the phone rings, can make it feel like, its like a nice crutch, you know?

Tracy: Okay, alright. I think there's movement in my head.

Allison: Good.

Tracy: Okay. So, I can work on putting these things in place. And hopefully go to a place where I want to be.

Allison: Awesome. Good.

Tracy: Let's see, anything else before you leave me?

Allison: And I'm in the Party Facebook Group, too. So, I'm never really gone.

Tracy: That's true, that's true! I guess, just the marketing piece which we talked about. I think that's the major piece. And even with the Psychology Today, you know, you have to put in zip codes. So, thinking to myself, okay if I'm doing online, I don't want to keep just Miami.

Allison: Yep. Do West Palm Beach, you could....

Tracy: That's kind of what I did. I did West Palm Beach, Key West, and then, Miami.

Allison: Yeah.

Tracy: To kind of spread it out. So, I put a zip code of each, to see how that works. So, okay, so that, I guess I did that okay, then.

Allison: Yeah. I think its wise to hit the zip codes that are probably have the highest income. Because then, more of the people calling you will be able to afford you. And if and when you choose to do another Psychology Today of Georgia, do the same thing there.

Tracy: Same thing, yeah. Absolutely. Okay. Awesome. Thank you so much. You're great!

Allison: Well, thank you, so are you!

Tracy: Thank you.

Allison: Awesome. Well, keep us updated and let us know in the party, how it's going.

Tracy: Absolutely.

Allison: Definitely let us know how you are getting unstuck. And what showed up. Because that's always fun stuff.

Tracy: Its usually fun when it's somebody else.

Allison: Right. Agreed!

Tracy: Alright. Thank you very much. I appreciate it.

Allison: Sure. Take care.

Tracy: Take care. Bye.

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