Seventh Freelance Business Survey:
The freelance landscape 2018–2023

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Abstract

The freelance medical writing landscape has evolved in recent years, with more market demand for competent medical writers who can work on a project basis. In January 2023, the European Medical Writers Association's (EMWA) Freelance Business Group launched the 7th EMWA Freelance Business Survey (FBS), with the aim of analysing current trends in freelancing. Our analysis includes previously unpublished data from the 6th EMWA FBS to report changing behaviours in freelancing from 2018 to 2023. The 2023 FBS had a total of 223 respondents, more than in 2018 ($n=142$), most of whom were generally younger and less experienced (<5 years). Hourly rates charged were on average higher than those reported by respondents in 2018. Median hourly rates across all services provided was €82.2 and increased with years of experience. Networking and business advertising saw a decline in 2023, and word of mouth was considered the greatest influencer in gaining new business. Professional development efforts have taken a shift to personal research and online courses. Data presented here highlights the most current predominantly European trends in freelance medical writing.

Introduction

The freelance medical writing environment has been and still is an attractive employment opportunity for current and aspiring medical writers. Market demand for freelance medical writers reportedly increased by 50% during the COVID-19 pandemic and continues to grow, along with the global market for medical writing.[1,2] The ways in which both medical experts and the public access medical and scientific information have changed with more information being available online, especially through social media channels. Consequently, pharmaceutical marketing strategies have been modified to embrace the opportunity to directly communicate with consumers. They have also responded to global political pressure and economic support, investing in research and development for innovation and clinical studies, all in an environment with an abundance of new regulations (especially in Europe).

Investigating, reporting, and communicating health information to both a broad non-professional/non-expert audience, as well as healthcare professionals, demands writers with the skills to interpret and communicate health-related knowledge in both plain and technical/professional language.[3]

Understanding how and where freelance medical writers operate, what services they offer and how much freelancers charge for those services, and how ongoing education, work-related stress, business issues, and personal growth are managed can provide a shared knowledge that can be translated into improved business performance. In 2003, EMWA launched its first Freelance Business Survey (FBS),[4] which was followed by subsequent surveys in 2007,[5] 2010,[6] 2012,[7] 2015[8] and 2018. In January 2023, the 7th EMWA FBS was launched. This article analyses the results of the 2023 7th EMWA FBS and compares data of the 2018–2019 6th EMWA FBS (data was unpublished) to identify freelancing trends over the last 5 years.

Methods

Study design and procedure

In both 2018 and 2023, an online questionnaire was designed by the Freelance Business Group Committee members. EMWA distributed the survey details and access link to all its subscribers and announced the survey on its website and social media platforms. In addition, the authors posted the survey details to their professional networks via email or social media platforms. Email and social media posts clearly outlined the surveys' intention to collect pertinent information for an updated global view of freelance medical writing. The survey was open to all freelance medical writers and not restricted to EMWA members; the 2018 EMWA FBS was also sent to the American and Australian Medical Writing Associations for dissemination among their members.

A link to the online survey was included in all invitations. The survey was available online from January 13–31, 2023. The 6th EMWA FBS was open from December 19, 2018, to February 1, 2019. Voluntary participation in the current research was considered consent for research inclusion. Data was collected anonymously and treated according to the European Union's (EU) General Data Protection Regulations (GDPR 2016/679).

Surveys

Online surveys were developed in English and were distributed with the Survey Monkey platform in 2023, and Google forms in 2018, enabling secure and anonymous data collection (Survey Monkey, Google forms). In 2023, questions were developed based on the study conducted in 2018, and new questions were integrated based on COVID-19 post-pandemic work practice changes,[9] work-life balance,[10] and freelance medical writers' opinions and insights.

The surveys were designed to take less than 10 minutes to complete and were divided into six sections:

1. Demographics (2018 and 2023)
2. Work practices (2018 and 2023)
3. Pricing and payment practices (2018 and 2023)
4. Business practices (2018 and 2023)
5. Networking practices (2018 and 2023)
6. Wellbeing practices (2023 only)

There were 18 questions posed to the participants in 2018, which was increased to 35 in 2023. Most were developed with fixed

responses, but free-text and a mix of free-text/fixed responses were also employed. Fixed responses were devised according to common categories (such as age groups, employment type), Likert scales or all possible answers to a question the authors could think of, with a possible free-text option for "other" responses. Appendices 1 and 2 includes all the questions with the answer options for the online 2018 and 2023 surveys, respectively.

Data analysis

The responses were collected automatically and exported into a Microsoft Excel spreadsheet. Free-text responses (2023: questions 3, 8, 12, 13, 15, 30, 34, and 35) were retrospectively codified according to key themes. Some coded classifications were those with poor presentation (<5%), which were collected into larger groups for improved data interpretation, including age groups (<39, 40–49, 50–59, ≥60) and hours in a typical working week (<20, 20–40, >40). In addition, respondents were also classified as medical writers working in medical communications (MedComms), regulatory, or hybrid fields based on the types of documents delivered. As the age groups were different among the two surveys, percentage estimates based on percentage of answers in the 2018 age groups, were performed to enable comparisons. Average hourly rates were calculated for each respondent based on the mean of the hourly rates supplied per service type. Quantitative data analysis was performed with STATA® software version 17 (StataCorp LP, College Station, TX, USA). Frequencies were calculated considering all respondents (all omitted responses were noted), unless subgroups were considered, in which total n is specified. Mean and percentage frequency were used to express population characteristics. For quantitative variables, the Student's t-test (qualitative variables) and the Pearson Chi square test or the Fisher's test (in case of values <5 in the contingency) were employed. For quantitative variables, ANOVA one-way comparisons test was used to determine mean differences within groups. $P < 0.05$ was considered statistically significant.

Results

Respondents' characteristics

Compared to the 2018 survey, there were more respondents who accessed and answered the 2023 survey (n=223 vs n=142). In both surveys, almost 80% of the total sample were female and almost 80% were under 50 years old (2018, 59.8% and 2023, 62.3%). Less than 5 years of experience as a freelance medical writer was reported by 45.3% (2023 data only). Most respondents were from Europe (2018, 79.6% and 2023, 78.5%); around 30% were based in the United Kingdom in both 2018 and 2023. Compared to the 2018 data, the representation of German and French respondents fell in 2023, whilst the contribution from Italy and Portugal grew. Among the non-European nations, 2023 saw a dramatic increase in respondents based in India; the 2018 survey was sent to the American Medical Writers Association (AMWA) to be shared with their members, hence there was a greater representation from the United States in 2018 compared to 2023. In 2023, almost 67% described their occupational status as 100% (full-time), up from 63.8% in 2018, and most work between 20 and 40 hours per week. In 2023, only

Table 1. Demographic and basic business characteristics and habits of medical writer respondents to the 2018 and 2023 Freelance Business Surveys

	2023		2018	
	n =223	%	*n=142*	%
Gender				
Female	173	77.6	112	78.9
Male	45	20.2	29	20.4
Non binary	1	0.4	N/A	N/A
Prefer not to say	3	1.3	1	0.7
Age groups, *years*				
<39	68	30.5	31	21.8
40–49	71	31.8	54[a]	38.0
50–59	57	25.6	25[a]	17.6
≥60	24	10.8	23[a]	16.2
Prefer not to say	4	1.8	N/A	N/A
Freelancing experience, *years*				
<1	28	12.6	N/A	N/A
1–5	73	32.7	N/A	N/A
6–10	41	18.4	N/A	N/A
11–15	25	11.2	N/A	N/A
>15	29	13.0	N/A	N/A
No response	27	12.1	N/A	N/A
Base country				
European	**175**	**78.5**	**113**	**79.6**
United Kingdom	67	30.0	43	30.3
Germany	25	11.2	24	16.9
Italy	18	8.1	2	1.4
France	14	6.3	13	9.2
Portugal	12	5.4	3	2.1
Countries with <10 respondents (n=14 for 2023. n=12 for 2018)	39	17.5	29	20.4
Non-European	**46**	**20.6**	**28**	**19.7**
India	25	11.3	3	2.1
United States of America[b]	8	3.6	21	14.8
Countries with <10 respondents (n=10 in 2023, n=3 in 2018)	21		3	2.1
No response	2	0.9	1	0.7
Occupational status description				
Freelance (100%)	148	66.4	97	63.8
Freelance (hybrid)	38	17.0	46	33.1
Other (unspecified)	8	3.6	N/A	N/A
No response	29	13.0	0	0.0
Typical working week, *hours*				
<20	54	24.2	N/A	N/A
20–40	117	52.5	N/A	N/A
>40	24	10.8	N/A	N/A
No response	28	12.6	N/A	N/A

[a] Estimates based on a division of responses from other age groups. performed for comparative purposes.
For complete base country information, please see Supplementary Table 1.

[b] United States of America was included in the table as it had >10 respondents in 2018.

10.8% work over 40 hours a week, down from around 20% in 2018 (Table 1).

Services and documents delivered
Writing services and proofreading and editing services were most commonly reported, constituting 68% and 20% of respondents' time, as revealed in the 2023 survey. Quality control saw a decrease in 2023 (45.5% in 2018 vs. 38.1% in 2023), and there was an increase in electronic publishing (7.0% in 2018 vs. 13.5% in 2023). In the 2023 survey, some respondents (16.6%) added in the free comment section under "Other", the additional services they provide, including strategy, quality and general management, marketing and sales, advisory and educational roles, graphic design, medical and social media monitoring, statistics, and volunteer work. In 2023, documents delivered by the respondents were mostly manuscripts for journals (58.3%); abstracts, posters, and slide kits for conferences (54.3%); and educational and training material (43.5%). Around a third of respondents deliver online articles and website content (33.6%) and regulatory documents (investigator brochures, study protocols and reports; 30.0%). Other documents include those outlined in Table 2 overleaf. Data could not be compared with 2018 data, as respondents could only "select 3" services in 2018, but could choose "all that apply" in 2023.

The ranges of responses for time estimates (2023 data only) and hourly rates were wide (Table 3). Writing a clinical study report was the most time-consuming type of service, requiring 111 hours (±66.7), followed by writing technical evaluations (71 hours, ±111.3), then a standard scientific article (57 hours, ±36.8).

The highest hourly rate applied by respondents was associated with consultancy (€109, ±67.6), followed by training (€100, ±75.4), regulatory writing (€95, ±59.4) and non-regulatory writing (€80, ±28.1). The lowest hourly rates were applied for translations (€65, ±27.3). Compared to the 2018 survey, average rates were slightly higher (between €2 and €10) for all service types, except for quality control.

The overall median hourly rate across all services provided was €82.2, which increased with years of experience, from €73 with <1 year of experience, €78 with 1–5 years of experience, €80 with 6–15 years, to €100 with >15 years of experience. A similar trend was seen across

type of medical writer and years of experience (Table 4), p. 61.

According to the geographical location of the respondents (where >10 respondents were recorded), the highest average hourly rate was in France (€92.5), followed by Germany (€82.5), United Kingdom (€79.0), and Italy (€63.8). Portugal and India were highly represented, but many did not register hourly rates (33.3% and 72% respectively); rates were €57.9 and €23.0, respectively (data not shown).

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Business practices

The average target minimum monthly earnings reported in 2023 was €5,608.40. This value was derived from a wide range of responses (€400–€30,000). The main source of projects was from longstanding clients (40.8%) (Table 5), p. 62. In 2018, respondents were asked to select three of their main sources of projects, so a direct comparison of frequency cannot be made.

MedComms agencies and pharmaceutical companies were the main clients in 2023 (43.5% and 31.8%) and 2018 (28.7% and 52.4%). Biotech/veterinary/ medical device companies, medical writing companies, contract research organisations (CRO) and academic institutions all made up between 14% and 20% of the main clients in 2023. Publishers and non-profit organisations were comparatively less represented in both 2023 and 2018.

Most estimates for client quotes (2023 data only) are created by rough calculations of the time to complete a project, multiplied by an hourly/daily/weekly/monthly rate (40.8%) or by quoting an hourly/daily/weekly/monthly rate and invoicing all hours worked at project completion (38.6%). Some respondents use personal pricing lists based on project/document

Table 2. Services and documents delivered by freelance medical writer respondents

	2023		2018	
Services provided[a]	*n*=223	%	*n*=142	%
Writing	182	81.6	134	93.7
Proofreading and editing	114	51.1	102	71.3
Quality control	85	38.1	65	45.5
Consultancy work (e.g., training)	78	35.0	50	35.0
Translation	53	23.8	39	27.3
Electronic publishing	30	13.5	10	7.0
Other	37[b]	16.6	31[c]	21.7
No response	33	14.2	0	0.0

	Mean ±SD	Range	Mean ±SD	Range
Proportion of time dedicated to each service				
Writing	67.9 ±26.4	(5–100)	N/A	N/A
Proofreading and editing	19.8 ±19.4	(0–100)	N/A	N/A
Consultancy work (e.g., training)	17.9 ±18.1	(0–90)	N/A	N/A
Quality control	14.1 ±13.6	(0–80)	N/A	N/A
Translation	9.8 ±14.1	(0–50)	N/A	N/A
Electronic publishing	7.2 ±15.6	(0–80)	N/A	N/A
Other	22.2 ±23.8	(0–90)	N/A	N/A
No response	33	14.2%	N/A	N/A

	n=223	%	*n*=142	%
Delivered documents				
Manuscripts for journals	130	58.3	94	65.7
Abstracts, posters, slide kits for conferences	121	54.3	76	63.1
Educational and training material (for patients and health professionals)	97	43.5	80	55.9
Websites and online articles	75	33.6	41	28.7
Regulatory documents – investigator brochures, study protocols, and reports	67	30.0	124	86.7
Marketing materials	66	29.6	12	25.2
Conference proceedings	47	21.1	38	26.6
Regulatory documents – medical devices, biologics	41	18.4	53	37.1
Regulatory documents – summary documentation, CTD sections, SmPCs, product inserts	40	17.9	51	35.7
Market access / HEOR materials	23	10.3	N/A	N/A
SOPs and user manuals	20	9.0	27	18.9
Medical and scientific textbooks	17	7.6	20	14.0
Regulatory documents – other	15	6.7	29	20.3
Other	25[d]	11.2	29[e]	20.3
No response	27	11.6	0	0.0

[a] Data cannot be compared as respondents were asked to "select 3 options" in 2018 and "all that apply" in 2023

[b] Strategy, quality and general management, marketing and sales, advisory and educational roles, graphic design, medical and social media monitoring, statistics and volunteer work

[c] Strategy, quality, project and general management, marketing and sales, advisory and educational roles, graphic design, medical and social media monitoring, statistics, clinical development consulting, indexing, coaching and mentorship, data checking, epidemiologic research, event organisation and client liaison, health technology assessment, interpreting, peer review, post-editing of machine translation, publication planning, safety

[d] Advisory board documents, strategy documents, plain language material, event management, grant proposals, internal communications, regulatory defence and briefing, training material, social media, policy reports, digital assets, scientific platforms, ethics committee documents and theses

[e] Advisory board, health technology assessment submissions, research grant applications, translations, academic documents, consulting documents, clinical study reports, drug specification booklets, guidelines for professional organisations, global value dossiers, health economic dossiers, informed consent forms, internal reports, medical devices manuals, press releases, public databases e.g. ClinicalTrials.gov, safety narratives, study guide apps, study reports (non-regulatory), reimbursement submissions, internal company documents, agenda developing for conferences and meetings

Abbreviations: CTD, common technical document; SmPCs, summary of product characteristics; HEOR, health economics and outcomes research; SOPs, standard operating procedures

Table 3. Time and price estimates according to documents and services provided

	2023		2018	
	Median ±SD	Range	Median ±SD	Range
Time estimates for service types, hours				
Writing a clinical study report / other regulatory documents (*n*=43)	111.5 ±66.7	6–280	N/A	N/A
Writing technical evaluations (*n*=3)	71.1 ±111.3	5–200	N/A	N/A
Writing a standard scientific article (*n*=78)	57 ±36.8	6–200	N/A	N/A
Writing patient material (*n*=32)	17.2 ±16.8	2–60	N/A	N/A
Translate a standard scientific article (*n*=16)	15.9 ±12.5	5–48	N/A	N/A
Edit a standard scientific article (*n*=59)	15.0 ±14.3	3–70	N/A	N/A
Writing a medical blog (*n*=27)	7.8 ±11.3	1–60	N/A	N/A
Writing content for a website (*n*=27)	11.2 ±12.8	1–60	N/A	N/A
No response (*n* %)	112	48.1	N/A	N/A
Hourly rates for service types (*n* for 2023; *n* for 2018), Euros				
Consultancy (*n*=57; *n*=67)	109 ±67.6	15–500	98 ±47.6	13–275
Training (*n*=39; *n*=44)	99.9 ±75.4	15–500	100.2 ±47.6	13–275
Writing: Regulatory (*n*=17; *n*=67)	95 ±59.4	17–500	88.0 ±32.1	13–190
Writing: Non-regulatory (*n*=120; *n*=109)	80.0 ±28.1	15–220	77.5 ±32.6	10–190
Editing (*n*=73; *n*=140)	69.9 ±25.1	20–120	44.7 ±28.6	10–180
Quality control (*n*=46; *n*=63)	69.8 ±26.8	20–160	72.7 ± 31.7	12–190
Proofreading (*n*=59; *n*=75)	65.7 ±25.9	10–120	61.6 ±29.0	10–180
Translation (*n*=27; *n*=44)	64.7 ±27.3	25–110	55.5 ±26.6	13–134
No response (*n* %)	70	30.0	10	7.0

Table 4. Level of experience and median hourly rates, assessed according to type of medical writer and provided

Level of experience	Total		<1 year		1–5 years		6–10 years		11–15 years		>15 years	
All respondents, *n* %[a]	195	100.0	28	14.4	72	36.9	41	21.0	25	12.8	29	14.9
Hourly rates provided	149	76.4	15	7.7	58	29.7	37	19.0	20	10.3	19	9.7
No hourly rates provided	46	23.6	13	46.4	14	19.4	4	9.8	5	20.0	10	34.5
Median hourly rate, € range	82.2	17–500	73	17–165	78	17.5–500	80	45–150	80	50.8–140	100	65–250
Type of medical writer												
MedComms												
Respondents, *n* %	75	50.3	7	46.7	31	53.4	20	54.1	10	50.0	7	36.8
Median hourly rate, € range	77.0	17–250	73.0	17–165	77.0	25–500	77.0	50–130	72.8	50.8–85	115.0	65–250
Regulatory												
Respondents, *n* %	21	14.1	4	26.7	4	6.9	7	18.9	3	15.0	3	15.8
Median hourly rate, € range	100.0	17.5–206.7	75.0	43.3–120	74.7	17.5–160	100.0	70–150	105.0	100–110	124.0	105-206.7
Hybrid												
Respondents, *n* %	53	35.6	4	26.7	23	39.7	10	27.0	7	35.0	9	47.4
Median hourly rate, € range	83.8	18.6–167.5	67.5	23–78.3	80.0	18.6–125	83.8	45–110	107.5	65–140	100.0	70-167.5

[a] Number of respondents with details about the types of documents delivered (to be able to be categorised as a medical writer type [87.4%])

[b] For each type of service missing experience was registered for 7, 13, 8, 9, 2, 4, 6 and 3 respectively.

Table 5. Business practices: Source of projects and main clients

	2023		2018	
	n=223	%	*n*=142	%
Major source of projects[a]	223		143	
Longstanding clients	91	40.8	120	83.9
Professional or social networking sites (e.g., LinkedIn)	24	10.8	47	32.9
Referrals from colleagues	15	6.7	62	43.4
Referrals from clients	16	7.2	56	39.2
Freelance listings (e.g., EMWA Freelance Directory)	5	2.2	31	21.7
Personal website	1	0.4	11	7.7
Other	3[b]	1.2	10[c]	7.0
No response	68	30.5	0	0.0
Main clients				
Medical communications agencies	97	43.5	75	28.7
Pharmaceutical companies	71	31.8	74	52.4
Biotech or veterinary or medical device companies	44	19.7	39	27.3
Medical writing companies	41	18.4	N/A	N/A
Contract research organisations	35	15.7	40	28.0
Academic institutions	32	14.3	39	27.3
Publishers, including health journalism	20	9.0	22	15.4
Non-profit organisations (e.g. NGOs)	18	8.1	11	7.7
Other	9[d]	4.0	29[e]	20.3
No response	66	29.6	0	0.0

[a] Data cannot be compared as respondents in 2023 selected one response and in 2018 could select many.
[b] Professional network
[c] Translation agencies, direct prospecting, MedComms workbook, agencies, single client, personal networking at events
[d] Hospitals, translation agencies, field research companies, individual scientist/clinician/statistician, consulting agencies, the food industry and in vitro diagnostics manufacturers
[e] Hospitals, translation agencies, individual scientist/clinician/statistician, consulting agencies, healthcare systems, professional society, other freelancers, medical education companies, medical/scientific recruitment/resourcing companies, public relations companies

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type (17.0%) or client type/geographical location (9.4%). Client quotes for translations are created as a per-word/page fee (5.8%) (Table 6).

Of the respondents who provided information (*n*=144), half declared that they charge milestone payments, mainly in the form of interim payments (55.6%) and percentage of upfront payment (18.1%) or a combination of both (25.0%) in 2023. Compared to 2018 data, milestone payments were less frequently applied (2018, 66.9% vs. 2023, 30.9%).

Payment issues were less frequent in 2023 (45.7%) compared to those reported in 2018 (72.5%).

Of their earnings, most freelance medical writers declared fixed costs below 30% (46.2%),

with four European respondents (1.8%) declaring fixed costs of over 50% (2023 data only).

Most freelancers perform ongoing professional development through personal research (50.7%), which grew from only 18.9% in 2018. In 2018, the most common modality was through online workshops (57%) (Table 7 p. 64).

Most networking is performed online, via professional or social networks (41% and 66%) with conferences and meet-ups collectively also popular. Most advertised their business via social media or through websites in both 2023 and 2018. Professional directories and contact with prospective clients were less common in 2023 compared to 2018. Interestingly, in 2023, 14.3% of freelance medical writers declared that they did not engage in any networking, up from 4.2%

in 2018, and 22.0% did not advertise their business at all, up from 4.9% in 2018.

What a freelance medical writer should know and use to be successful (2023 data only)
Beyond medical writing skills, respondents suggested that project management/delivery, work-life balance, and networking skills were those most essential for becoming a successful freelancer (79.4%, 62.8%, and 59.2%). Other skill sets included marketing (32.7%), statistics (27.4%), accounting (20.6%), and website design (5.8%), see Figure 1, p. 65.

The greatest influence on gaining new business was considered word of mouth of current or past clients (41.3%) with social media or LinkedIn considered less impactful (17.0%), see Figure 2. EMWA activities considered most helpful to freelancers included being associated with EMWA, networking opportunities and the *Medical Writing* journal (47.6%, 47.6%, 46.7%, respectively). Professional development workshops, webinars, and the Freelance Business Forum were also considered helpful (39.0%, 29.5%, and 28.6%), see Figure 3 , p. 65.

> Most networking is performed online, via professional or social networks... Most advertised their business via social media or through websites... Interestingly, in 2023, 14% of freelance medical writers declared that they did not engage in any networking, up from 4% in 2018, and 22% did not advertise their business at all, up from 5% in 2018.

Table 6. Taxation and invoicing

	2023		2018	
	n = 223	%	n = 142	%
Calculation of estimates for client quotes?				
Estimate project time and multiply by an hourly/daily/weekly/monthly rate	91	40.8	N/A	N/A
Quote hourly/daily/weekly/monthly rate and at project completion invoice all hours/days/weeks/months worked	86	38.6	N/A	N/A
Personal pricing list based on document/project type	38	17.0	N/A	N/A
Personal pricing list based on client type/geographical location	21	9.4	N/A	N/A
Per-word/page fee (translations)	13	5.8	N/A	N/A
Other[a]	4	1.6	N/A	N/A
No response	65	27.9	N/A	N/A
Frequency of charging milestone payments[b]				
No	72	30.9	47	33.1
Yes	72	30.9	95	66.9
No response	89	38.2	0	0.0
Types of milestone payments applied (*n*=72)				
Interim payments	40	55.6	N/A	N/A
Percentage up front payment	13	18.1	N/A	N/A
A combination of the above	18	25.0	N/A	N/A
No response	1	1.4	N/A	N/A
Prior experience of payment issues				
No	45	20.2	39	27.5
Yes	102	45.7	103	72.5
No response	76	32.6	0	0.0
Modalities for payment retrievals (*n*=102)				
Send emails and invoice reminders until payment received	88	86.3	N/A	N/A
Set up a call with the client to discuss how they might make an immediate payment	10	9.8	N/A	N/A
Pass onto a third-party collection agency	4	3.9	N/A	N/A
Other[c]	3	2.9	N/A	N/A
Percentage of monthly earnings destined to fixed costs				
>20%	30	13.5	N/A	N/A
20% – 30%	73	32.7	N/A	N/A
30% – 40%	25	11.2	N/A	N/A
40% – 50%	14	6.3	N/A	N/A
>50%	4[d]	1.8	N/A	N/A
No response	146	65.5	N/A	N/A

[a] Data cannot be compared as the question was not obligatory in 2023 and was posed as a non-obligatory question of frequency in 2018.

[b] Accept the offered rate

[c] Charge interest, small claims court

[d] Respondents came from Germany, Netherlands, Italy, and Austria and were all 100% freelancers and 3 worked primarily in management.

Work-life balance (2023 data only)

Almost half of the respondents declared they were working from home (48.9%), but nearly a third did not respond to this question, see Figure 4, p. 66. Work-related personal stress was common but mostly manageable, with 53.8% reporting feeling stress "sometimes" and 6.7% "most times". Only 1.8% reported feeling stressed "always" and 6.3% never felt stressed. Stress among medical writers seems to be mostly triggered by workload and deadlines (71.8%) and trying to maintain a work-life balance, such as family responsibilities (57.7%). Finding new clients, finances, and holding onto or losing clients were also reasons for stress (24.8%, 21.5% and 12.1%). Interestingly, COVID-related issues were not considered a common trigger for stress in 2023 (1.3%). Active attempts to reduce stress were reported by just over half of the respondents (54.7%). Most look to reduce stress through pastimes, such as physical activity (91.0%),

Table 7. Professional development, networking, and advertising

	2023		2018	
	n=223	%	*n*=142	%
Continuing professional development modalities				
Personal research (e.g. specialised journals, medical conferences, etc.)	113	50.7	27	18.9
Online workshops	58	26.0	82	57.3
EMWA workshops	54	24.2	72	50.3
Workshops conducted by other associations	53	23.8	68	47.6
EMWA webinars	49	22.0	N/A	N/A
Other	12[a]	5.3	30[b]	22.4
No response	73	31.3	0	0.0
Networking with other medical writer modalities				
Online, via professional or social networks	91	40.8	94	65.7
EMWA conferences	49	22.0	67	46.9
Local meet-ups	43	19.3	46	32.2
I do not network with other medical writers	32	14.3	6	4.2
Conferences organised by other associations	27	12.1	46	32.2
Courses provided by companies, such as Management Forum	2	0.9	2	1.4
Other	3[c]	1.3	7[d]	4.9
No response	70	30.0	0	0.0
Modality of business advertising				
Social media (e.g. LinkedIn)	101	45.3	111	77.6
Website	68	30.5	82	57.3
I don't advertise my business	49	22.0	7	4.9
Professional directories	43	19.3	64	44.8
Contact with prospective clients	43	19.3	51	35.7
Medical associations or societies	12	5.4		
Print media	2	0.9	3	2.1
Other	3[e]	1.3	11[f]	7.7
No response	68	29.2	0	0.0

[a] Business and personal marketing, MedComms webinars, Clarity and Openness in Reporting (CORE) Reference newsletter, networking, on-site learning, client requested training, podcasts, The Organisation for Professionals in Regulatory Affairs (TOPRA), Regulatory Affairs Professionals Society (RAPS)

[b] On the job training, client requested training, finding mentors, peer-to-peer learning, professional memberships, none

[c] Phone/email

[d] Courses provided by companies such as Management Forum, AMWA ListServ, client network, Skype calls, MedComms Networking

[e] Networking, marketing material send out

[f] Networking at conferences, recruitment agencies, longstanding relationship, word of mouth, develop articles on topics relevant to my experience

home-based activities (67.2%), social activities (51.6%), and mindfulness/meditation (32.8%). Respondents also suggested many other stress-reducing activities, including travel, music, psychological assistance, pet therapy, reducing working hours, client selection, and simply saying "no" to clients.

Open-ended comments
Respondents made many requests, gave suggestions, and shared ideas for the EMWA Freelance Business Group. Some requested time and price guides to be made available for both freelance medical writers and their clients. Additional courses of "soft", marketing, and best practice skills were requested along with tips about how to identify new clients. More activities and training were requested at a local level or online, along with more networking opportunities and assistance with issues of "working from home". Some suggested the introduction of standardised skills, free education/reduced

> Most look to reduce stress through pastimes, such as physical activity (91.0%), home-based activities (67.2%), social activities (51.6%), and mindfulness/meditation (32.8%)

conference costs, a mentorship program, and the availability of testimonials. Finally, some respondents suggested allowing more time for the Freelance Business Group Forum at the conference.

Discussion

The survey's results highlight the changing landscape for freelance medical writing. There are many indicators to suggest that demand for freelancers has increased in recent years. More freelancers responded to the 2023 survey, most of whom were generally younger with relatively minimum experience (<5 years). There has been a great evolution of medical writing companies, similar to findings in the 2021 EMWA Salary Survey,[11] and a relative fall in pharmaceutical companies as main clients. This is an indication of the trend by pharmaceutical companies to externalise medical writing activities through consulting companies.

Freelancers arguably seem passive in their business approach. There was also an astonishingly high proportion of medical writers who admitted to not engaging in any networking, up 3-fold compared to data acquired in 2018, or advertising their business, up more than 4-fold
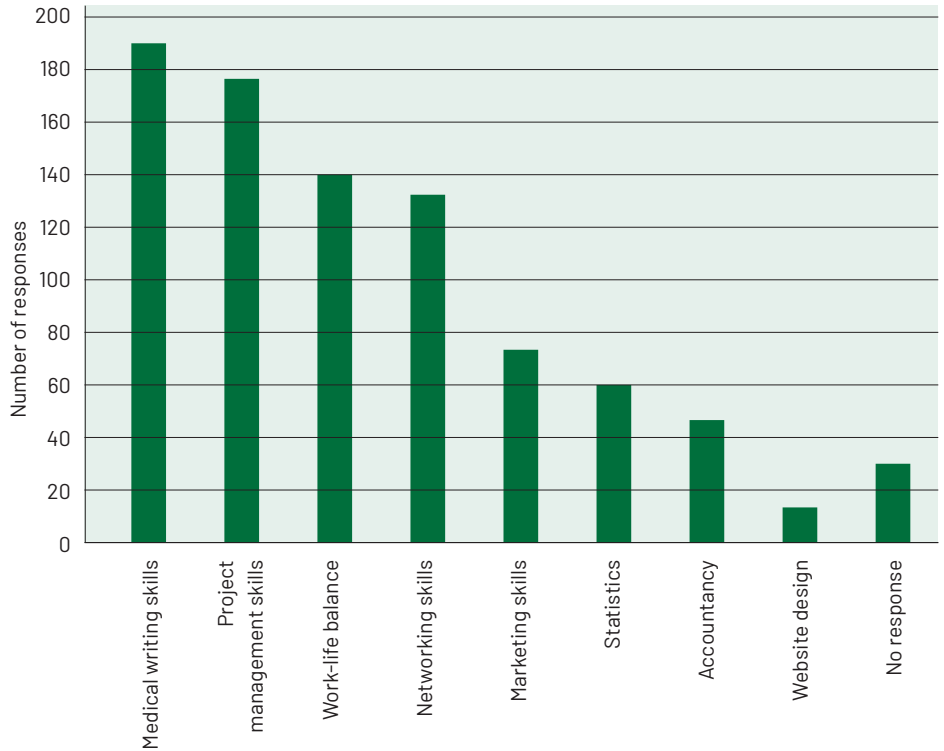
Figure 1. Skill sets considered important for becoming a successful freelancer
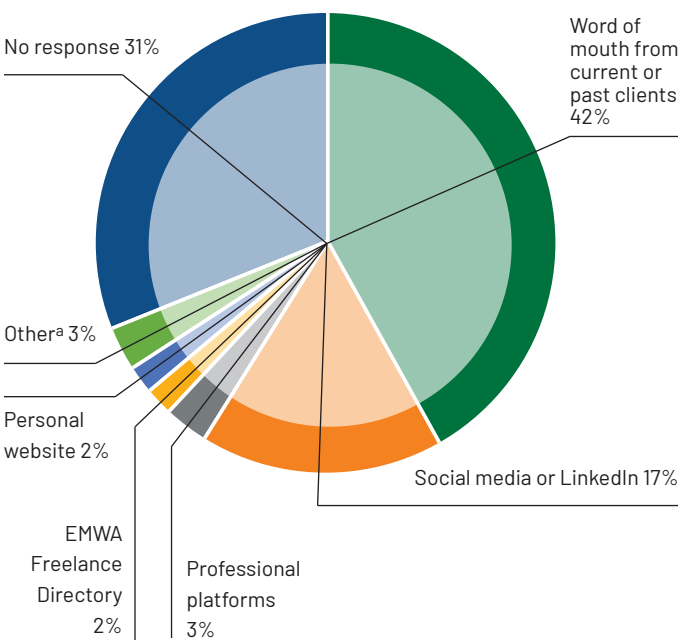
Figure 2. The greatest influence on gaining new business

ª Recruitment agency, experience, EMWA conferences, networking, volunteer, professional network
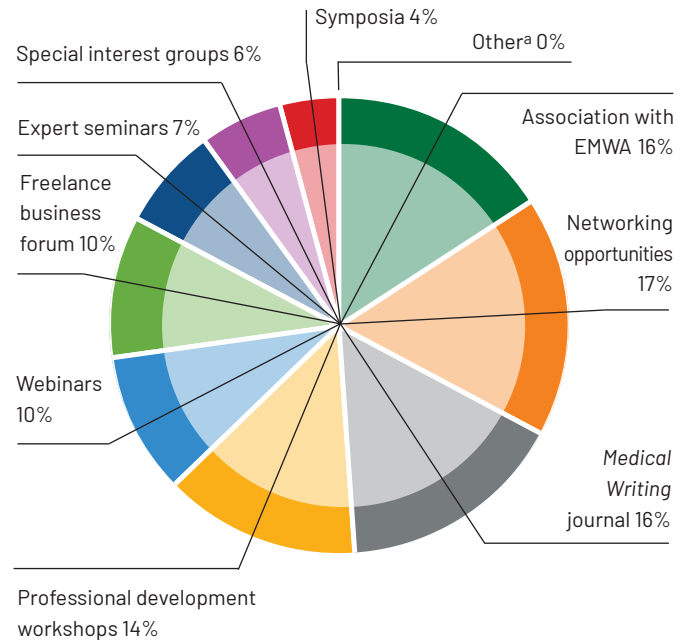

Figure 3. EMWA activities most helpful to a freelancer

Home 49%

No response
31%

Shared
work–
space 1%
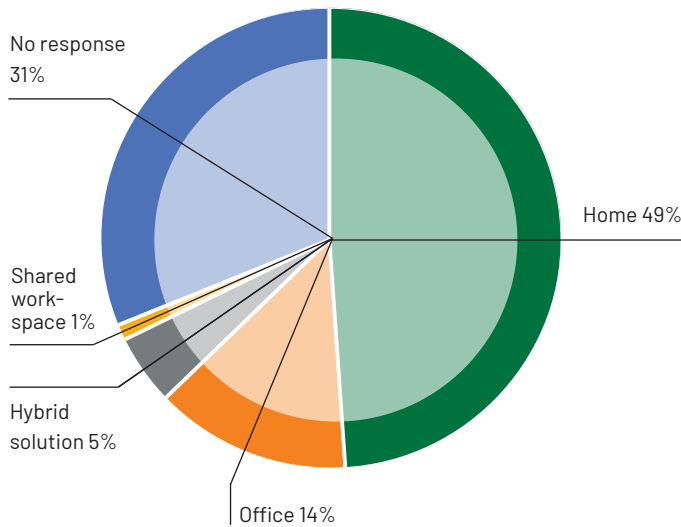
Hybrid
solution 5%

Office 14%

Figure 4. Work location

from 2018 data. The respondents also claimed that the greatest influence on gaining new business was word of mouth. The authors speculate that the common occurrence of long-term clients and the growing medical writing services market mean that freelancers do not need to network, advertise, or actively search for new clientele to acquire new business.

Freelancers also seem passive in their professional development. Professional development was mainly performed through personal research, e.g reading specialised journals or following medical conferences, whereas participation in workshops and courses and conferences (online and face-to-face) were less often reported.

Interestingly, a good work-life balance was rated as an important skill by almost two-thirds of the respondents. Stress levels, when present, seem well managed. Physical activity for stress reduction, which assists in improving mental health,[12] may be a major reason for this effect of low stress levels, especially for a work style that is fundamentally computer based and isolating.[10,13]

In line with increasing demand for freelancing services, the survey saw an increase in reported mean hourly rates. Reported rates are slightly higher than those reported in the subsection for freelancer responses in the 2021 EMWA salary survey; €82.2 (*n*=223) vs. €78 (*n*=103).[11] This FBS also found an overall increase in rate per service with years of experience, a trend not seen in the 2021 salary survey. Importantly, this 2023 survey can be used as a guide for the time required by medical writers to deliver various

services, and the relative prices, in terms of hourly rates, for the services provided.

Study limitations

With all survey-based studies, there are limitations. Despite this survey having the largest response rate compared to all previous EMWA FBS, geographic distribution and response rates were highly variable, with some countries, such as the UK, being over-represented whilst many countries missed participation. As a result, this could affect the overall findings and it prevented us from deciphering more associations on country-specific trends. Regression analysis was performed to identify trends across age, demographics, pricing, advertising, etc., however, due to some subsections having low responses, it was difficult to provide a clear conclusion (data not shown). This 7th FBS was structured on the previous 6th FBS but with additional questions, therefore, it was not possible to do a direct comparison on all questions and the proportion of respondents who completed both surveys is unknown. The distribution of the survey was mainly through the EMWA network and the authors' own networks, therefore, there could be selection bias in the study population. The classifications of the respondents according to medical writer type and the mean hourly rate were not direct questions and were assigned by the authors. The ranges of responses to hourly rates and salary expectations were wide, and some service estimates were provided from very few responses (data given in the tables). It is

unsure if the larger monthly salary expectations were indicative of freelancers that potentially outsourced work or were running small businesses, and therefore, had higher incomes due to more workloads but also presumably higher outgoings (not asked in the survey) or due to the wide range of respondents' years of experience. Due to the variability in the hourly and monthly income and the relatively low number in some categories, data in this manuscript are provided as a guide only and should be interpreted with caution. Further, comparisons with the 2021 EMWA Salary Survey should be interpreted with caution as questions were not the same among the surveys.

Since analysing the results, some gaps in the knowledge remain. The survey did not ask about job satisfaction or the impact of the pandemic, which were covered in the 2021 salary survey.[11] In addition, the question regarding years of experience did not differentiate between those as a medical writer and those as a freelancer, which could lead to some misinterpretation. Lastly, the type of medical writer was analysed through the type of services each respondent offered and not a clear question. These limitations will be considered in the 8th FBS.

Future challenges

Freelancing isn't without its challenges and to succeed, a freelancer must adapt with the working environment. We are in an era where European, country-specific, and product-specific regulations are constantly changing, and a freelancer must keep up with these working practices to be able to deliver to their clients the best quality documents. In addition, the emergence of more sophisticated artificial intelligence (AI) is also gaining pace and could both hinder and help a medical writer. The key is to have the correct training and professional development in AI to keep up to date with these growing trends.

Conclusions

This survey provides up to date information highlighting the evolving landscape of freelance medical writing. Excitingly, there are clearly opportunities for freelancers of all experience levels, both in the MedComms and regulatory fields, and for full-time and hybrid workers, regardless of geographical location. The data supports previous surveys, such as the recent EMWA salary survey, but in its novelty, offers in-depth information about timing and pricing of projects, and allows insights into current trends

in advertising, networking, and gaining new business. Lastly, it is encouraging to see that freelance medical writers are not overly stressed by their situation and are adaptable to find ways to alleviate the work-related stress through various activities. Challenges and further changes are ahead but we are certain that the freelancers are prepared to take them on. The Freelance Business Group will continue to monitor freelance activity and plan to launch the survey on a 3-to-4-year basis and work alongside the EMWA salary and compensation survey team.

Disclaimers
The opinions expressed in this article are the authors own and not necessarily shared by their employers, clients, or EMWA.

Data availability statement
Data and other supplemental information are available upon request. Please contact corresponding author.

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Appendix 1. EMWA's 2023 Freelance Business Survey

DEMOGRAPHICS

1. Gender
a. Female
c. Non-binary
b. Male
d. Prefer not to say

2. Age
a. < 20 years
e. 50–59 years
b. 20–29 years
f. 60–69 years
c. 30–39 years
g. ≥ 70 years
d. 40–49 years
h. Prefer not to say

3. Where are you based?
a. In Europe; please specify country ...
b. Outside Europe; please specify country ...

4. Was it straight forward to set yourself up as a freelancer in your country
a. Yes (please go to q. 6)
b. No
If no, could you please specify the issues you faced?
Please specify ...

WORK PRACTICES

5. How would you describe your occupational status?
a. 100% freelance
b. Hybrid freelance/contract/student
c. Other

6. How many years of experience do you have as a freelancer?
a. < 1 year
d. 11–15 years
b. 1–5 years
e. > 15 years
c. 6–10 years

7. How many hours per week do you typically work as a freelancer?
a. 1–10
d. 31–40
b. 11–20
e. 41–50
c. 21–30
f. >50

8. Which of the following services do you provide and what proportion of your time (%) do you usually spend on each of them (select all that apply)?
a. Writing
b. Proofreading and editing
c. Translation
d. Quality control
e. Electronic publishing
f. Consultancy work (e.g., training)
g. Other; please specify ...

9. What types of documents do you generally work on (select all that apply)?
a. Manuscripts for journals
b. Abstracts, posters, slide kits for conferences
c. Marketing materials
d. Market access / HEOR materials
e. Conference proceedings
f. Educational and training material (for patients and health professionals)
g. Medical and scientific textbooks
h. Regulatory documents – investigator brochures, study protocols and reports
i. Regulatory documents – summary documentation, CTD sections, SmPCs, product packaging inserts
j. Regulatory documents – medical devices, biologics
k. Regulatory documents – other; please specify below
l. SOPs and user manuals
m. Websites and online articles
n. Other; please specify ...

10. Please select skill sets you think are important for becoming a successful freelancer (select all that apply).
a. Project management/delivery
b. Marketing skills
c. Medical writing skills
d. Website design
e. Accountancy
f. Networking skills
g. Statistics
h. Work-life balance
i. Other; please specify ...

PRICING AND PAYMENT PRACTICES

11. How do you prepare your estimates for client quotes?
a. I estimate the time the project requires and multiply by an hourly/daily/weekly/monthly rate
b. I quote my hourly/daily/weekly/monthly rate and at project completion I invoice all hours/days/weeks/months worked
c. I apply my personal pricing list based on document/project type
d. I apply my personal pricing list based on client type/geographical location
e. In the case of translations, I apply a per-word/page fee
f. Other; please specify ...

12. How long (in hours) do you typically work on the following types of services?
a. Writing a standard scientific article ▢▢▢
b. Edit a standard scientific article ▢▢▢
c. Translate a standard scientific article ▢▢▢
d. Writing a CSR/other regulatory documents ▢▢▢
e. Writing technical evaluations ▢▢▢
f. Writing a medical blog ▢▢▢
g. Writing patient material ▢▢▢
h. Writing content for a website ▢▢▢
i. Other writing, please specify ▢▢▢

13. In terms of an hourly rate (in €), what do you typically charge for the following types of services?
a. Writing: Regulatory ▢▢▢
b. Writing: Non-regulatory ▢▢▢
c. Editing ▢▢▢
d. Proofreading ▢▢▢
e. Translation ▢▢▢
f. Quality control ▢▢▢
g. Consultancy ▢▢▢
h. Training ▢▢▢

14. If you charge milestone payments which of the following do you use?
a. Percentage upfront payment
b. Interim payments
c. Non-refundable deposit for bookings in the future
d. A combination of the above
e. Other; please specify ...
f. I do not charge milestone payments

15. What is your target minimum monthly earnings?
a. Please specify in Euros (€) ...

16. What percentage of your monthly earnings is destined to fixed costs of taxation/insurance?
a. >20%
d. between 40–50%
b. between 20–30%
e. >50%
c. between 30–40%

17. If you face payment issues, how do you retrieve your fee for work done?
a. Send emails and invoice reminders until payment received
b. Set up a call with the client to discuss how they might make an immediate payment
c. Pass it onto a third party to collect on your behalf
d. Other; please specify ...
e. I have never faced any payment issues

BUSINESS PRACTICES

18. What is the major source of most of your projects (please select one)?

a. Longstanding clients
b. Referrals from colleagues
c. Referrals from clients
d. Professional or social networking sites (e.g., LinkedIn)
e. Personal website
f. Freelance listings (e.g., EMWA Freelance Directory)
g. Other; please specify ...

19. Who are your main clients (select all that apply)?

a. Pharmaceutical companies
b. Biotech or veterinary or medical device companies
c. Medical communications agencies
d. Medical writing companies
e. CROs
f. Academic institutions
g. Publishers, including health journalism
h. Non-profit organisations (e.g., NGOs)
i. Other; please specify ...

20. How do you advertise your business (select all that apply)?

a. Website
b. Social media (e.g., LinkedIn)
c. Professional directories
d. Medical associations or societies
e. Print media
f. Contact with prospective clients
g. I don't advertise my business
h. Other; please specify ...

21. In your opinion, what has the greatest influence on gaining new business (please select one)?

a. Personal website
b. Social media or LinkedIn
c. Professional platforms
d. Word of mouth from current or past clients
e. EMWA Freelance Directory
f. Other; please specify ...

NETWORKING PRACTICES

22. How do you continue your professional development (select all that apply)?

a. EMWA workshops
b. EMWA webinars
c. Workshops conducted by other associations
d. Online workshops
e. Personal research (e.g., specialised journals, medical conferences etc.)
f. Other; please specify ...

23. How do you network with other medical writers, freelance or not (select all that apply)?

a. EMWA conferences
b. Conferences organised by other associations
c. Courses provided by companies, such as Management Forum
d. Local meetups
e. Online, via professional or social networks
f. I do not network with other medical writers
g. Other; please specify ...

24. Are you a member of any writers association?

a. EMWA
b. AMWA
c. Australasian Medical Writers Association
d. ISMPP
e. Other; please specify ...
f. None of the above

If you are an EMWA member, please answer the following four questions:

25. How many years have you been an EMWA member?

a. <1   c. 4–5
b. 1–3   d. >5

26. How often have you attended EMWA conferences in the past 3 years?

a. 1–2   c. 5–6
b. 3–4   d. Not at all

27. Which of the following EMWA activities helps you the most as a freelancer (select all that apply)?

a. Association with EMWA
b. Professional development workshops
c. Freelance Business Forum
d. Networking opportunities
e. Webinars
f. Symposia
g. Expert seminars
h. Special interest groups
i. Journal
j. Other; please specify ...

28. Are you listed in EMWA's Freelance Directory?

a. Yes
b. No (please go to q. 28).
If **yes,** how would you respond to the statement –
I have found the Freelance Directory to be a very useful tool for advertising and getting contacted by prospective clients.

a. Strongly agree
b. Somewhat agree
c. Neither agree nor disagree
d. Somewhat disagree

29. If you are not an EMWA member, do you plan to join EMWA in the future?

a. Yes   b. No

30. Do you think EMWA should provide any additional activities to those already available? If yes, please specify

a. No
b. Yes; please specify ...

WELLBEING PRACTICES

31. Where do you work?

a. In my own office
b. In a shared workspace
c. Directly at the client location
d. At home
e. Hybrid solution (office/home)
f. Other; please specify ...

32. Do you feel your work creates personal stress?

a. Never (please go to q. 34).
b. Sometimes
c. Most times
d. Always

33. If so, what triggers your stress (select all that apply)?

a. Workload and deadlines
b. Finances
c. COVID-related issues
d. Holding onto or losing clients
e. Finding new clients
f. Work-life balance (e.g., family responsibilities)
g. Other; please specify ...

34. Do you actively attempt to reduce work related stress?

a. Yes   b. No
If so, which activities do you engage in (select all that apply)?

a. Physical activity (e.g., group sports, yoga, Pilates, jogging, gym membership, walking, hiking, etc.)
b. Mindfulness/MeditationSocial activitiesActivities within the home environment (e.g., cooking, gardening, etc.)
c. Other; please specify ...

35. Finally, how do you feel in general about EMWA's outreach to freelance medical writers?

What suggestions or ideas do you wish to share with us to make it better?
Please specify ...

FINAL MESSAGE: Full results will be published on the EMWA website and in EMWA's journal *Medical Writing.*

Appendix 2. EMWA's 2018 Freelance Business Survey

DEMOGRAPHICS

1. How would you describe your freelance work?
a. Part-time   b. Full time

2. Are you an EMWA member?
a. Yes   b. No
If **no**, do you plan to join EMWA in the future?
a. Yes   b. No

3. Where are you based?
a. In Europe; please specify country …
b. Outside Europe; please specify country …

WORK PRACTICES

4. How many hours per week do you typically work (as a freelancer)?
a. 1–10   d. 31–40
b. 11–20   e. 41–50
c. 21–30   f. >50

5. Which of the following services do you provide and what proportion of your time do you usually spend on these (select all that apply)?
a. Writing ☐☐☐ %
b. Proofreading and editing ☐☐☐ %
c. Translation ☐☐☐ %
d. Quality control ☐☐☐ %
e. Electronic publishing ☐☐☐ %
f. Consultancy work (e.g. training) ☐☐☐ %
g. Other ☐☐☐ %;
Please specify …

6. What types of documents do you generally work on (select all that apply)?
a. Manuscripts for journals
b. Abstracts, posters, slide kits for conferences
c. Marketing materials
d. Conference proceedings
e. Educational and training material (for patients and health professionals)
f. Medical and scientific textbooks
g. Regulatory documents – investigator brochures, study protocols and reports
h. Regulatory documents – summary documentation, CTD sections, SmPCs, product inserts
i. Regulatory documents – medical devices, biologics
j. Regulatory documents – other; please specify …
k. SOPs and user manuals
l. Websites and online articles
m. Other; please specify …

7. How do you typically charge for your services?
a. Hourly   d. Monthly
b. Daily   e. Per project
c. Weekly
f. Other; please specify …

8. What hourly rate (in €) do you typically charge for the following types of service?
a. Writing: Regulatory € ☐☐☐
b. Non-regulatory € ☐☐☐
c. Editing € ☐☐☐
d. Proofreading € ☐☐☐
e. Translation € ☐☐☐
f. Quality control € ☐☐☐
g. Consultancy € ☐☐☐
h. Training € ☐☐☐

9. Do you typically charge milestone payments for long-term projects you undertake?
a. Never   c. Most times
b. Sometimes   d. Always

10. How often do you face payment issues (e.g. delay in payment) from a client?
a. Never   c. Most times
b. Sometimes   d. Always

BUSINESS PRACTICES

11. What is the major source of most of your projects?
a. Longstanding customers
b. Referrals from colleagues
c. Referrals from customers
d. Professional or social networking sites
e. Personal website
f. Freelance listings (e.g. EMWA Freelance Directory)
g. Other; please specify …

12. Who are the majority of your clients?
a. Pharmaceutical companies
b. Biotech or veterinary or medical device companies
c. Medical communications agencies
d. Medical writing companies
e. CROs
f. Academic institutions
g. Publishers, including health journalism
h. Non-profit organisations (e.g. NGOs)
i. Other; please specify …

13. How do you advertise your business (select all that apply)?
a. Website
b. Social media (e.g. LinkedIn)
c. Professional directories
d. Print media
e. Contact with prospective clients
f. Other; please specify …

14. Are you listed in EMWA's Freelance Directory (question only for EMWA members)?
a. Yes   b. No
If yes, how would you respond to the statement – *I have found the Freelance Directory to be a very useful tool for advertising and getting contacted by prospective clients.*
a. Strongly agree   d. Somewhat disagree
b. Somewhat agree   e. Strongly disagree
c. Neither agree nor disagree

If **no**, how would you respond to the statement – *I will consider listing my business on the Freelance Directory if I have more information on how clients use it to get in touch with freelancers and any other benefits.*Strongly agreeSomewhat agreeNeither agree nor disagreeSomewhat disagreeStrongly disagree

NETWORK PRACTICES

15. How do you continue your professional development (select all that apply)?
a. EMWA workshops
b. Workshops conducted by other associations
c. Online workshops
d. Other; please specify …

16. How do you network with other medical writers, freelance or not (select all that apply)?
a. EMWA conferences
b. Conferences organised by other associations
c. Courses provided by companies such as Management Forum
d. Local meet-ups
e. Online, via professional or social networks
f. Other; please specify …

17. If you are an EMWA member, how often have you attended EMWA conferences in the past 3 years?
a. 1–2   c. 5–6
b. 3–4   d. Not at all

18. If you are an EMWA member, which of the following activities help you the most as a freelancer (select all that apply)?
a. Association with EMWA
b. Professional development workshops
c. Freelance Business Forum
d. Networking opportunities
e. Webinars
f. Symposia
g. Expert seminars
h. Special interest groups
i. Reading the journal
j. Other; please specify …

SUGGESTIONS

(Results will be used by the FBG subcommittee to bring new initiatives and benefits to EMWA members who are freelancers) How do you feel in general about EMWA's outreach for freelance medical writers? What suggestions or ideas do you wish to share with us to make it better?