Out On Our Own

Editorial
I’ve said it time and time again, and our author reiterates it, everyone’s journey into medical writing is unique. We come from all walks of life, having gained a variety of diplomas and degrees, developed skills in academia, industry, NGOs, or start-ups, with specialisations in all different disciplines of medical, scientific, and veterinary fields. In this issue we hear the voyage that Heather Mason has taken to get into freelancing. She has a wealth of experience under her belt, and she sparks so many relatable scenarios that many of us already in freelancing can identify with. She leaves us inspired and reassured that with some focus and self-confidence (don’t let that impostor syndrome set in), we can achieve our dreams and goals in the somewhat isolating world of freelancing.

I hope to see many freelancers at the Freelance Business Forum in November, so we can socialise and share more experiences and knowledge with each other.

Stay safe.
Laura A Kehoe, PhD

Freelancing: Freedom or isolation?

I realise that every step of my varied work and personal life has tailored my particular uniqueness, leading me to where I am sitting today, a British ex-patriot living in the foothills of the Pyrenees in Southwest France.

Let’s face it, we are all unique. The route into medical writing is a wide and varied one. I can confidently say that each story has been different from the many medical writers I now know. There is definitely no convention.

Even once you have arrived in the field of medical writing, in the words of Sheryl Crow, “Everyday is a winding road”. So, where did it all begin for me?

If I can choose the most significant lesson in this journey with you, it would be to never listen to others regarding your capabilities of reaching a goal. For too many years, I took too much notice of those telling me what I would not achieve or what I was not capable of, rather than listening to my intuition. Should I have had adequate self-belief, I would have been a veterinary surgeon today and not a medical writer.

So, early on, I became a veterinary nurse rather than continuing my dream of being a vet. After I qualified, I was never given any real responsibilities that my qualifications had prepared me for. I was still limited to cleaning kennels, answering the telephone, and being a general dogbody (forgive the pun).

Disillusioned, I decided to leave a job that had been a joy to me and became a laboratory assistant in an agricultural research institute. This was the next best thing: Milking cows, growing microbes from their milk, and learning about vaccines. I loved it, and my passion for science was born.

My personality is not one for being static. I am always looking for something new. I don’t sit still, metaphorically speaking. So, while still working, I completed a part-time biomedical sciences diploma. I was inspired by the colleagues around me, their level of knowledge, and their enthusiasm for the day job. Before the end of my part-time studies, it was obvious that I had to pursue a degree to have any hope of furthering my career. So, after 3 years, I left for university in the wet and warm Southwest of England to complete a degree in biological sciences.

When I graduated and returned to the family home, the obvious place to start job hunting was to go back to the research institute I had left 3 years previously. Many of my ex-colleagues at the research institute had become friends, so it was an easy transition back into working life. In fact, there was a new research facility being set up concerned with producing a vaccine for the human immunodeficiency virus (HIV). I was lucky enough to secure the role of laboratory manager. I was tasked with ordering new equipment and consumables, learning about category four level of bioccontainment, and even having responsibility for my own research project.

Once the laboratory was functioning as it should, and I had some good results, I started to get an itch to pursue a PhD. It seemed as though everyone else around me had one, and that is what I needed to get to the next step in my career. I accepted a PhD position at the University of Wales, College of Medicine, in Cardiff, UK, researching the role of the immune system in rheumatoid arthritis.

Unfortunately, those 3 years killed any...
enthusiasm I had for laboratory work. Two whole years of doing the same types of experiments day in day out were soul-destroying. By the project’s third and final year, I had no idea what I wanted to do with my career. Luckily, someone came to the office one day, and they said they were a clinical research associate (CRA). He explained what the day job meant, and it sounded perfect! So that was the route I went down. At that point, without experience, it was tough to get a CRA position. So, I started a medical affairs role in a pharmaceutical company presenting clinical trial data to healthcare professionals. It was the foot in the door to the pharmaceutical industry that I needed to finally become a CRA.

I loved being a CRA. The work was varied, and I spent several days a week out and about meeting people. I made use of my interrogative brain, and it was also rewarding to see the positive effect of the investigational drug. I worked on projects studying many different therapeutic areas throughout my CRA life, some of which have made a massive difference to people with rheumatoid arthritis and those with cystic fibrosis. I worked as a CRA for 8 years, finally becoming freelance, allowing me to have more flexibility.

During my CRA career, I became a mum for the first time. Travelling and long hours were no longer a sensible option with a baby, especially as he has additional needs. So, I took a few months off and found a position working as a medical affairs specialist in the rare disease group of a pharmaceutical company. It was a short-term contract to cover a notice period for the person already hired for the full-time job. However, the team was a really nice group of people, and at the end of the contract, my line manager wanted me to stay, offering me a newly created role of scientific communications specialist. The bulk of my work was to write newsletters on recently published material for each of the rare diseases, sales and marketing documents, liaising with physicians who were undertaking their own research, bespoke literature reviews, and writing posters for conferences. They were my sole client for 4 years until there was a company restructure, the team was disbanded, and around the same time, I moved to France for a new life.

I had a period of time out of work when we moved to France. I had 12 months of maternity leave and then a further 18 months of searching for new work. Although I didn’t think a career break would be a deal-breaker, it was for all recruitment agencies that I tried. Of course, I understood that people currently holding a medical writing position were more up to date than I was. I applied for very junior positions, both as a CRA or as a medical writer, but I was told that I was either overqualified and wouldn’t stay in the post or had been out of the industry too long. I began to think that I would never be able to get a writing job again as I would never fit the criteria they were looking for.

Then, slowly, things started to move. I decided to set up Coufetery Comms, and rather than rely on recruitment agencies, I drove myself, I became my own advocate. Since starting medical writing, I can honestly say that I have never gained a contract through a recruitment agency. I’m telling this story not at all to be disparaging to those agencies, but simply to say that if you are struggling, do not feel that you need to rely on them. I am proof that you do not.

I learnt how to set up a website, something very easy to many I know, but not for me at that stage. I became more active on social media, and I reached out to colleagues from my past.
Then by chance, I answered a post from someone on LinkedIn who had been through a similar experience. It was a different industry to my own, but they had held down the same position for 30 years and were then made redundant. As they found themselves competing in a marketplace full of younger candidates, they were told that their salary expectations would be too high as they had too much experience. For the more junior positions, they were told that they had too much experience. It resonated so much with me that I replied to him with empathy. That single reply opened the door ajar for my first role in my new life. A medical writing company from Japan contacted me to say that they would be happy to give me a trial. I had won my first contract, conducting literature reviews.

The next break came when someone replied to a post I had put on a local Facebook group, asking whether there were any pharmaceutical companies or writing opportunities in the area. They suggested that I join the European Medical Writers Association. I attended my first conference in Warsaw, which was a very fruitful decision. I secured another contract, providing daily summaries for an educational platform for healthcare professionals.

At this same conference, I got chatting with a person sitting beside me in a workshop. We found out that their father-in-law was the paediatric consultant I had previously worked with during my time in the rare disease group. It had finally come full-circle. Soon afterwards, I had a call from them inviting me to join a very exciting paediatric rare disease project, writing patient treatment and management guidelines. This has been two years in the making, and I am proud to say they were recently published.

Since Warsaw, I have attended other EMWA conferences where I have met people I now consider friends, and we have helped each other out when it comes to finding work.

The snowball continues to grow as it rolls. After only 3 years since its conception, I now have an established business that continues to expand, with repeat business and new clients regularly coming to me. I am learning new therapeutic areas, I am comfortable knowing what I am good at, what interests me, and the direction I would like my business to take.

The moral of my story is to believe in yourself, don’t be swayed by other people’s ideas of your capabilities, and be your own advocate. I have learnt invaluable lessons about myself during this convoluted career path. I have felt isolated at times, without a mentor or a line manager to guide me, but this has meant that I have gained skills of persistence, diligence, and flexibility. If one route doesn’t work, I WILL find another.

Being out on our own requires skills beyond that of writing alone. While it gives us the freedom to choose our path, if allowed, a feeling of isolation can creep in, especially in the early days. This is when it’s wise to connect with other medical writers, discuss new avenues, set up new local groups, anything to keep the isolation demons at bay. We must be masters of our destiny.

In the words of Benjamin Franklin, American printer, publisher, author, inventor, scientist, and diplomat: “Energy and persistence conquer all things”.

Disclaimers
The opinions expressed in this article are the author’s own and not necessarily shared by EMWA.

Conflicts of interest
The author is the proprietor of Coufetery Comms and declares no conflicts of interest.

Author information
Heather L. Mason, PhD, has been in the pharmaceutical industry since 2002 and a freelance medical writer since 2010. While working on a variety of therapeutic areas, her passion lies within paediatric rare diseases and patient advocacy.