



## **From Over the Pond: Better a Galley Slave in Turkey than a Freelance Writer in America**

**by Susanna Dodgson**

When I joined the National Writers Union in July 2000, I was sold a black t-shirt with white writing on the front saying "Better a galley slave in Turkey than a freelance writer in America" with the quote astonishingly attributed to Karl Marx. I bought 6 of these shirts and liberally spread them around my relatives. I have been told that the general public's response to this message has not been all positive. We are offending Turks or galley slaves or something. The comment that freelance writers are badly off in America has never been argued.

So why am I a freelance writer in America? I will answer that slowly. First, we need to define our terms. What is a freelance medical writer? I thought I knew before I became one. My definition 5 years ago was a writer who earns a huge amount of money not working in a cubicle. Then I discovered that companies are hiring full-time employees to telecommute, working out of their home office entirely for a single employer and getting paid vacations and sick leave. Which makes them not work in cubicles while being paid regularly, and probably well. I discovered more recently that writers self-described as freelance are frequently working 5 days a week onsite in cubicles but with contracts that pay them hourly.

If the place of work (home or onsite) or the method of payment (per hour or per year) may not define freelance workers, what does? I think freelance is a state of mind rather than a tax code or whether you work in your night-clothes. If you believe that at any moment you can fly to

Iceland to trudge through the snow to bathe in the open thermal pools or visit your daughter's class to watch a play, you probably describe yourself as freelance. If you know you can do these things after you have completed your assignment and are constantly in fear of being fired, you are probably not freelance. Freelance writers own their days, understanding that any combinations of the 24 hours can be used for working. Further, they cope well with contract terminations, looking forward to the next contract and enjoying the present one as long as it lasts.

So why am I a freelance writer? Not by choice. Of all the permanent jobs that I would have liked in the past 5 years, 95% have involved sitting in a cubicle for 9 hours a day preceded and followed by an hour's drive. My ideal job is 15 to 20 min from my house, does not involve a cubicle but does include natural light, a few plants and preferably some cello music. I had a job like that 3 years ago, I shared an office with a graphic designer, from whom I learned Quark and basic design, and I wrote disease monographs happily and purposefully, watching the pine tree outside my window. After 8 months, my boss moved me into a closet without windows or ventilation. The tricky part

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was that any word I said was amplified by the air-conditioning pipes and overheard by the President of the company. Around that time, the 2 major accounts were lost and the need for an expensive medical writer churning out disease monographs vanished. I remember asking a sales manager whether she was worried that she and I were the only 2 employees who were over 30 and not short and gorgeous. This conversation was overheard and resulted in instant dismissal. The company has since purged itself of the sales manager too. It is now a young and gorgeous company, and they no longer prepare disease monographs. And the labour laws have not changed.

Fortunately, after that I fell onto my feet spectacularly, instantly acquiring 2 clients. In the month of my 50th birthday, I made more than twice the amount I had made all year when I came to America as a post-doctoral fellow 23 years previously. I have written about my trip to Athens covering an HIV-lipodystrophy conference in a previous column on HIV/AIDS. Since then, October 2001, I have been hired by about 6 clients for specific projects on short-term contracts lasting 6 to 12 months, with one contract continuing. Some of these contracts have been primarily onsite, and some have been so remote I have not even spoken with my client on the phone.

I understand from talking with other freelance medical writers at the EMWA conference in Lisbon that some parts of our lives are similar, like trolling for jobs through pharmaceutical company websites and "help wanted" adverts. What differs between American and European medical writers is that we are on our own. We can earn considerably more than writers with permanent jobs, but we had better stay healthy. A major hurdle for those of us with children is the spectre of university fees, which can exceed \$40,000 per year for 4 years. The cheapest health insurance I have been able to find for myself and my 2 minor children costs over \$1,000 per month, and I would still be expected to pay \$25 per doctor visit. I have not had health insurance since I left my 18-year job at the University of Pennsylvania in 1995. I take my children to their physician, dentist and optometrist once a year and pay about \$400. Fortunately we are all healthy and do not have chronic diseases.

I am a member of the National Writers Union subgroup, NWU Medwriters. Before the whole country changed into war mode, the Medwriters were having a civilized dialogue on healthcare. I have always found the inability of the richest country on Earth to care for its sick appalling, a view held by many Americans, but not by enough Americans to change the situation. I sponsored a resolution that was passed by the National Writers Union Delegates Assembly calling for support of universal health care. I had originally asked for a resolution supporting single-payer insurance, but that was shot down amidst arguments including "The Canadian system doesn't work!" "Single-payer is too socialist!" "Do you really want to give that power to the government!"

I have thought about what I can do to make life easier for myself. I ask only for a commute that is under 30 min, healthcare and to be able to see daylight while I am working. These goals are impossible in the United States, and yet standard in the European Union. I can try to fight the system in the United States, or I can relocate to the European Union. Anyone in Europe need a medical writer?

**Susanna J. Dodgson, Ph.D.**

<http://emeraldpademelon.com>