

SOCRA 2015 SALARY SURVEY

Summary Report 2015 Median Salaries, Sample Composition, and Differences vs. 2010 & 2004 Survey Results

December 10, 2015

Peter J. DePaulo, Ph.D.
Research Consultant
o: 410-266-5729
m: 215-527-6462
Pete@DePauloResearch.com

Background and Method

In October 2015, SOCRA asked the clinical researchers in its database to complete an on-line salary survey. The questions were the same as in the prior SOCRA salary survey conducted in June 2010, and similar to those in the initial 2004 survey. The data from all three surveys were analyzed by Pete DePaulo, Ph.D.

A total of 4,469 individuals responded this year and indicated their salaries, about the same as in 2010 (N=4546) and nearly three times the 1,550 who responded in 2004. (The effective sample bases for most questions were somewhat smaller than the total sample due to item non-response.) Nearly 9 in 10 (87%) of respondents are SOCRA members.

Throughout this report, “significant” or “significantly different” refers to statistical reliability, which does not necessarily mean “important.” A difference that is greater than would be expected by chance may be trivial or meaningless to particular readers.

- *Technical note:* A sample group (e.g., non-members) was considered significantly different from average if it differed significantly from all other respondents who answered the question at the .05 significance level, i.e., the 95% confidence level. However, in the case of a subgroup variable with more than two levels (e.g., title, region), a particular subgroup was not examined for significance unless an omnibus test such as an overall ANOVA or chi square revealed significance at the 95% level or better.

The main statistic used to report salaries is the interpolated median. This statistic was calculated for all but the smallest sample groups (with less than 50 respondents).

2015 Highlights and Major Differences from 2010 & 2004

The main data are summarized in two Excel spreadsheets that accompany this narrative report: *Median Salaries in 2015 vs.2010* and 2004, and *Total Sample & Member Breakdowns 2004 and 2010*.

- As shown in the *Median Salaries* spreadsheet, the interpolated **median salary for all 2015 respondents is ~\$63,700**, which is up 5.8% from 2010 and 29.6% from 2004, in raw (non-adjusted) dollars. **After adjusting for inflation, the current median is up 4.7% from 2004 but down 3.3% since 2010.**
 - According to the Consumer Price Index (CPI) of the U.S. Bureau of Labor Statistics, inflation was:
 - 14.5% from December 2004 to June 2010
 - 9.1% from June 2010 to October 2015
 - 25.0% from December 2004 to October 2015
- Notable exceptions – subgroups with above-average salary increases exceeding inflation since 2010 as well as 2004 – are highlighted in yellow in the *Median Salaries* spreadsheet:
 - Respondents with high school as highest level of education
 - Middle Atlantic region
 - Research Nurses
 - Data Managers
- Readers interested in how their own salaries compare with the compensation of their peers can look through the *Median Salaries* document to find the average salaries of relevant sample groups (e.g., the reader’s own gender, age group, education, or experience in clinical research).
- Most of the salary differences between subgroups are what might be expected. For example, respondents with above-average salaries tend to be older, more educated, more experienced (in years of clinical research employment and in number of therapy areas), and more engaged in professional activities (SOCRA annual conference and chapter meeting attendance, workshop participation, etc.).
- The demographic profile of the 2015 respondent population and how it compares to the prior surveys is shown in the *Breakdowns* spreadsheet.
 - For every sample subgroup (e.g., men, master’s degree holders, etc.) the percent of **members** in that subgroup is shown separately from the percent of the **total sample** in that subgroup. These two percentages usually are

very similar (differing only by tenths of a percentage point), because nearly 90% of the sample consists of members.

- In the *Breakdowns* sheet, noteworthy trends (statistically significant, consistent from survey to survey, and potentially interesting) are highlighted in yellow (increasing from 2004 to 2015) and orange (decreasing).
 - One of the larger *decreases* is in the percent who “belong to other professional organizations,” down from 56% in 2004 to 40% in 2015. Perhaps SOCRA is increasingly viewed as the only professional organization needed by clinical researchers. However, other explanations for the decrease in other memberships might be feasible (e.g., if the SOCRA database is, for some reason, increasingly attracting individuals who belong to only one professional organization).
- The *Breakdowns* sheet suggests that survey respondents have been shifting demographically into mostly higher-income subgroups over the past decade. That is, from 2004 to 2015, most trends have been toward greater representation of respondent segments with above-average salaries (and, correspondingly, lesser representation of subgroups with lower incomes). For example, clinical researchers – at least those responding to SOCRA salary surveys – are increasingly:

	2015	2010	2004
More educated:			
Masters Degree	28.2%	23.4%	19.3%
Doctoral Degree	5.9%	4.2%	3.1%
More experienced:			
15+ years of experience in clinical research	27.9%	21.7%	15.9%
More involved professionally:			
SOCRA member 5+ years	39.6%	31.7%	22.8%
SOCRA CCRP certified	68.2%	62.1%	59.4%
Attended 4+ SOCRA educational workshops	11.3	8.6%	3.6%
Attended a SOCRA chapter	36.9%	29.8%	17.%
Salaried (vs. paid hourly)	77.6%	74.2%	70.0%

- The 2010 Survey Summary Report noted that the increase in salaries from 2004 to 2010 was greater than expected from inflation alone – and, suggested that the above-inflation increment (+4.7%) could be due at least partly to the increased

representation of higher-paid segments among the 2010 vs. 2004 respondents. However, the increase in salaries from 2010 to 2015 was *less* than expected from inflation (-3.3%) despite the continuing trend towards greater representation of higher-paid respondent subgroups. Thus, there may be no simple explanation for the inflation-adjusted median salary decline (from 2010 to 2015) in terms of respondent demographics.

Despite the trends noted above and highlighted in the *Breakdowns* spreadsheet, the respondent profiles of the three surveys (2015, 2010, 2004) are quite similar in most respects. Notably, in all three surveys:

- About 9 in 10 respondents are SOCRA members.
- About 9 in 10 are female.
- 70%-78% are salaried.
- Usually the same subgroups had above-average salaries (and the same groups had below-average salaries) in all three surveys.
- Nearly half hold bachelor's degrees as their highest level of education.
- 80%-88% are age 25-54.
- 83%-87% reside in the U.S.
- About half of the U.S. respondents reside in the South or Midwest (the regions with the highest representation). About 15% reside in New England or the Southwest (the regions with the lowest representation).
- On average (mean), they have been in their current positions 4-5 years.
- The most common job title, by far, is Clinical Research Coordinator (held by about 3 in 10 respondents).
- By far the most common employers are hospitals (32% - 37%) and academic research centers/organizations (27% - 33%).
 - Each of the other employers are represented by less than 10% of respondents.
- By far the most common area of study/trial experience is pharmaceutical (7 in 10 respondents).
- Oncology remains, by far, the most common therapeutic area of clinical research experience (53% - 60%), although there has been a significant downward trend since 2004.
- 59% - 68% are certified as a CCRP with SOCRA.
 - The trend has increased steadily from 59% in 2004 to 68% in 2015.
 - Among those certified, the mean number of years certified has increased from 3.1 to 4.8.
- The percent of non-CCRP respondents planning to take the SOCRA exam remains at just above 50%.
 - However, there is a significant downward trend from 56% in 2004.

- Among those not certified and not planning to take the exam, the most common reasons continue to be “not needed for my current job” (38% - 43%) and “already certified through another organization (27% - 29%).
- The proportion who have never attended a SOCRA Annual Conference remains at about 7 in 10. Likewise, just over half in all three surveys have not attended a SOCRA educational workshop.
 - However, as noted earlier, the percent who attended 4+ educational workshops has increased significantly since 2004.
- Employer incentives for obtaining professional certification are essentially the same in all three surveys:
 - For nearly 6 in 10 respondents, their employers *pay for* professional certification.
 - About 2 in 10 did get or will get financial compensation *for receiving* certification.
 - For nearly 80% of those who will receive financial compensation, it will be in the form of a salary increase.

Addendum: Detailed Subgroup Comparisons

This section includes, for example, detailed comparisons of members vs. non-member respondents, men vs. women, types of therapeutic experience, levels of SOCRA involvement, etc.

Detailed Subgroup Analyses

METHODOLOGICAL NOTE: So as not to overwhelm the reader with hundreds of additional, minuscule differences between subgroups, these analyses do not show every percentage that differs between one subgroup and the total-sample figure (or between two contrast groups) at the 95% confidence level. Dr. DePaulo used discretion in deciding which to show and which to omit. For example, percentage differences of less than 7 percentage points are not included unless they seemed worth noting in particular cases. The purpose of these analyses was to convey some understanding of the various segments of the SOCRA database rather than to provide a complete listing of every statistically significant difference.

Largest or most noteworthy differences in the data tables are highlighted.

SOCRA Members vs. Nonmembers	2
Gender	4
Age	6
Education.....	8
Resident Country.....	10
Region of the U.S.....	12
Job Title.....	14
Salaried vs. Hourly Compensation.....	17
Employer	18
Clinical Research Study/Experience.....	23
Number of Therapeutic Areas of Research Experience.....	26
Years in Clinical Research	27
Years in Your Current Position.....	28
Years as a SOCRA Member	29
Preference for Receiving the SOCRA Source Journal	30
CCRP Certified with SOCRA.....	31
Years as a CCRP Certified by SOCRA	33
Intention to take SOCRA’s CCRP Exam.....	34
Attended the SOCRA Annual Conference.....	36
Attended a SOCRA Educational Workshop	37
SOCRA Chapter is Close Enough to Attend Meetings	38
Attended a Local SOCRA Chapter meeting	39
Belong to Other Professional Organizations.....	40
Professional Certification Paid by Employer.....	41
Financial Compensation for Receiving Certification	43

SOCRA Members vs. Nonmembers

These observations are illustrated in the data table on the next page.

As in the prior salary surveys, non-member respondents continue to report significantly higher salaries (on average) than members. This salary difference has not diminished since 2004: Non-members' median salary is 12.7% higher than members' median in 2015, vs. 12.3% higher in 2010 and 4.9% higher in 2005.

This member vs. non-member difference in average salaries may be explained at least in part by the following statistically-significant demographic differences, all of which were seen in prior survey data:

- Non-members are (on average) older than members.
- Non-members have more experience – specifically, in more therapeutic areas, in years working in clinical research, and years in their current positions.
- In the mix of employers, the biggest difference is that members are more likely than non-members to be hospital employees (who have below-average salaries).
- In job titles, members are substantially more likely than non-members to be Clinical Research Coordinators, one of the lower-paid positions
- Non-U.S. residents report lower average salaries than U.S. residents, and member respondents include a higher proportion of non-U.S. residents than do non-members.

Most other differences in the data table are as one might expect (and, again, replicate the 2010 findings): Members are more likely than non-members to have their professional organization membership and their professional certification fees paid by their employers, and to have attended a SOCRA chapter meeting. The largest difference we found is in preference for receiving the *SOCRA Source Journal*: By 2:1 margins, members prefer to receive it in hard copy while nonmembers prefer it online.

One other similarity with prior data is that non-members are more likely than members to belong to another professional organization.

Although the differences between the member vs. non-member profiles were generally in line with what we observed in prior surveys, there were exceptions:

- Regional differences apparent in 2010 (more South residents among members, more Midwesterners among non-members) did not pan out in 2015.
- Substantially more non-members than members claim cardiovascular as a therapeutic area of experience in 2015.

	<u>SOCRA Members</u>	<u>Non- members</u>
	<u>N=3928</u>	<u>N=589</u>
Members significantly higher		
Hospital employee	38%	32%
Title: Clinical Research Coordinator	33%	23%
Non-U.S. resident	13%	10%
Employee benefit package includes professional organization membership	42%	34%
Professional certification fees paid by employer	60%	53%
Attended at least one local SOCRA chapter meeting	39%	26%
Prefer to receive <i>SOCRA Source Journal</i> by hard copy mailing	61%	30%
Non-members significantly higher		
Median salary	\$62,992	\$70,962
Age (mean)	43.0	44.8
Number of therapeutic areas of experience	3.1	3.5
Years of experience in clinical research (mean)	10.8	12.1
Years in your current position (mean)	5.1	5.7
United States resident	87%	90%
Prefer to receive <i>SOCRA Source Journal</i> online	39%	70%
Belong to another professional organization	39%	49%
Therapeutic area: Cardiovascular	30%	39%

Gender

These observations are illustrated in the data table on the next page.

Men's average salaries continue to be higher than women's. However, the difference is now much smaller (though still statistically significant) than in the prior salary surveys: Men's median salary now is only ~\$2,500 higher than women's this year, compared to about ~\$10,000 higher in 2010 and ~\$5,000 higher in 2004.

Other 2015 gender differences are mostly quite similar to what we found in 2010 and 2004:

Male clinical researchers differ significantly from females in several ways that could explain their significantly higher salaries:

- More likely than women to:
 - work at least 40 hours a week on clinical research
 - hold advanced degrees
 - be Clinical Research Associates
 - work for a pharmaceutical company or contract research organization
 - have a benefit package that includes an annual salary bonus
 - belong to another professional organization
- Experienced in more therapeutic areas
- Less likely than women to be hospital employees (whose median salaries are below average)

However, other significant gender differences continue to run counter to the overall salary correlations.

- Women, despite their lower salaries, are more likely than men to:
 - be Research Nurses (whose salaries are above average)
 - have a benefit package that includes an employee assistance program (also associated with above-average salaries)
- Women also, on average:
 - are older
 - have been working in clinical research and in their current positions longer
 - have been certified as CCRPs longer than male respondents.

See Table, next page

	Female	Male
	<u>3934</u>	<u>510</u>
<u>Women significantly higher</u>		
Benefit package includes employee assistance program	60%	52%
Age (mean)	43.7	39.7
Title: Research Nurse	12%	3%
Hospital employee	38%	30%
Years of experience in clinical research	11.1	9.4
Years in current position	5.3	4.1
Certified as a CCRP with SOCRA	69%	63%
Certified as a CCRP more than 3 years (BASE: SOCRA CCRP certified)	51%	41%
<u>Men significantly higher</u>		
Median salary	\$63,447	\$66,000
Work 40+ hours per week in clinical research	62%	68%
Benefit package includes annual salary bonus	23%	34%
Advanced degree (master's or doctoral)	34%	48%
Title: Clinical Research Associate	8%	14%
Contract Research Organization employee	9%	13%
Pharmaceutical employee	3%	8%
Number of therapeutic areas of experience	3.1	3.6
Member of another professional organization	39%	48%

Age

These observations are illustrated in the data table on the next page and are consistent with prior survey results unless otherwise noted.

Older respondents tend to have higher salaries than younger respondents. This may be due to these distinguishing characteristics (correlated with salary) of older respondents:

- more years of experience in clinical research and in their current positions
- higher involvement in SOCRA: they have been CCRPs longer and are more likely than younger respondents to have attended a SOCRA annual conference, a SOCRA educational workshop and a SOCRA chapter meeting.
- more likely than younger respondents to be research nurses and members of another professional organization.

Younger respondents are more likely than older respondents to:

- be male, college graduates, and Clinical Research Coordinators
- have their professional certification fees paid by their employers and an annual salary bonus as an employee benefit.
- want to receive the SOCRA Source Journal online. Whereas about 2 in 3 older respondents prefer to receive the Journal in hard copy, younger respondents are about evenly split between online vs. hard copy preferences.
 - A general trend noted in our main report – respondents increasingly preferring to access the Source Journal via online rather than hard copy – is evident in these age data: Whereas majorities in all age groups in 2010 still preferred hard copy, younger respondents in 2015 now are about evenly divided between preferring online access vs. preferring hard copy.

Overall, mostly similar results were obtained in the 2010 and 2004 age analysis. One exception was the shift toward online access to the Journal (noted above). Another difference from prior surveys is that research/trial experience in Public Health now differs remarkably by age: Respondents age <30 now are more than twice as likely to have Public Health experience as respondents age 55+.

Age	Under 35	35-44	45-54	55+
	<u>1380</u>	<u>1066</u>	<u>1127</u>	<u>857</u>
Younger respondents significantly higher				
Male	16%	13%	9%	6%
College graduate	93%	85%	74%	73%
Professional certification fees paid by employer	66%	58%	55%	53%
Employee benefit: annual salary bonus	26%	24%	24%	20%
Clinical Research Coordinator	41%	30%	27%	24%
Clinical Research/Trial Experience in Public Health	19%	16%	11%	8%
Prefer to receive <i>SOCRA Source Journal</i> online	51%	46%	38%	32%
Plan to take the CCRP exam with SOCRA (BASE: not CCRP certified)	64%	55%	43%	31%
Older respondents significantly higher				
Salary is \$65,000+	32%	51%	54%	60%
Female	84%	87%	91%	94%
Research Nurse	5%	8%	13%	20%
Years of experience in clinical research (mean)	6.1	10.1	13.3	16.7
Years in your current position (mean)	2.8	4.6	6.3	8.4
Prefer to receive <i>SOCRA Source Journal</i> in hard copy	49%	54%	61%	68%
Have been a SOCRA CCRP more than 3 years	27%	52%	60%	72%
Attended SOCRA annual conference at least once	21%	29%	35%	42%
Attended at least one SOCRA educational workshop	37%	46%	55%	55%
Attended at least one SOCRA chapter meeting (BASE: a chapter is close enough to attend)	44%	51%	59%	64%
Member of another professional organization	32%	39%	45%	46%

Education

These observations are illustrated in the data table on the next page and are consistent with prior survey results unless otherwise noted.

The well-known correlation between education and income is evident: Nearly twice as many advanced-degree holders have \$65,000+ salaries versus respondents with less than a Bachelor's degree.

- The following groups are above average in both salaries and educational levels: Men, salaried employees, Research Managers, Project Managers, have clinical research/trial experience in Behavioral Research or Public Health, have a SOCRA chapter close enough to attend, and belong to another professional organization.
- The following are below average in both salaries and educational levels: Women, Clinical Research Coordinators; employed in physician-based practices.

However, there were exceptions to the income-education correlation:

- These subgroups have more education but lower salaries: Academic research center/organization employment; not certified but plan to take the CCRP exam;
- These have less education but higher salaries: Research Nurses; older respondents; respondents with more years in their current positions; CCRP certified more than 3 years.

Less educated (i.e., without a bachelor's degree) respondents seem particularly interested in advancing their careers through SOCRA: Compared to respondents with advanced degrees, those without bachelor's degrees are:

- More likely to plan to take the SOCRA CCRP exam (if not already certified)
 - In fact, they are more likely than their more-educated counterparts to get financial compensation for receiving professional certification.
- More likely to have attended a SOCRA chapter meeting (if they live or work close enough)
 - This finding is new for 2015

Differences from prior surveys:

- More educated respondents now are considerably more likely than their less-educated counterparts to receive tuition reimbursement as an employee benefit.
- In 2010, clear majorities ($\geq 60\%$) at all educational levels preferred to receive the SOCRA Source Journal in hard copy. In 2015, that is still the case for less-educated respondents (67% prefer hard copy) but now nearly half (47%) of those with advanced degrees prefer to access the Journal online.

Highest Degree:	High school/ Associates	Bach- elor's	Master's/ Doctorate
	<u>750</u>	<u>2033</u>	<u>1557</u>
Less educated respondents significantly higher			
Form of compensation is hourly	42%	21%	13%
Female	94%	89%	84%
Age (mean years)	48.3	41.7	42.1
Clinical Research Coordinator	41%	30%	29%
Research Nurse	12%	14%	6%
Physician based research practice employee	15%	6%	4%
Years in your current position (mean)	7.0	4.9	4.5
Prefer to receive SOCRA Source Journal: in hard copy	67%	56%	53%
Certified as a SOCRA CCRP more than 3 years (BASE: CCRP certified)	59%	49%	46%
Plan to take the SOCRA CCRP exam (BASE: not certified)	55%	52%	46%
Get financial compensation for receiving professional certification	28%	22%	19%
Have attended a SOCRA chapter meeting (BASE: chapter is close enough to attend)	62%	52%	50%
More educated respondents significantly higher			
Salary \$65,000+	30%	48%	57%
Form of compensation is salaried	57%	79%	87%
Tuition reimbursement is an employee benefit	47%	56%	57%
Male	6%	11%	16%
Research Manager	7%	10%	16%
Project Manger	3%	8%	11%
Academic research center/organization employee	22%	32%	38%
Clinical research/trial experience: Behavioral research	6%	10%	17%
Clinical research/trial experience: Public health	7%	13%	21%
Prefer to receive SOCRA Source Journal: online	33%	44%	47%
SOCRA chapter is close enough to attend	54%	61%	63%
Belong to another professional organization	34%	35%	50%

Resident Country

These observations are illustrated in the data table on the next page and are consistent with prior survey results unless otherwise noted.

U.S. respondents reported the highest salaries in 2015, as they did in 2004. However, in 2010, Canadians reported salaries that were slightly but not significantly higher than in the U.S.

Residents of countries other than the U.S. and Canada reported the lowest salaries in 2015 and 2010. (The 2015 sample of “other” country residents was too small to compute a reliable median.)

The most consistent difference in the table below is that the U.S. residents have more in their benefit packages than residents of other countries. One exception is that residents of “other” countries are more likely to get an annual salary bonus.

The largest between-country differences are in type of compensation: Canadians are much more likely to be paid hourly (rather than salaried) and to work fewer than 40 hours per week on clinical research.

Other noteworthy differences between countries of residence:

- U.S. residents:
 - Older
 - More likely to have academic research employment and to have experience in medical devices or hematology.
- Canadians:
 - More likely to be hospital employees, Clinical Research Coordinators, and CCRP certified.
- Residents of countries other than the U.S. or Canada:
 - Higher proportion of men
 - More likely to get an annual salary bonus, to be pharmaceutical employees, to belong to another professional organization, and to have experience in metabolic disease
 - Less likely to have a SOCRA chapter close enough to attend.

Differences between the 2015 vs. prior survey data:

- As noted, Canadians were at statistical parity with the U.S. in median salary in 2010. Perhaps this was due simply to sampling variation, because their salaries were significantly lower in both the following and preceding surveys (2015 and 2004).
- Currently, Canadians are the most likely to be Clinical Research Coordinators and to work at a hospital. Previously, residents of countries *other* than the U.S. and Canada were the most likely to be in these categories.

	U. S.	Canada	Other
	<u>3846</u>	<u>422</u>	<u>143</u>
U.S. residents significantly higher			
Median salary	\$64,491	\$59,615	\$53,200
Professional certification fees paid by employer	62%	39%	33%
Benefit package includes training/education	56%	44%	46%
Benefit package includes tuition reimbursement	60%	24%	21%
Benefit package includes professional organization membership	42%	27%	26%
Benefit package includes health insurance	92%	77%	60%
Benefit package includes dental insurance	87%	77%	39%
Benefit package includes retirement package	81%	56%	40%
Benefit package includes annual/sick leave	86%	75%	53%
Benefit package includes employee assistance	61%	56%	22%
Benefit package includes long term disability	69%	61%	29%
Age (mean years)	43.4	41.6	41.7
Employer: academic research center/organization	34%	23%	25%
Study/trial experience: Medical devices	28%	20%	21%
Therapeutic area: Hematology	26%	21%	20%
Canada residents significantly higher			
Form of compensation is hourly (vs. salaried)	20%	44%	15%
Less than 40 weekly hours on clinical research	40%	66%	34%
Clinical Research Coordinator	31%	38%	35%
Hospital employee	36%	43%	39%
CCRP certified	67%	78%	73%
Other countries significantly higher			
Benefits package includes annual salary bonus	24%	17%	37%
Male	11%	14%	17%
Pharmaceutical employee	3%	6%	10%
Therapeutic area: Metabolic disease	16%	18%	25%
Belong to another professional organization	39%	39%	50%
Other countries significantly lower			
SOCRA chapter is close enough to attend	62%	54%	34%

Region of the U.S.

New England (N=198)

- Highest median salary of all other regions this year (\$72,995) as well as in both prior surveys.
- Highest percent of **pharmaceutical company** employees (7%); also in 2010.
- Highest percent whose title is **Project Manager** (13%); also in 2010.
- High percent who **never attended the Annual Conference** (74%); also in 2010.
- Lowest in having **attended a chapter meeting** (41% - base is respondents who are close enough to a chapter to attend), but not found in 2010.
- Highest in **professional certification paid by employer** (68%), but not found in 2010.

Middle Atlantic (675)

- Significantly higher:
 - Higher **salaries** (median \$72,551), as in 2010, though in 2004 they were about average.
 - More are **pharmaceutical company** employees (6%), like in 2010.
 - Highest (among all the regions) percent of **government employees** (10%), also in 2010.
 - Highest percent with **post-graduate degrees** (42%), also was relatively high last year.
 - Highest number of **years of experience in clinical research** (12.4) and **in their current position** (5.9), though only somewhat high in 2010.
 - Highest in **belonging to another professional organization** (46%), also relatively high last year.
- Significantly lower:
 - Low percent who get financial compensation for receiving professional certification (17%); was the lowest in 2010.
 - Lowest in professional certification fees paid by employer (55%), though only slightly below average in 2010
 - Lowest in percent certified as CCRP with SOCRA (59%), though only slightly below average in 2010.

South (1,138)

- **Salaries are about average** this year (median \$63,406) and not significantly different from the total sample, as they also were in 2010 and 2004.
- Highest percent working for a **contract research organization** (12%), as also in 2010.
- Highest in percent **working 40+ weekly hours on clinical research** (71%); also was high in 2010.

Midwest (945)

- **Lowest median salary** vs. other regions (\$59,216); also lowest in 2010 and below average in 2004.
- Highest percent **paid hourly** (24%); also somewhat high in 2010.
- Highest in **tuition reimbursement** as an employee benefit (68%); also highest in 2010.
- High percent **professional certification fees paid by employer** (66%); but was average in 2010.
- Highest in **financial compensation for receiving professional certification** (31%); but was average in 2010.
- Highest percent with title **Clinical Research Coordinator** (39%); also was somewhat high in 2010
- Highest percent **hospital employee** (42%); also high in 2010.
- Highest percent **CCRP certified** (75%); but the regional differences were not significant in 2010.
- Lowest percent with a SOCRA chapter close enough to attend (58%); also was low in 2010.

Southwest (372)

- Median **salary (\$63,720)** is close to average and not significantly different from the total sample median; also close to average in 2010 though significantly below average in 2004.
- Highest percent who **prefer online (vs. hardcopy) access to SOCRA Source Journal** (50%); only slightly above average in 2010.
- Highest percent with a **SOCRA chapter close enough to attend** (75%); though this was average in 2010.
- Highest percent who have **attended at least one SOCRA chapter meeting: 55%** (BASE: respondents with a chapter close enough to attend); also highest in 2010.
- High % who get financial **compensation for receiving professional certification** (30%); was highest among the regions in 2010.

West (658)

- **Median salary** is above average (\$68,838), as it was in 2010. It was about average in 2004.
- Highest percents of employees of **medical device firms (7%)** and **biotech firms (4%)**, as was also found in 2010 for both types of employers
- High percent who prefer to receive the SOCRA Source Journal **online** (48%). In 2010, this percent was highest among the regions.

Job Title

Clinical Research Coordinators (N=1,406)

- Significantly higher:
 - 90% are **SOCRA members**, vs. 87% total sample.
 - About half (49%) work in **hospitals** – vs. 37% of the total sample.
- Significantly lower:
 - Low median salary (\$52,820)
 - Unlikely to work in a contract research organization (3%, vs. 9% of total sample).
 - Fewer therapeutic areas of experience: mean = 2.6, vs. 3.2 for the total sample
- Similar results were found in 2010 & 2004.

Research Nurses (466)

- Significantly higher:
 - Median **salary** (\$72,009). Unlike most other subgroups, Research Nurses' inflation-adjusted salaries increased since 2010 as well as 2004.
 - Highest percent (vs. other titles) who are **women** (96%, vs. 89% in the total sample).
 - By far the **oldest**: mean age 49.0.
 - The most years **in their current positions**: mean = 6.7, vs. 5.2 in total sample.
 - Over half (57%) work in **hospitals**, vs. 38% of the total sample.
 - Highest percent who **belong to another professional organization**: 54% vs. 40% total sample.
- Below-average:
 - Percent with advanced degrees (master's/doctoral) (20% vs. total sample 36%).
 - Very unlikely to work in a contract research organization (1%, vs. 9% of total sample) or a pharmaceutical company (<1% vs. 4% total sample).
 - Fewer therapeutic areas of experience: mean 2.6, vs. 3.2 for the total sample
- Similar results were found in 2010 & 2004.

Clinical Research Associates (385)

- Significantly higher:
 - Highest median **salary** of all the titles (\$79,569). Also were highest in 2010. They increased the most since 2004, when they were above average but not highest.
 - Nearly half (48%) have an **annual/salary bonus** in their benefit package. This is highest vs. the other titles and well above the total-sample percent (24%).
 - High percent who are **men**: 18%. The total sample is 12% male.
 - More **therapeutic areas of experience**: mean = 4.0, vs. 3.2 for the total sample.
 - Nearly half (47%) work in **contract research organizations**, much higher than in the total sample (9%).
 - More likely to work in a **pharmaceutical company** (10% vs. 4% of total sample) or a **medical device company** (17% vs. 4%).
 - More likely to be a **contractor/self-employed consultant** (3% vs. 1%).
- Unlikely to be employed by:

- Academic research centers/organizations: 11% vs. 33%
- By far the lowest (among the job titles) in hospitals: 8%, vs. 36% of the total sample.
- Fewest CCRP certified: 50% vs. total sample 68%.
- Similar results were found in 2010 & 2004

Research Managers (N=498)

- Median **salaries** well above average (\$78,140).
- Half hold **advanced degrees** (50%), highest of the titles.
- More work in an **academic research** setting: 43%, vs. 33% of the total sample.
- Few are employed by a contract research organization (2% vs. total sample 9%).
- Highest **years of clinical research experience**: mean 13.0 vs. total sample 10.9.
- Similar results were found in 2010 and 2004.

Data Managers (118)

- Significantly higher:
 - 39% are **paid hourly**, vs. 22% of the total sample.
 - Nearly half (45%) **work fewer than 40 hours per week on clinical research**, vs. 37% of total sample.
 - More work in **hospitals**: 42%, vs. 37% of total sample.
 - More have **oncology** as a therapeutic area of experience: 75%, vs. 53% of the total sample. However, they report fewer areas of experience overall – see below.
- Significantly lower:
 - Median salary is lowest of the titles year (\$52,714) – even though, **percentage-wise, their salaries have increased the most since 2004**.
 - Fewer therapeutic areas of experience: mean 2.6, vs. 3.2 for the total sample
 - Fewer hold an advanced degree: 22%, vs. 36% total sample
- Similar results were found in 2010 & 2004.

Project Managers (354)

- Significantly higher:
 - Median **salary** (\$76,481).
 - Percent who hold **advanced degrees** (47% vs. total sample 36%).
 - Percent who work for a **pharmaceutical company** (7% of project managers vs. 4% of total sample), **medical device company** (9% vs. 4%), or a **contract research organization** (15% vs. 9%).
- Significantly lower:
 - Employed by a hospital: 19%, vs. 37% of the total sample.
 - Younger – mean 40.9 years vs. 43.2 for the total sample
- Similar results were found in 2010 & 2004.

Clinical Research Assistants (134)

- Significantly higher:
 - Half (50%) are **paid hourly** – highest of all the titles.
 - About half (49%) **work less than 40 hours weekly on clinical research**, also highest.
- Significantly lower:
 - Younger – mean age 41.0 years vs. total sample 43.2
 - **Lowest (among the titles) median salary (\$45,588)**
 - Percent with an advanced degree (24% vs. total sample 36%)
 - Fewer therapeutic areas of experience: mean = 2.4, vs. 3.2 for the total sample.
 - **Lowest percent with research/trial experience in pharmaceutical, 53% vs. total sample 71%**
 - **Fewest years of experience in clinical research: 8.1, vs. 10.9 in the total sample.**
 - **Lowest percent with CCRP certification: 50%, vs. 68% in the total sample.**
 - **Lowest percent who are members of another professional organization: 25%, vs. 40% in the total sample**
- Vs. 2010:
 - No longer more likely to work in a hospital.
- 2004 sample: not analyzed – too few respondents with this title

Quality Assurance specialists (108)

- Above average:
 - Vs. other titles, **one of the highest median salaries (\$79,211).**
 - Highest number of **therapeutic areas of experience**: mean = 4.8, vs. 3.1 for the total sample.
 - Percent who work in a **pharmaceutical company**: 13%, vs. 4% of total sample.
 - **Highest percent who have attended at least one SOCRA educational workshop: 64%, vs. 47% in the total sample.**
 - **Male**: 21% vs. total sample 12%
- Vs. 2010: Similar results
- 2004 sample: Subgroup data not analyzed because N was under 100.

Regulatory Affairs specialists (238)

- Above-average:
 - **Highest percent residing in the U.S.: 96%, vs. total sample 87%.**
 - Percent working in an **academic research** setting: 46%, vs. 33% of total sample.
- Below-average median salary (\$56,563).
- Vs. 2010: Similar results
- 2004 sample: Subgroup not analyzed because N was under 100.

Salaried vs. Hourly Compensation

As expected (and as found also in 2010 & 2004), *type* of compensation (salaried vs. hourly) is related to many of the variables associated with *level* of compensation, e.g., education, therapeutic experience, U.S. residence, job title, etc. That is, subgroups with higher compensation tend to be salaried rather than hourly employees (and those subgroups with lower compensation tend to be receiving hourly compensation). One exception involves respondents with academic research employers: Their compensation is significantly lower than average, yet the percentage who are salaried is significantly higher than average (see table below). Another exception is that years in one's current position is correlated with higher compensation but also hourly compensation.

	Salaried	Hourly
	<u>3456</u>	<u>965</u>
Salaried significantly higher:		
Median salary	\$67,477	\$51,757
Work 40 or more hours per week on clinical research	69%	42%
Benefit package includes health insurance - This is just one example. Salaried respondents also are significantly more likely to receive every other employee benefit: tuition reimbursement, professional membership, certification fees, bonus, dental insurance, sick leave, etc.	95%	80%
Education: Post-graduate (master's or doctorate)	40%	22%
Employer: Contract research organization	10%	5%
Employer: Medical device company	5%	1%
Employer: Academic Research Center/Organization	36%	22%
Professional certification is paid by employer	61%	51%
Number of therapeutic areas of experience (mean)	3.2	2.9
SOCRA chapter is close enough to attend	63%	54%
Member of another professional organization	41%	35%
U.S. resident	90%	79%
Clinical Research Associate	10%	4%
Research Manager	13%	3%
Project Manager	9%	4%
Hourly significantly higher		
Employer: Hospital	34%	47%
Employer: Physician Based Practice	5%	12%
Plan to take the SOCRA CCRP exam (BASE: not CCRP certified)	49%	57%
Years in current position	5.0	6.1
Canada resident	7%	19%
Resident of Midwest U.S. region (BASE: U.S. residents); note Midwest has lower median salary	23%	29%
Clinical Research Coordinator	28%	45%
Clinical Research Assistant	2%	7%

Employer

Employers with at least 100 respondents (N) are analyzed here.

Hospital employees (N=1,644)

- Significantly higher
 - Percent paid **hourly** is 28%, vs. 22% in the total sample.
 - Benefit package includes:
 - **tuition reimbursement**: 63% vs. total sample 55%.
 - **employee assistance**: 67% vs. 59%.
 - **Clinical Research Coordinators**: 42% vs. 26%.
 - **Research Nurses**: 16% vs. 11%.
 - Get **financial compensation for receiving professional certification** 28% vs. 22%.
- Significantly lower
 - Median salary \$60,499
 - Benefit package includes:
 - Professional organization membership: 35%, vs. 40% in total sample.
 - Annual salary bonus: 17% vs. total sample 28%.
 - Clinical Research Associates: 2% vs. 9%
 - Number of therapeutic areas of experience: mean 2.8, vs. 3.2 in the total sample.
 - Years of experience in clinical research: mean 10.1 vs. 10.9.
 - Work 40 or more hours per week on clinical research: 57% vs. 63%.
- Vs. 2010 & 2004 survey: mostly similar results

Physician Based Research Practice employees: (305)

- **In several ways they are similar to hospital employees.** Major exceptions: less in their benefit packages, & not likely to work less than 40 hours a week on clinical research.
- Significantly higher
 - **Hourly compensation**: 38%, vs. 21% of the total sample.
 - **Age**: mean 45.3 years vs. total sample 43.2.
 - **Clinical Research Coordinators**: 42% vs. 32%.
 - **Research Managers**: 19% vs. 11%.
 - Clinical **research/trial experience includes pharmaceutical**: 81% vs. 71%.
 - **Years in your current position**: mean 6.2 vs. 5.2.
 - Prefer to receive Source Journal by **hard copy** mailing: 71% vs. 57%.
- Significantly lower
 - Median salary \$57,500
 - **Have less in their benefit packages: tuition reimbursement 28% vs. total sample 55%**, dental insurance 72% vs. 84%, retirement 63% vs. 77%, employee assistance program 33% vs. 59%, long-term disability 49% vs. 67%.
 - Have an advance degree (master's/doctorate): 20% vs. 36%.
 - Clinical Research Associates: 1% vs. 9%.
 - Therapeutic areas of experience: mean 2.8 vs. 3.2.

- SOCRA chapter is close enough to attend: 50% vs. 60%,
- Vs. 2010 & 2004 survey: mostly similar results.

Contact Research Organization employees (N=403)

- Significantly higher
- Median salary \$79,608
 - **Salaried employees**: 88%, vs. 78% in the total sample.
 - **Work 40+ hours per week on clinical research**: 81% vs. total sample 63%.
 - **Benefit package includes annual salary bonus**: 48% vs. 24%.
 - **Canadians**: 14% vs. 10%
 - **South region** of the U.S. (BASE: U.S. only): 41% vs. 29%.
 - **Clinical Research Associates**: 45% vs. 9%.
 - **Number of therapeutic areas** of experience: mean 4.4 vs. 3.2.
- Significantly lower
 - Benefit package includes tuition reimbursement 45% vs. total sample 55%, retirement package 67% vs. 77%.
 - Age – **younger**. Mean 41.2 vs. 43.2.
 - Clinical Research Coordinators: 9% vs. 32%; Research Nurses: 2% vs. 11%.
 - Years in your current position: 3.5 vs. 5.2.
 - Employer pays for professional certification 49% vs. 59%.
 - Financial compensation for receiving professional certification 11% vs. 22%
- Vs. 2010 & 2004: mostly similar results.
 - Exception: percent who are male is not very much above average now (16% vs. 11%) as it was in 2010 (20% vs. 10%).

Pharmaceutical company employees (151)

- Significantly higher
 - **Highest (vs. other employers) median salary**: \$93,611.
 - **Work 40+ hours per week on clinical research**: 72%, vs. 63% of the total sample.
 - **Benefit package includes annual salary bonus** 74% vs. 24%; **professional organization membership**: 48%, vs. 40% in the total sample.
 - **Male**: 26%, vs. 12% of the total sample.
 - **Advanced degree** (master's/doctorate): 48% vs. 36%.
 - **Canadians**: 18% vs. 10%.
 - **Middle Atlantic region** of the U.S. (BASE: U.S. residents): 28% vs. 14%.
 - **Clinical Research Associates**: 25% vs. 9%.
 - **Project Managers**: 16% vs. 8%.
 - **Number of therapeutic areas** of experience: mean 4.5 vs. 3.2
 - Prefer to receive SOCRA Source Journal **online**: 51% vs. 43%.
 - **Belong to another professional organization**: 50% vs 40%.
- Significantly lower
 - SOCRA members: 80%, vs. 89% of the total sample.
 - South region of the U.S. (BASE: U.S. residents): 16% vs. 29%.
 - Younger: mean 40.1 years vs. total sample 43.2.
 - Clinical Research Coordinators: 3% vs. 32%.

- Research Nurses: 0% vs. 11%.
- Years in your current position: mean 3.3 vs. 5.2.
- SOCRA CCRP certified: 54% vs. 68%.
- Plan to take the CCRP exam with SOCRA (BASE: not certified): 34% vs. 50%.
- Attended at least one SOCRA chapter meeting (BASE: Chapter close enough to attend): 44% vs. 53%.
- Would get financial compensation for receiving professional certification: 9% vs. 22%.
- Vs. 2010 & 2004 survey: similar results
 - Exception: Pharma employers now are not significantly higher than average in years of clinical research experience as they were in 2010.

Academic Research Center/Organization employees (N=1,464)

- Significantly higher
 - **Salaried**: 85%, vs. 78% in the total sample.
 - **Benefit package** is significantly more likely to include most of the benefits listed on the survey. Largest differences:
 - **Tuition reimbursement**: 67% vs. total sample 55%
 - **Retirement package**: 89% vs. 77%.
 - **Advanced degrees** (master's/doctorate): 42% vs. 36%.
 - **Research managers** 15% vs. 11%
 - Clinical research/trial experience includes **behavioral research**: 17% vs. 12% and **public health** 19% vs. 14%.
 - **Certified as a CCRP** with SOCRA: 73% vs. 68%.
 - **SOCRA chapter is close enough** to attend: 67% vs. 60%
 - Of those with a SOCRA chapter close enough to attend, more have **attended at least one chapter meeting**: 59% vs. 53%.
- Significantly lower
 - Median salary \$61,377.
 - **Benefit package includes annual salary bonus**: 12%, vs. 24% in the total sample.
 - Clinical Research Associates: 3% vs. 9%.
 - Fewer therapeutic areas of experience: mean 3.0 vs. 3.2.
- Vs. 2010 & 2004: mostly similar results.

Medical Device Company employees (170)

- Significantly higher
 - **Very high median salary**: \$87,500.
 - More **salaried**: 94%, vs. 78% of the total sample.
 - More **work 40+ hours per week on clinical research**: 78% vs. total sample 63%.
 - **Benefit packages are significantly more likely to include most of the possible benefits listed on the survey. The largest differences are:**
 - **Annual salary bonus**: 62% vs. 24%
 - **Professional organization membership** (65% vs. 40%),
 - **Training/education**: 74% vs. 54%,
 - More **men**: 18% vs. 12%.

- **U.S. residents:** 94%, vs. 87% in the total sample.
- Among U.S. residents, more in the **West region:** 30% vs. 19%.
- **Many more Clinical Research Associates: 38% vs. 9%.**
- More **Project Managers:** 19% vs. 8%.
- Many more have therapeutic area experience in **cardiovascular:** 52% vs. 31%.
- Member of other professional organizations: 49% vs. 40%.
- Significantly lower
 - Age (younger): mean 41.1 years vs. total sample 43.2.
 - Among U.S. residents, fewer in the South region: 18%, vs. total sample 29%.
 - **Very few Clinical Research Coordinators (3% vs. 32%) or Research Nurses (1% vs. 11%)**
 - Years in one's current position: mean 3.2 vs. 5.2.
 - Certified as a CCRP with SOCRA: 55% vs. 68%.
 - Receive financial compensation for receiving professional certification: 11% vs. 23%.
- Vs. 2010: mostly similar results
- 2004: Medical Device Company data not analyzed because N was under 100.

Independent Research Site employees (N=173)

- Significantly higher
 - More **hourly** compensation: 33%, vs. 22% of the total sample, even though more do work **at least 40 hours per week on clinical research** (73% vs. total sample 63%).
 - More U.S. residents are in the **south** (38% vs. total sample 29%) and **west** (29% vs. 19%) regions.
 - **More Clinical Research Coordinators (45% vs. 32%).**
 - More clinical research/trial experience includes **pharmaceutical:** 81% vs. 71%.
 - More **therapeutic areas of experience** (mean 3.7 vs. 3.2).
- Significantly lower
 - Median salary \$57,273
 - **Fewer benefit packages include tuition reimbursement (21% vs. total sample 55%), health insurance (71% vs. 89%), dental (65% vs. 84%), retirement (46% vs. 77%), annual/sick leave (68% vs. 84%), employee assistance (23% vs. 59%), long-term disability (39% vs. 67%).**
 - Post-graduate degrees: 18% vs. 36%
 - Fewer U.S. residents are in the Midwest region: 13% vs. 24%.
 - **Very few Clinical Research Associates: 1% vs. 9%.**
 - **Despite having an above-average number of therapeutic areas of experience overall, fewer include oncology: 30% vs. 53%.**
 - Fewer have a SOCRA chapter close enough to attend: 42% vs. 60%.
- Vs. 2015: mostly similar results
- 2004 survey: Subgroup data not analyzed because N was under 100.

Government employees (139)

- Significantly higher
 - Median **salary**: \$76,786, well above average though down in real dollars since \$82,818 in 2010.
 - More have a **post-graduate degree** (50% vs. 36% of the total sample).
 - **Older** (mean age 45.8 vs. total sample 43.2)
 - Many more U.S. residents are in the **Middle Atlantic** region (which includes Maryland but not Washington DC or Virginia): 40%, vs. 14%.
 - More have clinical research/trial experience in **public health** (32% vs. 14%) or **behavioral research** (23% vs. 12%).
 - More **years of experience in clinical research**: mean 13.4 vs. 10.9.
 - More **years in the current positions**: mean 6.8 vs. 5.2/
 - More have attended at least one **SOCRA annual conference**: 47% vs. 31%.
- Significantly lower
 - Fewer benefit packages include certification fees (28%, vs. 43% of the total sample) or tuition reimbursement (35% vs. total sample 55%).
 - Fewer U.S. residents are in the Midwest: 6% vs. 24%.
 - Fewer have clinical research/trial experience in pharmaceutical (53% vs. 71%).
 - Fewer are CCRP certified with SOCRA: 60% vs. 68%.
 - Of those who are certified with SOCRA, fewer plan to take the SOCRA exam: 36% vs. 50%.
- Vs. 2010: mostly similar results. Exceptions:
 - Lower salaries than in 2010, but the government subgroup sample is larger (139 vs. 103 in 2010); perhaps SOCRA's appeal has broadened to government staff with relatively lower incomes.
 - Not significantly more likely to belong to another professional organization as was the case in 2010.
- 2004 survey: Subgroup data not analyzed because N was under 100.

Clinical Research Study/Experience

Pharmaceutical study/trial experience (N=3,168)

Because the great majority (71%) of respondents has pharmaceutical experience, significant differences from the total sample will tend to be small mathematically. Therefore, the differences below are versus respondents **without pharma experience**, rather than versus the total sample.

- Significantly higher
 - Median **salary**: \$64,268.
 - Work **40+ hours per week on clinical research**: 67% vs. 59% of respondents without pharmaceutical experience.
 - Employed by **contract research organizations** (11% vs. 5%), **physician-based practices** (8% vs. 4%), and, of course, **pharmaceutical companies** (5% vs. 1%).
 - More **therapeutic areas of experience** (3.5 vs. 2.4).
- Significantly lower
 - Fewer U.S. residents are in the Midwest region: 22% vs. 27%.
 - Unlikely to be employed by medical device companies: 2% vs. 9%.
- Vs. 2010 & 2004: Mostly similar results, except some differences that were significant in 2010 were not significant this year though in the same direction, e.g., significantly more Canadians in 2010 (12% vs. 8%) but not significantly more in 2015 (10% vs. 8%, p=.10).

Medical device study/trial experience (N=1,209)

- Significantly higher
 - **Median salary**: \$68,010, highest of the study/trial experience areas.
 - More **U.S. residents**: 90%, vs. 86% of the total sample.
 - More **therapeutic areas of experience** (3.9 vs. 3.2), especially **cardiology** (55% vs. 31%)
 - More are **members of another professional organization**: 46% vs. 40%.
- Significantly lower
 - Fewer have therapeutic area experience in oncology: 40%, vs. 53% of the total sample.
 - Fewer years in one's current position: mean 4.4 vs. 5.2.
- Vs. 2010 & 2004 survey: mostly similar results.

Behavioral research study/trial experience (N=522)

- Significantly higher
 - **U.S. Residents:** 92% vs. 87% among the total sample.
 - **Post-graduate degrees** (master's/doctorate): 51% vs. total sample 36%.
 - In **academic research centers/organizations:** 47% vs. 32%.
 - More **areas of therapeutic experience** (mean 3.9 vs. 3.2), especially **public health** (41% vs. 14%), **pediatrics** (40% vs. 25%), and, of course, **psychiatry** (36% vs. 11%).
- Significantly lower
 - Median salary \$61,560
 - **Younger:** mean age 40.2 vs. 43.2.
 - Fewer Research Nurses: 5% vs. 11%.
 - Fewer are in physician-based research groups (3% vs. 7%) or in contract research organizations (5% vs. 9%).
 - Fewer years in one's current position: mean 4.7 vs. 5.2.
- Vs. 2010 & 2004 survey: Mostly similar results. Exception:
 - Though the median salary is close to average as it was in 2010 and in 2004, the small difference below the total sample now is statistically significant.

Biologics study/trial experience (N=1057)

- Significantly higher
 - Median **salary:** \$66,700.
 - As might be expected and as found previously, respondents with biologics experience are more likely to work for a **biotech company**. However, the difference, though significant statistically, is small: 3.3% vs. total sample 1.7%.
 - More have clinical research/trial experience in **medical devices:** 37% vs. 27%.
 - More **areas of therapeutic experience** (mean 4.0 vs. 3.2), especially **oncology** (64% vs. 53%), **hematology** (36% vs. 26%), **vaccines** (24% vs. 15%), and **inflammation/immunology** (28% vs. 17%).
- Significantly lower: Nothing noteworthy
- Vs. 2010 & 2004: Mostly similar results.

Public health and epidemiology study/trial experience (N=639)

- Median salary, \$62,482 close to (and not significantly different from) the total sample.
- Significantly higher
 - **Post-graduate degrees (master's/doctorate): 51%, vs. 33% of total sample.**
 - In **academic research centers/organizations** (44% vs. total sample 32%) and **government** (7% vs. 3%).
 - **Clinical research/trial experience in behavioral research: 33% vs. 12%.**
 - **Number of areas of therapeutic experience:** mean 3.6 vs. 3.2.
- Significantly lower
 - **Younger:** Mean age 40.0 vs. total sample 43.2.
 - Fewer Research Nurses: 5% vs. 11%.
 - Fewer have clinical research/trial experience in pharmaceutical: 53% vs. 71%.
- Vs. 2010 & 2004: Mostly similar results.

Number of Therapeutic Areas of Research Experience

As might be expected, clinical researchers with more therapeutic areas of experience earn more money and tend to be in higher-paid categories: male, Clinical Research Associates, pharmaceutical or contract research firm employees, CCRP certified 3+ years, attended a SOCRA annual conference, and belong to another professional organization. A mostly similar pattern of results was found in the prior 2010 and 2004 salary surveys; one major exception is that the correlation with education is not significant this year as it was previously.

One possibly counterintuitive finding is that respondents with more years in their current positions tend to have *less* therapeutic experience. Perhaps clinical researchers who gain more therapeutic experience use that leverage to get a new position rather than stay in their current ones.

	Therapeutic Areas		
	0-1	2-3	4+
	<u>1464</u>	<u>1658</u>	<u>1347</u>
<u>Less experienced</u> (in number of therapeutic areas) respondents are significantly higher:			
Hourly (vs. salaried) compensation	25%	22%	19%
Clinical Research Coordinator	35%	34%	25%
Research Nurse	11%	12%	8%
Hospital employee	40%	39%	31%
Years in your current position (mean)	5.5	5.2	4.9
Plan to take the CCRP exam with SOCRA (BASE: not certified)	58%	53%	40%
<u>More experienced</u> respondents are significantly higher			
Annual compensation \$65,000+	41%	46%	57%
Work 40+ hours per week on clinical research	59%	60%	71%
Benefit package includes annual salary bonus	21%	21%	32%
Male	9%	11%	15%
Clinical Research Associate	6%	8%	13%
Contract research organization employee	6%	7%	15%
Pharmaceutical company employee	2%	3%	6%
Years of experience in clinical research	9.7	10.8	12.4
Have been a SOCRA member 4+ years	43%	47%	55%
CCRP certified more than three years (BASE: certified)	47%	49%	56%
Member of another professional organization	37%	38%	46%
Attended SOCRA annual conference at least once	28%	30%	34%

Years in Clinical Research

As we found in 2004 and 2010, some correlates of being in the clinical research field a long time are more-or-less predictable: higher compensation; older age; having attained SOCRA CCRP status; having accumulated experience in several study/trial and therapeutic areas; and having one of the highest-paid positions – Research Manager. However, what may not be so predictable is that respondents who have been in clinical research the longest are the *least* educated, i.e., least likely to have a bachelor’s degree.

Among respondents who are not CCRP certified, intent to take the SOCRA CCRP exam declines with years of experience in clinical research. Presumably, the later-career professionals perceive less need for certification.

	<u>Years in Clinical Research</u>		
	<u>0-4</u>	<u>5-9</u>	<u>10+</u>
	<u>755</u>	<u>1445</u>	<u>2262</u>
Respondents with fewer years of experience are significantly higher:			
Hourly (vs. salaried) compensation	27%	22%	20%
Male	16%	13%	9%
Bachelor’s or higher (post-graduate) degree	88%	86%	79%
Clinical Research Coordinator	44%	36%	25%
Clinical Research Assistant	7%	3%	2%
Hospital employee	45%	38%	33%
Plan to take the CCRP exam with SOCRA (BASE: not certified)	76%	55%	31%
Professional certification is paid by employer	69%	59%	55%
Can/did get financial compensation for professional certification	30%	23%	19%
Prefer online access to the SOCRA Source Journal	49%	44%	41%
Respondents with more years of experience are significantly higher:			
Median annual compensation	\$52,015	\$59,412	\$72,748
Benefit package includes employee assistance program	53%	56%	64%
Research Manager	3%	9%	15%
Certified as a CCRP with SOCRA	47%	73%	72%
Member of another professional organization	35%	36%	44%
Attended at least one SOCRA chapter meeting (BASE: chapter is close enough to attend)	38%	51%	59%
Attended SOCRA annual conference at least once	19%	24%	39%
Attended at least one SOCRA educational workshop	38%	41%	45%
Prefer mailed hardcopy access to the SOCRA Source Journal	51%	56%	59%
Number of therapeutic areas of experience (mean)	2.4	2.9	3.6
Years in your current position (mean)	2.1	3.6	7.3
Age (mean)	35.4	38.9	48.6

Years in Your Current Position

Several variables associated with longevity in the field (prior page) also correlate with longevity in one's current position: higher compensation, age, longevity as a SOCRA member, SOCRA CCRP status, SOCRA annual conference attendance, and *lack* of a bachelor's degree. However, it might not be expected that being *relatively new* in one's current position (less than 2 years) is associated with salaried (vs. hourly) compensation and a higher-paying employer (contract research organizations). Perhaps many respondents who do not stay in their current positions very long are "fast trackers."

The 2015 results were similar to 2015 and 2004. One exception: Now, number of therapeutic areas of experience is *not* related significantly with position longevity like it was in 2010.

It may seem curious that certification fees as an employee benefit is associated most with the *middle* range of position longevity (3-4 years). However, the same pattern was observed in 2010 so it probably is not a fluke.

	<u>Years in Current Position</u>		
	<u>0-2</u>	<u>3-4</u>	<u>5+</u>
	<u>1687</u>	<u>947</u>	<u>1826</u>
<u>Respondents with fewer years in current position are significantly higher</u>			
Compensation is salaried (vs. hourly)	80%	81%	74%
Bachelor's or higher (post-graduate) degree	88%	86%	76%
Clinical Research Associate	13%	7%	6%
Contract research organization employee	13%	8%	6%
Plan to take the CCRP exam (BASE: not SOCRA certified)	64%	49%	35%
Male	14%	11%	9%
<u>Respondents with 3-4 years in position are significantly higher</u>			
Benefit package includes certification fees	42%	47%	41%
<u>Respondents with more years in current position are significantly higher</u>			
Annual compensation \$65,000+	46%	43%	51%
Compensation is hourly (not salaried)	19%	19%	26%
Research Nurse	8%	9%	14%
Certified as a CCRP with SOCRA	63%	71%	72%
Have been a SOCRA CCRP >3 years (BASE: certified)	38%	35%	67%
Attended the SOCRA Annual Conference at least once	24%	29%	37%
Have been a SOCRA member 4+ years	33%	37%	67%
Years of experience in clinical research (mean)	8.3	9.4	14.1
Age (mean years)	38.9	41.6	48.0

Years as a SOCRA Member

Longevity as a SOCRA member is associated with high compensation, a highly paid job title (Research Manager), experience in oncology, membership in another professional organization, and predictable correlates: older age, years of experience in clinical research, experience in more therapeutic areas in general, SOCRA annual conference and chapter attendance, and SOCRA CCRP status.

Conversely, having more education, planning to take the CCRP exam, and a higher proportion of men are associated with *fewer* years as a member, just as they are associated with fewer years in one's current position (see prior page).

Mostly similar results were found in 2010 and 2004. One exception is that spending at least 40 hours per week in clinical research is not currently correlated with member longevity as it was in 2010.

	Years as a Member		
	0-1	2-3	4+
	<u>1063</u>	<u>964</u>	<u>1862</u>
Respondents with fewer years as a member are higher			
Bachelor's or higher (post-graduate) degree	87%	84%	79%
Plan to take the CCRP exam (BASE: not SOCRA certified)	72%	64%	33%
Professional certification is paid by employer	66%	57%	58%
Clinical Research Coordinator	38%	36%	28%
Prefer online access to SOCRA Source Journal	48%	40%	35%
Male	14%	12%	10%
Respondents with more years as a member are higher			
Annual compensation \$65,000+	34%	40%	56%
Benefit package includes employee assistance	59%	56%	64%
Research Manager	6%	10%	15%
Number of therapeutic areas of experience (mean)	2.7	3.0	3.4
Therapeutic areas of experience include oncology	47%	50%	59%
Certified as a CCRP with SOCRA	53%	79%	89%
Member of another professional organization	24%	26%	50%
Attended the SOCRA Annual Conference at least once	17%	22%	44%
Attended at least one SOCRA chapter meeting (BASE: chapter is close enough to attend)	33%	56%	69%
Prefer mailed hard copy access to SOCRA Source Journal	53%	60%	65%
Years of experience in clinical research (mean)	6.9	8.7	14.1
Age (mean years)	37.6	41.2	47.1

Preference for Receiving the SOCRA Source Journal

On most survey questions, respondents who prefer to receive a mailed hard copy of the SOCRA Source Journal are quite similar to those who prefer to access the Journal online – as evident in how small the table below is. The main differences are that the hardcopy folks are older and more involved with SOCRA than those who prefer online.

These profile differences are quite consistent with what we found in 2010, when the wording of the question was the same; it was about access to the *Journal*. In 2004, the question was about access to the *Membership Directory* rather than the Source Journal; nevertheless, the 2004 data also revealed that those preferring hardcopy were older and more likely to be SOCRA members than those who prefer online.

One difference between 2015 and 2010 & 2004 is that now the median salaries do not differ significantly between those who prefer hardcopy vs online, whereas they did differ significantly in 2010 and 2004 (when we asked about access to a different publication). Actually, the direction of the difference was the same in all three surveys: those who prefer online had a higher median salary than those who prefer hardcopy. The difference was rather small in all three surveys but too small to reach statistical significance in 2015.

Preference for how to receive the SOCRA Source Journal		
	Hard copy mailing	Online-SOCRA Homepage
	<u>2492</u>	<u>1888</u>
Prefer hard copy significantly higher		
SOCRA members	94%	81%
(If a member) Have been a member 4+ years	52%	42%
Age (mean)	44.5	41.5
Years of experience in clinical research (mean)	11.3	10.5
CCRP certified by SOCRA	75%	61%
Plan to take the CCRP exam with SOCRA (BASE: not certified)	57%	47%
Attended at least one SOCRA chapter meeting (BASE: a chapter is close enough to attend)	58%	47%
Prefer online significantly higher		
Non-members	6%	19%

CCRP Certified with SOCRA

As in the 2010 and 2004 surveys, this year's SOCRA CCRP-certified respondents tend to be those who are involved with SOCRA in other ways – longer-term members who have attended the SOCRA annual conference and a SOCRA chapter meeting. Also, the following statement from SOCRA's review committee about the 2004 CCRP data also applies to the 2010 and 2015 data, in which the same respondent categories again are correlated with SOCRA certification:

“Three subgroups -- Clinical Research Coordinators, hospital employees, and academic center employees – are particularly likely to be CCRP-certified with SOCRA, as persons working in those areas founded SOCRA. Also... three subgroups – males, master's/doctoral degree holders, and pharmaceutical company employees – are *less* likely than average to be CCRP-certified with SOCRA. SOCRA's review committee *believes* that these sub-groups have only recently become aware of the benefits of SOCRA membership and certification based on trends we have seen within the organization.”

An implication of the above quotation is that the differences between SOCRA-certified and non-certified researchers should be narrowing as the noted subgroups become more aware of SOCRA benefits. The data do indeed suggest at least a small shift in that direction: The *differences* between CCRP vs. non-CCRP respondents in the percentages who are male, post-graduate educated, or pharmaceutical employees are now smaller than they were in 2010. Post-graduate educated respondents are not shown at all in the table below because they no longer significantly distinguish the certified vs. non-certified respondents. As for males and pharmaceutical employees, the differences are still significant but now they are each only 2 percentage points (see table below) rather than 3 points as in 2010.

Non-CCRP-certified respondents have had slightly higher median salaries than SOCRA certified respondents in all three surveys. In 2015 and 2004 the differences were large enough to reach statistical significance. Nevertheless, the big picture is that the median salary difference has stayed relatively small over the past decade (<\$2,200 in 2004, 2010, and 2015).

See table, next page.

	SOCRA certified?	
	Yes – CCRP	No
	<u>3031</u>	<u>1,412</u>
CCRPs are significantly higher		
SOCRA member	98%	64%
If SOCRA member, have been a SOCRA member 4+ years	55%	23%
Benefit package includes certification fees <i>NOTE: On 7 of the 11 benefit items listed in the survey, significantly more CCRP than non-CCRP respondents had the benefit.</i>	47%	37%
Canada resident	11%	7%
Midwest region (U.S. residents)	27%	18%
Clinical Research Coordinator	34%	27%
Hospital employee	38%	34%
Academic research center/org. employee	35%	28%
Therapeutic area experience includes oncology	56%	46%
Years of experience in clinical research (mean)	11.3	10.0
Years in your current position (mean)	5.4	4.7
Prefer to receive the <i>SOCRA Source Journal</i> in hardcopy mailing	62%	46%
Attended at least one SOCRA annual conference	32%	28%
Attended at least one SOCRA chapter meeting (BASE: chapter is close enough to attend)	60%	38%
Get financial compensation for receiving professional certification	23%	20%
Non-certified are significantly higher		
Median salary	\$63,195	\$65,060
U.S. resident	86%	91%
Male (<i>see discussion on prior page</i>)	11%	13%
Pharmaceutical company employee (<i>see discussion on prior page</i>)	3%	5%
Prefer to receive the <i>SOCRA Source Journal</i> online	38%	54%
Belong to another professional organization	36%	49%

Years as a CCRP Certified by SOCRA

The results of this analysis are mostly predictable, as they were in 2010 and 2004: Longevity as a SOCRA CCRP is positively related to annual compensation, age, SOCRA chapter and annual conference attendance, a higher-paid title (Research Manager), and experience in more therapeutic areas. Those with fewer years as a CCRP are more likely to have a lower-paid position, Clinical Research Coordinator.

One difference that runs counter to the higher incomes of longer-term CCRPs is that they have, on average, *less* education than newer CCRPs. This also was found in the prior surveys.

Previously, those with fewer years as a CCRP also were significantly more likely to have been hospital employees; this year, the correlation with hospital employment was in the same direction but small and not significant, so it is not shown in the table.

	Years as a CCRP		
	0 - 1 year	2 - 3 years	>3 years
BASE: SOCRA-certified CCRPs			
Group	710	791	1496
Respondents with fewer years as a CCRP are significantly higher:			
Bachelor's or higher degree	88%	84%	79%
Male	16%	11%	9%
Clinical Research Coordinator	41%	38%	28%
Prefer to access the <i>SOCRA Source Journal</i> online	43%	41%	34%
Professional certification paid by employer	71%	56%	58%
Respondents with more years as a CCRP are significantly higher:			
Median annual compensation \$65,000+	32%	40%	56%
Age (mean)	37.5	41.5	47.2
Research Manager	6%	11%	15%
Number of therapeutic areas of experience (mean)	2.9	2.9	3.4
-- Oncology experience (differed the most with years as a CCRP)	52%	49%	60%
Years of experience in clinical research	7.1	9.1	14.4
Years in your current position	3.4	4.1	7.0
Attended the SOCRA annual conference at least once	14%	24%	44%
Attended at least one SOCRA chapter meeting (BASE: chapter is close enough to attend)	30%	40%	51%
Prefer to receive the <i>SOCRA Source Journal</i> in hardcopy mailing	42%	59%	69%

Intention to take SOCRA's CCRP Exam

As we found in 2010 and 2004: Among respondents who are *not* certified as a CCRP with SOCRA, those *intending to take SOCRA's certification exam* tend to be lower-paid, less experienced (i.e., in fewer therapeutic areas), younger, and newer members who have not (yet) attended the SOCRA annual conference – compared to those non-certified respondents who are *not* planning to take the exam. Also, those intending to take the exam tend to have a title associated with lower pay (Clinical Research Coordinator or Clinical Research Assistant) and a lower-paying employer (hospital). Evidently, they seek certification to help them advance in the field of clinical research.

Indeed, clinical researchers not yet certified and planning to take the exam are more likely to have a couple of incentives to seek certification (compared to those who do not intend to take the exam): (1) certification fees paid by their employers and (2) financial compensation for receiving their certification.

Likewise, as we also found in the prior surveys: respondents who are not certified with SOCRA and do NOT intend to take the exam are older, already have higher compensation, and are more likely to have a post-graduate degree as well as a higher-paying title (Research Manager) and employer (pharmaceutical company). In short, they may lack interest in SOCRA certification because they feel they don't need it. They also skew, as in 2004 and 2010, toward non-members, longer-term SOCRA members, and annual conference attendees.

See table, next page.

Plan to take the CCRP certification exam with SOCRA?		
BASE: Not certified as a CCRP with SOCRA.	Yes, plan to take it	No
	<u>688</u>	<u>672</u>
Plan to take the exam are significantly higher		
SOCRA member	79%	49%
Compensation is hourly	26%	20%
Professional certification is paid by employer	63%	48%
Will get financial compensation for receiving professional certification	25%	15%
Clinical Research Coordinator	38%	16%
Clinical Research Assistant	6%	3%
Hospital employee	39%	28%
Prefer to receive the <i>SOCRA Source Journal</i> in hardcopy mailing	50%	40%
Not planning to take exam are significantly higher		
Median annual compensation	\$55,598	\$77,755
Non-member of SOCRA	22%	51%
Benefit package includes annual salary bonus	25%	33%
Post-graduate degree (master's/doctorate)	32%	38%
Age (mean)	39.8	45.9
Research Manager	6%	13%
Pharmaceutical company employee	3%	7%
Number of therapeutic areas of experience (mean)	2.8	3.8
Years of experience in clinical research (mean)	7.4	12.7
Years in your current position (mean)	3.5	5.9
Have been a SOCRA member 4+ years	12%	39%
Prefer online access to the <i>SOCRA Source Journal</i>	50%	60%
Have attended at least one SOCRA annual conference	21%	36%
Member of another professional organization	38%	61%

Attended the SOCRA Annual Conference

Compared with non-attendees, SOCRA conference attendees tend to be:

- higher paid – and less likely to be in a lower paid position (Clinical Research Coordinator) or with a lower paid employer (hospital);
- older;
- more experienced; and
- more involved professionally in other ways (besides conference attendance): attending SOCRA chapter meetings, CCRP certified, and holding membership in another professional organization.

These findings are very consistent with the 2010 and 2004 survey results.

Attended the SOCRA annual conference?		
	Yes, at least once	No
	<u>3023</u>	<u>1339</u>
Conference attendees are significantly higher		
Median annual compensation	\$69,818	\$61,675
Benefit package includes professional organization membership	49%	38%
Age (mean)	46.2	42.0
Number of therapeutic areas of experience (mean)	3.5	3.0
Years of experience in clinical research (mean)	13.3	10.0
Years in your current position (mean)	6.4	4.7
CCRP certified with SOCRA	71%	68%
CCRP certified for more than 3 years (Base: CCRP certified)	70%	42%
Attended a SOCRA chapter meeting at least once (BASE: chapter is close enough to attend)	64%	48%
Belong to another professional organization	44%	38%
Have been a SOCRA member 4+ years	68%	39%
Never attended are significantly higher		
Clinical Research Coordinator	26%	34%
Hospital employee	33%	38%
Plan to take the CCRP exam with SOCRA (BASE: not certified)	38%	56%

Attended a SOCRA Educational Workshop

The results for having attended a SOCRA educational workshop were almost all the same as for having attended the annual conference – see the prior page. Workshop attendees are more highly paid, older, more experienced (in number of years in clinical research and their current positions), and more professionally involved than workshop non-attendees.

The only difference versus the conference attendance findings is in breadth of therapeutic area experience. Whereas conference attendees are significantly higher than conference non-attendees in number of therapeutic areas of experience (see prior page), the corresponding difference between workshop attendees vs. non-attendees was small and did not quite reach the $p < .05$ level of significance (so it is not shown in the table).

Again, these findings are very consistent with the 2010 and 2004 survey results.

Attended a SOCRA educational workshop?		
	<u>Yes, at least once</u>	<u>No</u>
	<u>2041</u>	<u>2267</u>
Conference attendees are significantly higher		
Median annual compensation	\$66,661	\$61,448
Benefit package includes professional organization membership	45%	38%
Age (mean)	45.0	41.6
Years of experience in clinical research (mean)	11.9	10.1
Years in your current position (mean)	5.6	4.8
CCRP certified with SOCRA	72%	66%
CCRP certified for more than 3 years (Base: CCRP certified)	60%	41%
Attended the SOCRA annual conference at least once	46%	16%
SOCRA chapter is close enough to attend	65%	56%
Attended a SOCRA chapter meeting at least once (BASE: chapter is close enough to attend)	67%	37%
Member of another professional organization	43%	37%
Have been a SOCRA member 4+ years	59%	38%
Never attended are significantly higher		
Clinical Research Coordinator	28%	35%
Hospital employee	35%	38%
Plan to take the CCRP exam with SOCRA (BASE: not certified)	43%	55%

SOCRA Chapter is Close Enough to Attend Meetings

As in prior survey results, respondents who have a chapter located close enough for them to attend meetings are more likely (than respondents without a close chapter) to be higher paid, academic research employees, with at least a bachelor's degree, who have attended a SOCRA educational workshop, and who, of course, have attended a chapter meeting.

However, despite the parallels noted above, it seems these two subgroups (who have or do not have a chapter close enough) may not be as distinctive in 2015 as they were as in prior surveys. A few noteworthy correlates found in 2010 were either not significant or too small to be worth noting in 2015: SOCRA annual conference attendance, membership longevity, and employment in a physician-based research practice. Also, the overall difference between the two median salaries (~\$2,400), though still significant statistically, is smaller now than in the prior surveys.

Thus, the 2015 differences were more-or-less similar to the 2010 and 2004 surveys, although there were considerable exceptions.

Is there a SOCRA chapter close enough for you to attend meetings?		
	Yes	No
	<u>2653</u>	<u>1731</u>
Respondents "close enough" are significantly higher		
Median annual compensation	\$64,522	\$62,150
Benefit package includes tuition reimbursement NOTE: Those "close enough" also are significantly more likely than their cohorts to get almost all the other employee benefits listed in the survey.	61%	48%
Bachelor's or higher degree	85%	80%
U.S. resident	89%	83%
Academic Research Center/Org. employee	37%	27%
Attended a SOCRA educational workshop	51%	42%
Attended a SOCRA chapter meeting	53%	13%
"Not close enough" are significantly higher		
Compensation is hourly	20%	26%
Non-U.S. resident	11%	17%

Attended a Local SOCRA Chapter meeting

BASE: Respondents who indicated that a SOCRA chapter is close enough to where they live or work to attend meetings.

As we found in 2010 & 2004, attendance at a local chapter meeting is correlated with other forms of involvement with SOCRA: SOCRA membership, longevity as a SOCRA member, attendance at the annual conference, and certification as a CCRP with SOCRA. And, as in 2010, the current data show chapter attendance also correlated with age, academic employment, longevity in clinical research and in one's current position, and residence *outside* the U.S.

Note that these percents are based only on respondents who have a chapter close enough to attend. Thus, respondents residing outside the U.S. are more likely to have (or at least to perceive that they have) a close-enough chapter in their home countries than U.S. residents are.

However, U.S. regional differences observed in 2010 (e.g., chapter attendees more likely than non-attendees to reside in the South or Southwest) are not evident in 2015.

As in 2010 and 2004, chapter meeting attendance is not significantly correlated with annual compensation.

<u>Attended a SOCRA chapter meeting?</u>		
	<u>Yes—at least one</u>	<u>No</u>
BASE: A chapter is close enough to attend	<u>1404</u>	<u>1244</u>
<u>Chapter attendees are significantly higher</u>		
SOCRA member	91%	84%
Have been a SOCRA member at least 4 years	61%	34%
Certified as a CCRP with SOCRA	79%	59%
Attended the SOCRA annual conference at least once	38%	24%
Attended at least one SOCRA educational workshop	66%	35%
Age	44.5	41.0
Years of experience in clinical research (mean)	12.1	10.0
Years in your current position	5.7	4.7
Reside <i>outside</i> the U.S.	14%	7%
Employee of academic research center/organization	41%	32%
Prefer to receive <i>SOCRA Source Journal</i> by hard copy mailing	60%	50%
<u>Never attended are significantly higher</u>		
Benefit package includes annual salary bonus	21%	28%
U.S. resident	86%	93%
Planning to take the CCRP exam with SOCRA	43%	53%
Prefer to access <i>SOCRA Source Journal</i> online	40%	50%

Belong to Other Professional Organizations

In 2015 as in prior survey results, the clearest correlations are with professional status and experience: Respondents who are members of another professional organization (relative to their cohorts who do not hold another professional membership) tend to have higher incomes, higher degrees, a higher-paid title (Research Nurse), and more experience in terms of both therapeutic areas and time in field.

SOCRA involvement may seem to be correlating in opposite ways with membership in another professional organization: On one hand, SOCRA membership and CCRP status are associated more with *not* having a membership in another professional organization than with having one. On the other hand, *longer-term* membership in SOCRA, and attendance at SOCRA national and chapter meetings, are associated more with *having* a membership in another professional organization than with not having one. This interesting pattern also was observed in 2010.

Member of another professional organization?		
	Yes	No
	<u>1771</u>	<u>2681</u>
Members of another professional organization are significantly higher		
Median annual compensation	\$72,480	\$59,646
Post-graduate degree (master's/doctorate)	45%	30%
SOCRA member for 4+ years	50%	46%
Attended the SOCRA annual conference at least once	34%	28%
Attended at least one SOCRA chapter meeting (BASE: chapter is close enough to attend)	56%	51%
Age (mean)	44.9	42.1
Number of therapeutic areas of experience	3.5	2.9
Years of clinical research experience	11.8	10.4
Research Nurse	14%	8%
Clinical research/trial experience includes medical devices	31%	24%
Those who are <i>not</i> members of another professional organization are significantly higher		
Compensation is hourly (not salaried)		
SOCRA member	84%	89%
Clinical Research Coordinator	22%	38%
Hospital employee	34%	39%
Certified as a CCRP with SOCRA	61%	73%
Planning to take the CCRP exam with SOCRA (BASE: not certified)	39%	61%

Professional Certification Paid by Employer

Differences between respondents who do versus do not get professional certification paid by their employers have been very similar in all three surveys (2015, 2010, 2004), so these conclusions apply to all surveys:

Respondents who have professional certification paid by their employers are (compared with their cohorts who do not get this employer benefit) more likely to be either CCRPs with SOCRA or planning to take the CCRP exam. In other words, clinical researchers whose employers pay for professional certification probably already have taken advantage of that benefit or plan to take advantage of it in the future.

Those who get this benefit also tend to skew toward younger, U.S. residents, salaried (vs. compensated hourly), recipients of a broad range of other employee benefits, SOCRA members, and SOCRA chapter attendees.

Interestingly, although respondents who get certification paid as a benefit are more likely than their cohorts to be CCRPs, it is their cohorts (whose employer's don't pay for their certification) who are more likely to have been CCRPs *more than 3 years*. This seeming contradiction may be explained by age: Those who get certification paid as a benefit tend to be younger clinical researchers who, once certified, haven't had the chance to hold onto their certification very long.

We continue to see no significant difference in salary *levels* between those who do versus do not get their certification fees paid as an employee benefit. However, we also find (again) that those getting certification paid as a benefit are significantly more likely to *be salaried* (versus paid hourly) than their cohorts.

See data table, next page.

Is professional certification paid by your employer?		
	Yes	No
	<u>2615</u>	<u>1831</u>
Certification paid by employer are significantly higher		
Compensation is salaried (vs. hourly)	81%	73%
SOCRA member	88%	85%
CCRP with SOCRA	70%	66%
Plan to take the CCRP exam with SOCRA (BASE: not certified)	57%	42%
Benefit package includes professional organization membership <i>NOTE: Getting certification paid by the employer is significantly and positively associated with every specific benefit listed in the survey. This is simply because if an employee gets one benefit, he/she is likely to be with an employer who gives other benefits as well. After "certification fees" (which defines the subgrouping), the largest difference was for "professional organization membership," i.e., employers who pay for certification usually also pay for the same organization's membership.</i>	64%	9%
U.S. resident	92%	81%
Certification not paid are significantly higher		
Compensation is hourly	19%	26%
Age (mean)	42.3	44.5
Years of experience in clinical research (mean)	10.4	11.7
CCRP with SOCRA more than 3 years	48%	53%
Attended at least one SOCRA chapter meeting (BASE: Chapter is close enough to attend)	50%	57%
Resident of Canada or other ex-U.S. country	8%	19%

Financial Compensation for Receiving Certification

Respondents who did or would get financial compensation (a raise, bonus, etc.) for receiving their professional certification tend to be lower-paid overall and in the following lower-paid subgroups: Clinical Research Coordinators, hospital employees, paid hourly, less educated, less experienced, younger; Midwest residents (if in the U.S.), and either a SOCRA CCRP or intending to take the CCRP exam, compared with their cohorts who did/will not receive compensation. However, contrary to those associations with lower salaries, these respondents also are more likely to be U.S. residents, who on average are higher paid than non-U.S. residents.

The cohorts who did/will not get compensation for receiving certification are largely the mirror image of the above: more likely to be higher paid overall and in the following higher-paid subgroups: salaried, employed by a contract research organization or pharmaceutical company, more educated, older, more experienced, and, if in the U.S., residing in the Middle Atlantic region. Conversely, they also are more likely to be Canadians, who report lower compensation than do U.S. residents.

These results are very similar to the findings from the 2010 and 2004 surveys.

See table, next page.

Was/will there be financial compensation (a raise) for receiving professional certification?		
	Yes	No
	990	3450
Respondents who will get compensated are significantly higher		
Compensation is hourly	29%	20%
Benefit package includes certification fees <i>NOTE: Getting a raise for receiving professional certification also is significantly associated with having most other employee benefits, specifically: tuition reimbursement, training/education, professional organization membership, retirement, and an employee assistance program in the respondents' employee benefit packages. The strongest association is with certification fees. Put simply, employers who pay the fees for certification also tend to be those who will reward employees financially if they do get certified.</i>	56%	40%
United States resident	92%	86%
Resident of the Midwest region (BASE: U.S. residents)	32%	22%
Clinical Research Coordinator	43%	28%
Hospital employee	46%	34%
CCRP with SOCRA	72%	68%
Plan to take the CCRP exam with SOCRA (BASE: not certified)	63%	48%
Respondents who will not get compensated are significantly higher		
Annual compensation \$65,000+	38%	50%
Compensation is salaried (vs. hourly)	71%	79%
Postgraduate degree (master's/doctorate)	31%	37%
Age (mean)	42.5	43.4
Years of experience in clinical research (mean)	10.1	11.2
Canada resident	5%	11%
Resident of the Middle Atlantic region (BASE: U.S. residents)	10%	15%
Contract Research Organization employee	5%	10%
Pharmaceutical company employee	1%	4%

NOTE:

Medians were not calculated on groups deemed too small, i.e., if the number of respondents who answered the income question was under 50.

* > = incomes significantly higher than average
(tested vs. 2015 respondents not in the group, 0.05 level)
< = incomes significantly lower than average
ns = not significantly different from average

Notable upward trend exceeding inflation

**n/a = not available due to inadequate sample size (n<50, e.g., in 2004)

Respondent Group	October 2015							June 2010			December 2004	
	N	Inter-polated Median	*Significance vs. average	% Change Since		Inflation-Adjusted Change Since:		N	Inter-polated Median	Infl.-Adj. Chg. Since 2004	N	Inter-polated Median
				2010	2004	2010	2004					
TOTAL SAMPLE who indicated their salaries	4469	\$63,711		5.8%	29.6%	-3.3%	4.7%	4546	\$60,221	6.5%	1550	\$49,143
SoCRA members	3880	\$62,992	<	5.9%	28.7%	-3.2%	3.7%	4025	\$59,491	5.8%	1401	\$48,935
Non-members	577	\$70,962	>	6.2%	38.2%	-2.9%	13.2%	503	\$66,813	12.0%	143	\$51,346
EDUCATION--highest level completed												
High school education	173	\$55,789	<	14.0%	41.2%	4.8%	16.2%	225	\$48,955	7.5%	90	\$39,516
Technical or trade school education	214	\$52,115	<	11.1%	35.6%	1.9%	10.6%	277	\$46,923	6.2%	117	\$38,438
Associate's degree	363	\$57,803	<	0.7%	22.5%	-8.4%	-2.4%	467	\$57,389	5.8%	190	\$47,174
Bachelor's degree	2033	\$63,800	ns	6.2%	28.0%	-3.0%	3.0%	2139	\$60,103	5.0%	713	\$49,858
Masters degree	1292	\$68,459	>	0.9%	22.6%	-8.2%	-2.4%	1062	\$67,857	5.7%	298	\$55,851
Doctorate	265	\$75,897	>	-2.9%	n/a	-12.0%	n/a**	184	\$78,158	n/a	46	(n<50)
Some other degree/grade	122	\$59,000	<	-4.8%	7.9%	-13.9%	-17.1%	177	\$61,974	-1.1%	93	\$54,688
AGE												
25-34	1342	\$57,027	<	7.2%	44.3%	-1.9%	19.3%	1198	\$53,175	14.9%	90	\$39,516
35-44	1066	\$65,671	>	8.5%	32.3%	-0.6%	7.3%	1038	\$60,534	6.0%	416	\$49,653
45-54	1127	\$67,747	>	5.9%	27.5%	-3.2%	2.5%	1382	\$63,951	4.8%	492	\$53,155
55-64	762	\$71,410	>	8.9%	38.6%	-0.2%	13.6%	763	\$65,565	10.0%	165	\$51,538
65+	95	\$75,556	>	7.1%	n/a	-2.0%	n/a	56	\$70,556	n/a	6	(n<50)
GENDER												
Female	3934	\$63,447	<	6.6%	30.5%	-2.5%	5.5%	4067	\$59,493	6.4%	1396	\$48,636
Male	510	\$66,000	>	-5.2%	23.0%	-14.3%	-2.0%	457	\$69,625	11.7%	142	\$53,649
REGION OF THE U.S.												
New England	198	\$72,955	>	3.9%	15.8%	-5.2%	-9.2%	185	\$70,227	-2.8%	54	\$63,000
Middle Atlantic	514	\$72,551	>	12.7%	43.1%	3.6%	18.1%	641	\$64,375	9.8%	230	\$50,714
South	1080	\$63,406	ns	5.3%	24.6%	-3.8%	-0.4%	1095	\$60,215	3.2%	332	\$50,897
Midwest	894	\$59,216	<	8.6%	24.8%	-0.5%	-0.1%	917	\$54,520	0.4%	296	\$47,432
Southwest	369	\$63,720	ns	9.9%	37.0%	0.7%	12.0%	364	\$58,000	8.2%	157	\$46,500
West	702	\$68,838	>	10.1%	35.4%	1.0%	10.4%	640	\$62,523	6.9%	201	\$50,833
COUNTRY												
U. S. resident	3846	\$64,491	>	6.7%	29.0%	-2.4%	4.0%	3858	\$60,440	5.2%	1285	\$50,000
Canada resident	422	\$59,615	<	-2.5%	28.8%	-11.6%	3.8%	470	\$61,136	13.3%	230	\$46,296
Other countries	143	\$53,200	<	10.9%	n/a	1.8%	n/a	140	\$47,963	n/a	25	(n<50)
BENEFIT PACKAGE INCLUDES:												
Health insurance	4094	\$64,430	>	6.2%	29.7%	-2.9%	4.7%	4120	\$60,684	6.2%	1403	\$49,686
Dental insurance	3888	\$64,702	>	6.0%	30.4%	-3.2%	5.4%	3849	\$61,065	6.9%	1293	\$49,614

NOTE:

Medians were not calculated on groups deemed too small, i.e., if the number of respondents who answered the income question was under 50.

* > = incomes significantly higher than average
(tested vs. 2015 respondents not in the group, 0.05 level)
< = incomes significantly lower than average
ns = not significantly different from average

Notable upward trend exceeding inflation

**n/a = not available due to inadequate sample size (n<50, e.g., in 2004)

Respondent Group	October 2015							June 2010			December 2004	
	N	Inter-polated Median	*Significance vs. average	% Change Since		Inflation-Adjusted Change Since:		N	Inter-polated Median	Infl.-Adj. Chg. Since 2004	N	Inter-polated Median
				2010	2004	2010	2004					
Annual/sick leave	3849	\$64,670	>	6.2%	29.6%	-3.0%	4.6%	3941	\$60,917	6.2%	1346	\$49,906
Retirement package	3560	\$64,557	>	6.0%	29.5%	-3.1%	4.6%	3417	\$60,894	6.3%	1198	\$49,832
Long term disability insurance	3071	\$65,700	>	4.9%	30.3%	-4.2%	5.3%	3085	\$62,640	7.8%	1073	\$50,428
Employee assistance program	2727	\$66,831	>	5.9%	32.4%	-3.3%	7.4%	2748	\$63,129	8.4%	881	\$50,474
Tuition reimbursement	2512	\$65,570	>	5.8%	28.4%	-3.4%	3.4%	2673	\$62,004	5.7%	921	\$51,060
Training/education	2495	\$65,952	>	6.4%	29.7%	-2.8%	4.7%	2750	\$62,010	6.1%	1025	\$50,844
Certification fees	1957	\$64,224	>	5.2%	28.0%	-3.9%	3.1%	1990	\$61,034	5.9%	674	\$50,161
Professional organization membership	1841	\$66,332	>	4.1%	30.0%	-5.0%	5.1%	2009	\$63,715	8.3%	709	\$51,007
Annual salary bonus	1102	\$75,677	>	4.9%	30.0%	-4.2%	5.0%	1193	\$72,164	7.6%	422	\$58,200
Other (Please specify)	238	\$67,632	>	1.5%	21.0%	-7.6%	-4.0%	322	\$66,628	3.9%	131	\$55,882
TITLE												
Clinical Research Coordinator	1406	\$52,820	<	6.5%	32.3%	-2.7%	7.4%	1285	\$49,616	7.9%	456	\$39,912
Research Manager	498	\$78,140	>	5.1%	27.1%	-4.0%	2.1%	432	\$74,368	5.3%	116	\$61,471
Research Nurse	466	\$72,009	>	12.8%	30.8%	3.7%	5.8%	587	\$63,846	1.2%	215	\$55,072
Clinical Research Associate	385	\$79,569	>	1.3%	38.2%	-7.9%	13.3%	506	\$78,579	16.1%	190	\$57,558
Project Manager	354	\$76,481	>	8.2%	30.4%	-0.9%	5.5%	285	\$70,698	5.0%	82	\$58,636
Regulatory Affairs	238	\$56,563	<	10.0%	n/a	0.9%	n/a	227	\$51,408	n/a	47	(n<50)
Clinical Research Assistant	134	\$45,588	<	8.3%	n/a	-0.8%	n/a	145	\$42,075	n/a	48	(n<50)
Data Manager	118	\$52,714	<	14.4%	41.9%	5.3%	16.9%	173	\$46,071	7.7%	90	\$37,143
Quality Assurance	108	\$79,211	>	13.2%	n/a	4.0%	n/a	136	\$70,000	n/a	35	(n<50)
Institutional Review Board	55	\$62,917	ns	4.2%	n/a	-4.9%	n/a	65	\$60,357	n/a	17	(n<50)
Other (Please specify)	683	\$79,360	>	8.5%	41.8%	-0.6%	16.8%	754	\$73,148	12.4%	233	\$55,962
EMPLOYER												
Hospital	1644	\$60,499	<	8.5%	35.4%	-0.6%	10.4%	1598	\$55,756	8.2%	492	\$44,695
Academic Research Center/Organization	1464	\$61,377	<	8.2%	30.4%	-0.9%	5.5%	1118	\$56,737	5.0%	416	\$47,054
Contract Research Organization	403	\$79,608	>	8.1%	36.5%	-1.0%	11.5%	391	\$73,636	9.3%	146	\$58,333
Physician-Based Practice	305	\$57,500	<	10.6%	40.2%	1.5%	15.2%	429	\$51,975	9.6%	151	\$41,023
Independent Research Site	173	\$57,273	<	2.7%	n/a	-6.4%	n/a	150	\$55,769	n/a	48	(n<50)
Medical Device Company	170	\$87,500	>	-1.0%	20.7%	-10.1%	-4.3%	215	\$88,355	6.0%	51	\$72,500
Pharmaceutical Company	151	\$93,611	>	2.2%	29.8%	-6.9%	4.8%	239	\$91,595	9.8%	99	\$72,105
Government	139	\$76,786	>	-7.3%	n/a	-16.4%	n/a	103	\$82,813	n/a	47	(n<50)
Biotech Company	77	\$90,625	>	0.9%	n/a	-8.2%	n/a	100	\$89,773	n/a	26	(n<50)
Site Management Organization	71	\$64,643	ns	24.8%	n/a	15.7%	n/a	57	\$51,786	n/a	22	(n<50)
Contractor/Self-Employed Consultant	35	n<50		n/a	n/a	n/a	n/a	50	\$90,000	n/a	20	(n<50)
Other	235	\$61,250	ns	3.8%	26.5%	-5.3%	1.5%	321	\$58,981	5.9%	124	\$48,438
Clinical Research Study/Trial Experience:												
Pharmaceutical	3168	\$64,268	>	5.2%	28.6%	-3.9%	3.6%	3229	\$61,084	6.3%	1118	\$49,979
Medical Device	1209	\$68,010	>	2.6%	25.4%	-6.5%	0.4%	1057	\$66,296	6.3%	247	\$54,237

NOTE:

Medians were not calculated on groups deemed too small, i.e., if the number of respondents who answered the income question was under 50.

* > = incomes significantly higher than average
(tested vs. 2015 respondents not in the group, 0.05 level)
< = incomes significantly lower than average
ns = not significantly different from average

Notable upward trend exceeding inflation

**n/a = not available due to inadequate sample size (n<50, e.g., in 2004)

Respondent Group	October 2015						June 2010			December 2004		
	N	Inter-polated Median	*Significance vs. average	% Change Since		Inflation-Adjusted Change Since:		N	Inter-polated Median	Infl.-Adj. Chg. Since 2004	N	Inter-polated Median
				2010	2004	2010	2004					
Biologics	1057	\$66,700	>	5.6%	27.5%	-3.5%	2.5%	850	\$63,160	5.1%	223	\$52,315
Public Health	639	\$62,482	ns	4.8%	28.6%	-4.3%	3.7%	520	\$59,592	6.6%	136	\$48,571
Behavioral Research	522	\$61,560	<	4.5%	29.0%	-4.6%	4.0%	400	\$58,902	7.2%	86	\$47,727
Other	580	\$61,250	<	8.6%	33.9%	-0.5%	8.9%	670	\$56,417	7.1%	313	\$45,743
FORM OF COMPENSATION												
Salaried	3456	\$67,477	>	5.4%	28.5%	-3.7%	3.5%	3351	\$64,026	6.1%	1082	\$52,509
Hourly	965	\$51,757	<	7.2%	27.4%	-1.9%	2.4%	1125	\$48,288	3.6%	453	\$40,630
THERAPEUTIC AREAS OF EXPERIENCE												
Anti-infective	399	\$77,065	>	1.9%	30.7%	-7.2%	5.7%	527	\$75,636	10.7%	209	\$58,971
Cardiovascular	1383	\$69,431	>	1.0%	22.9%	-8.1%	-2.0%	1401	\$68,730	5.9%	425	\$56,479
Dental	114	\$68,000	>	-3.8%	n/a	-12.9%	n/a	107	\$70,667	n/a	22	(n<50)
Dermatology	429	\$71,389	>	-5.1%	19.4%	-14.2%	-5.6%	418	\$75,208	9.0%	146	\$59,783
Gastrointestinal	869	\$68,095	>	1.0%	22.6%	-8.1%	-2.4%	910	\$67,435	5.7%	305	\$55,532
Hematology	1146	\$65,909	>	6.7%	35.5%	-2.4%	10.5%	1145	\$61,786	9.8%	437	\$48,654
Inflammation/Immunology	769	\$71,053	>	-1.8%	27.7%	-10.9%	2.7%	758	\$72,358	11.9%	247	\$55,641
Metabolic diseases	725	\$70,563	>	1.1%	21.3%	-8.0%	-3.7%	777	\$69,810	4.6%	206	\$58,171
Neurology & pain	1060	\$66,890	>	2.0%	22.5%	-7.1%	-2.5%	1051	\$65,581	4.6%	321	\$54,615
Obstetrics & gynecology	502	\$65,938	>	-1.0%	22.9%	-10.1%	-2.0%	496	\$66,571	7.7%	156	\$53,636
Ophthalmology	366	\$71,923	>	0.9%	19.9%	-8.2%	-5.1%	358	\$71,250	3.5%	92	\$60,000
Oncology	2358	\$64,956	>	8.5%	34.7%	-0.7%	9.7%	2538	\$59,895	7.8%	919	\$48,230
Otolaryngology	168	\$65,500	ns	-5.8%	13.9%	-14.9%	-11.1%	134	\$69,500	5.2%	51	\$57,500
Pediatrics	1126	\$65,828	>	4.9%	26.6%	-4.2%	1.6%	1000	\$62,750	5.1%	291	\$51,985
Psychiatry	493	\$67,578	>	0.2%	22.9%	-9.0%	-2.1%	585	\$67,470	6.6%	160	\$55,000
Urology	480	\$70,079	>	4.3%	22.7%	-4.8%	-2.2%	542	\$67,208	2.7%	207	\$57,097
Vaccines	657	\$68,969	>	0.0%	21.3%	-9.1%	-3.7%	705	\$68,971	5.6%	188	\$56,860
Other	1071	\$63,715	ns	3.1%	24.7%	-6.0%	-0.3%	1038	\$61,776	5.3%	358	\$51,087
Fewer than 3 therapeutic areas of experience	2464	\$61,201	<	8.0%	30.9%	-1.1%	5.9%	2516	\$56,660	5.5%	883	\$46,763
4+ therapeutic areas of experience	1347	\$69,797	>	2.1%	23.5%	-7.0%	-1.5%	1426	\$68,368	5.3%	438	\$56,519
8+ therapeutic areas of experience	352	\$76,538	>	-3.5%	17.8%	-12.6%	-7.2%	364	\$79,324	6.1%	120	\$65,000
YEARS WORKED IN CLINICAL RESEARCH												
10+ years	2262	\$72,748	>	4.9%	34.9%	-4.2%	10.0%	2036	\$69,349	11.0%	524	\$53,908
5 - 9 years	1445	\$59,412	<	3.4%	18.5%	-5.7%	-6.4%	1551	\$57,434	0.1%	555	\$50,117
Less than 5 years	755	\$52,015	<	6.7%	21.1%	-2.4%	-3.9%	948	\$48,732	-1.0%	465	\$42,958
YEARS IN CURRENT POSITION												
10+ years	705	\$68,316	>	6.9%	47.6%	-2.2%	22.6%	634	\$63,889	17.0%	180	\$46,277
One year or less	1010	\$64,362	ns	10.5%	25.4%	1.4%	0.5%	691	\$58,220	-0.9%	340	\$51,310

NOTE:

Medians were not calculated on groups deemed too small, i.e., if the number of respondents who answered the income question was under 50.

* > = incomes significantly higher than average
(tested vs. 2015 respondents not in the group, 0.05 level)
< = incomes significantly lower than average
ns = not significantly different from average

Notable upward trend exceeding inflation

**n/a = not available due to inadequate sample size (n<50, e.g., in 2004)

Respondent Group	October 2015							June 2010			December 2004	
	N	Inter-polated Median	*Signif-icance vs. average	% Change Since		Inflation-Adjusted Change Since:		N	Inter-polated Median	Infl.-Adj. Chg. Since 2004	N	Inter-polated Median
				2010	2004	2010	2004					
YEARS AS A SoCRA MEMBER												
More than 3 years	1862	\$69,327	>	7.4%	34.8%	-1.7%	9.8%	1659	\$64,570	8.7%	426	\$51,449
2 years or less	1608	\$56,806	<	4.3%	19.4%	-4.9%	-5.6%	1903	\$54,487	0.0%	779	\$47,574
1 year or less	1063	\$56,651	<	6.0%	22.5%	-3.1%	-2.4%	1231	\$53,451	0.9%	514	\$46,228
PREFERENCE for receiving SoCRA MEMBERSHIP DIRECTORY (2004 only)												
By online access through the SoCRA home page											905	\$50,208
By hard copy mailing											617	\$47,235
PREFERENCE for receiving SoCRA SOURCE JOURNAL (2010 & 2015)												
By online access through the SoCRA home page	1888	\$64,322	ns	5.3%		-3.8%		1708	\$61,081			
By hard copy mailing	2492	\$63,150	ns	5.9%		-3.2%		2759	\$59,607			
CCRP CERTIFICATION												
Certified as CCRP through SoCRA	3031	\$63,195	<	5.7%	30.9%	-3.4%	6.0%	2817	\$59,785	7.5%	917	\$48,265
Not certified as CCRP through SoCRA	1412	\$65,060	>	6.2%	29.0%	-2.9%	4.0%	1706	\$61,250	5.7%	619	\$50,423
Certified as CCRP more than 3 years	1496	\$68,797	>	7.1%	34.2%	-2.0%	9.2%	1204	\$64,244	8.6%	295	\$51,284
Certified 2 years or less	1139	\$57,089	<	4.0%	24.6%	-5.1%	-0.3%	1445	\$54,895	4.4%	477	\$45,802
INTENT TO TAKE THE CCRP CERT. EXAM												
Not a CCRP but planning to take the CCRP exam	688	\$55,598	<	5.9%	20.7%	-3.2%	-4.3%	899	\$52,486	-0.5%	346	\$46,067
Not a CCRP and <i>not</i> planning to take the CCRP exam	672	\$77,755	>	16.4%	33.3%	7.3%	8.3%	763	\$66,814	0.0%	266	\$58,333
- because of lack of interest	57	\$81,429	>	25.3%	n/a	16.2%	n/a	56	\$65,000	n/a	20	(n<50)
- because not needed for current job	286	\$81,410	>	-2.6%	26.7%	-11.7%	1.8%	317	\$83,542	11.9%	112	\$64,231
- because employer will not pay or reimburse	149	\$67,500	>	2.9%	48.6%	-6.3%	23.6%	148	\$65,625	20.7%	63	\$45,417
- because already certified through another organization	194	\$79,857	>	6.0%	21.2%	-3.1%	-3.8%	217	\$75,313	-0.2%	80	\$65,909
SoCRA ANNUAL CONFERENCE ATTENDANCE:												
Attended the SoCRA Annual Conference 1+ times	1339	\$69,818	>	3.9%	35.6%	-5.2%	10.7%	1303	\$67,193	12.3%	479	\$51,473
Attended the conference 2+ times	574	\$76,304	>	9.1%	43.6%	0.0%	18.7%	535	\$69,931	13.0%	157	\$53,125

NOTE:

Medians were not calculated on groups deemed too small, i.e., if the number of respondents who answered the income question was under 50.

* > = incomes significantly higher than average
(tested vs. 2015 respondents not in the group, 0.05 level)
< = incomes significantly lower than average
ns = not significantly different from average

Notable upward trend exceeding inflation

**n/a = not available due to inadequate sample size (n<50, e.g., in 2004)

Respondent Group	October 2015							June 2010			December 2004	
	N	Inter-polated Median	*Significance vs. average	% Change Since		Inflation-Adjusted Change Since:		N	Inter-polated Median	Infl.-Adj. Chg. Since 2004	N	Inter-polated Median
				2010	2004	2010	2004					
Never attended the SoCRA Annual Conference	3023	\$61,675	<	7.2%	28.3%	-1.9%	3.3%	3135	\$57,550	4.3%	1034	\$48,074
SoCRA EDUCATIONAL WORKSHOPS												
Attended 1+ SoCRA Educational Workshops	2041	\$66,661	>	4.9%	30.9%	-4.2%	5.9%	2144	\$63,545	8.2%	405	\$50,941
Attended 2+ Workshops	1165	\$69,414	>	6.7%	34.1%	-2.4%	9.1%	1150	\$65,059	8.9%	241	\$51,765
Never attended a SoCRA Educational Workshop	2267	\$61,448	<	7.3%	29.1%	-1.8%	4.1%	2272	\$57,254	4.8%	854	\$47,598
SoCRA CHAPTER LOCATION												
Chapter is close enough to attend meetings	2653	\$64,522	>	3.0%	27.2%	-6.1%	2.3%	2339	\$62,633	7.3%	559	\$50,709
Chapter is not close enough to attend	1731	\$62,150	<	7.5%	30.4%	-1.6%	5.4%	2116	\$57,827	5.6%	928	\$47,650
OTHER PROFESSIONAL MEMBERSHIPS												
Belong to other professional organizations	1771	\$72,480	>	5.5%	33.8%	-3.6%	8.9%	2154	\$68,681	9.7%	870	\$54,154
Do not belong to other prof. organizations	2681	\$59,646	<	11.1%	39.1%	2.0%	14.1%	2368	\$53,691	8.5%	673	\$42,880
HOURS PER WEEK ON CLINICAL RESEARCH												
Work 40+ hours a week on clinical research	2817	\$66,838	>	5.2%	27.4%	-3.9%	2.4%	2765	\$63,528	5.4%	926	\$52,463
Work 40 or fewer hours a week on clinical research	1640	\$59,101	<	9.6%	32.8%	0.5%	7.8%	1515	\$53,913	5.5%	615	\$44,500

Inflation adjustments (proportion per CPI):

2010 - 2015: (217.97 - 237.84 = 9.1%)	1.0912
2004 - 2015: (190.3 - 237.84 = 25.0%)	1.2498
2004 - 2010: (190.3 - 217.97= 14.5%)	1.1454

Peter J. DePaulo, Ph.D.

Research Consultant

Pete@DePauloResearch.com

**Total Sample and Member Subgroups:
2015, 2010 & 2004 Salary Surveys**

* Due to the large sample sizes, differences between 2010 & 2015 exceeding 2 percentage points, and between 2004 & later surveys exceeding 3 points, usually are statistically significant.

Pete DePaulo, Ph.D.
Research Consultant
Pete@DePauloResearch.com

Notable upward trends (2015 higher) are yellow highlighted
Notable down trends (2015 lower) are orange highlighted

	--- October 2015 ---		----- June 2010* -----		-- December 2004 --	
	Total sample	Members	Total sample	Members	Total sample	Members
Number of respondents. Actual percentage bases were somewhat less due to item non-response	4,469	3,880	4,546	4,025	1,550	1,401
SoCRA Members	87.0%		88.8%		90.8%	
Non-members	13.0%		11.2%		9.2%	
Annual pre-tax salary/compensation						
Over \$175,000	1.0%	0.9%	0.9%	0.7%	not a response option	
\$150,000 - \$175,000	0.9%	0.8%	0.9%	0.8%	not a response option	
\$125,000 - \$150,000	2.4%	2.1%	2.0%	1.8%	not a response option	
\$100,000 - \$125,000	7.3%	6.6%	6.1%	5.4%	not a response option	
Over \$100,000	11.6%	10.5%	9.8%	8.7%	3.1%	2.6%
\$85,000 - \$100,000	10.5%	10.3%	9.2%	8.9%	4.0%	3.6%
\$75,000 - \$85,000	11.4%	11.3%	9.4%	9.6%	4.7%	4.6%
\$65,000 - \$75,000	13.9%	14.0%	13.0%	12.9%	9.6%	9.9%
\$55,000 - \$65,000	19.4%	19.9%	17.9%	18.1%	15.4%	15.2%
\$45,000 - \$55,000	18.2%	19.0%	19.1%	20.1%	22.6%	23.1%
\$35,000 - \$45,000	10.9%	11.4%	14.2%	15.3%	22.3%	23.3%
\$25,000 - \$35,000	3.2%	3.0%	5.0%	5.1%	15.5%	14.8%
\$0 - \$25,000	0.8%	0.6%	1.4%	1.4%	2.8%	2.7%
Interpolated median salary	\$63,711	\$62,992	\$60,221	\$59,491	\$49,143	\$48,935
Form of compensation						
Salaried	77.6%	77.2%	74.2%	73.8%	70.0%	70.0%
Hourly	21.8%	22.1%	24.9%	25.3%	29.3%	29.5%
Other	0.6%	0.7%	0.9%	0.8%	0.7%	0.5%
Benefits included in current package <i>(Base: gets at least one benefit)</i>						
Health insurance	93.6%	93.7%	92.8%	92.8%	92.9%	93.1%
Dental insurance	88.9%	88.9%	86.7%	86.7%	85.7%	85.6%
Annual/Sick leave	88.0%	88.1%	88.7%	88.7%	89.2%	89.0%
Retirement package	81.4%	81.3%	77.0%	77.2%	79.3%	79.2%
Long term disability insurance	70.2%	70.2%	69.5%	69.1%	71.1%	71.1%
Employee assistance program	62.3%	62.3%	61.9%	61.4%	58.3%	57.7%
Tuition reimbursement	57.4%	57.5%	60.2%	60.2%	60.9%	61.5%
Training/education	57.0%	57.3%	61.9%	62.0%	68.7%	68.6%
Certification fees	44.7%	45.9%	44.8%	46.4%	44.6%	46.5%
Professional organization membership	42.1%	43.1%	45.2%	46.4%	46.9%	48.5%
Annual salary bonus	25.1%	24.7%	26.8%	26.3%	27.9%	28.9%
Other	5.4%	5.1%	7.3%	7.2%	8.6%	8.2%
Education -- highest level completed						

	--- October 2015 ---		----- June 2010* -----		-- December 2004 --	
	Total sample	Members	Total sample	Members	Total sample	Members
Number of respondents. Actual percentage bases were somewhat less due to item non-response	4,469	3,880	4,546	4,025	1,550	1,401
High school	3.9%	3.8%	4.9%	5.0%	5.8%	5.7%
Technical or trade school	4.8%	4.8%	6.2%	6.1%	7.8%	7.9%
Associate degree	8.1%	8.3%	10.3%	10.3%	12.2%	11.8%
Bachelor degree	45.6%	45.4%	47.1%	47.3%	45.7%	46.0%
Master degree	28.2%	29.0%	23.4%	23.1%	19.3%	19.5%
Doctoral degree	5.9%	5.7%	4.2%	4.1%	3.1%	3.2%
Some other degree/grade	2.8%	2.9%	3.9%	4.1%	6.1%	6.2%
Age						
Under 25	0.9%	0.7%	1.0%	1.0%	1.2%	1.1%
25-34	30.3%	31.1%	26.2%	27.4%	28.9%	29.2%
35-44	23.9%	24.1%	23.3%	23.0%	27.4%	27.4%
45-54	25.5%	25.4%	30.9%	30.7%	31.4%	31.4%
55-64	17.2%	16.5%	17.1%	16.6%	10.7%	10.5%
65+	2.1%	2.2%	1.3%	1.3%	0.4%	0.4%
Mean age	43.2	43.0	43.7	43.5	41.9	41.9
Gender						
Female	88.5%	88.6%	89.8%	89.9%	90.8%	91.1%
Male	11.5%	11.4%	10.2%	10.1%	9.2%	8.9%
Country of residence						
United States	87.0%	86.7%	85.9%	85.6%	82.9%	83.0%
Canada	9.6%	9.8%	10.9%	11.2%	15.4%	15.4%
Japan	1.0%	1.0%	1.0%	1.0%	0.5%	0.5%
United Kingdom	0.5%	0.6%	0.5%	0.5%	0.1%	0.1%
Other countries (<0.5% each)	1.9%	1.9%	1.7%	1.7%	1.0%	1.1%
(Results for country of <i>employment</i> were very similar)						
Resident region of the U.S. (base = U.S. Respondents)						
New England	5.3%	5.0%	4.7%	4.5%	4.3%	4.3%
Middle Atlantic	13.7%	12.8%	16.8%	16.6%	17.9%	18.2%
South	28.2%	29.2%	28.7%	29.4%	26.3%	26.7%
Midwest	23.7%	24.6%	23.9%	23.4%	23.2%	23.2%
Southwest	9.8%	9.3%	9.4%	9.5%	12.2%	11.5%
West	18.6%	19.2%	16.6%	16.6%	16.0%	16.2%
(Results for Employer region were very similar)						
Job title						
Clinical Research Coordinator	31.6%	32.8%	28.0%	29.8%	29.4%	29.3%
Research Manager	11.2%	11.4%	9.4%	9.4%	7.3%	7.8%
Research Nurse	10.5%	10.3%	12.9%	12.8%	13.8%	13.7%
Clinical Research Associate	8.7%	8.7%	11.3%	10.8%	12.7%	12.6%
Project Manager	7.9%	7.7%	6.3%	6.3%	5.4%	5.1%
Regulatory Affairs	5.3%	5.6%	5.0%	4.9%	2.9%	2.9%
Clinical Research Assistant	3.0%	2.8%	3.3%	3.2%	3.0%	3.2%

	--- October 2015 ----		----- June 2010* -----		-- December 2004 --	
	Total sample	Members	Total sample	Members	Total sample	Members
Number of respondents. Actual percentage bases were somewhat less due to item non-response	4,469	3,880	4,546	4,025	1,550	1,401
Data Manager	2.7%	2.6%	4.0%	3.7%	5.8%	6.0%
Quality Assurance	2.4%	2.2%	2.9%	2.9%	2.2%	2.3%
Institutional Review Board	1.3%	1.1%	1.4%	1.4%	1.1%	0.8%
Clinical Investigator	0.7%	0.6%	0.4%	0.3%	0.4%	0.4%
Trainer/Educator	0.5%	0.6%	0.7%	0.7%	0.8%	0.8%
Research Pharmacist	0.3%	0.3%	0.2%	0.2%	0.2%	0.2%
Student	0.2%	0.2%	0.2%	0.2%	0.1%	0.1%
Other	13.5%	13.1%	14.0%	16.2%	14.8%	14.8%
Employers - percents sum to more than 100% because multiple answers were allowed.						
Hospital	36.8%	37.6%	35.5%	36.2%	31.7%	32.4%
Academic research center/organization	32.6%	33.0%	24.4%	25.0%	26.6%	26.7%
Contract research organization	9.1%	8.8%	8.7%	8.4%	9.6%	9.7%
Physician based practice	6.9%	7.1%	9.3%	9.4%	9.6%	9.7%
Pharmaceutical company	3.5%	3.1%	5.7%	4.8%	6.5%	6.0%
Independent research site	4.0%	3.8%	3.3%	3.4%	3.4%	3.3%
Medical device company	3.8%	3.7%	4.8%	4.8%	3.3%	3.2%
Government	3.2%	2.9%	2.4%	2.1%	3.0%	2.9%
Biotech company	1.7%	1.6%	2.2%	2.0%	1.6%	1.6%
Site Management Organization	1.6%	1.6%	1.3%	1.3%	1.4%	1.4%
Contractor/Self-employed consultant	0.8%	0.8%	1.2%	1.1%	1.3%	1.1%
Other	5.3%	5.2%	6.6%	7.1%	8.0%	7.9%
Study/trial experience - percents sum to more than 100% because multiple answers were allowed.						
Pharmaceutical	71.5%	71.8%	72.2%	72.3%	73.0%	72.4%
Medical Device	27.3%	27.2%	23.5%	23.3%	16.1%	16.0%
Biologics	23.9%	23.8%	19.1%	18.8%	14.6%	14.7%
Public Health & Epidemiology	14.4%	14.3%	11.6%	11.6%	8.9%	8.4%
Behavioral Research	11.7%	12.0%	9.0%	9.2%	5.7%	5.6%
Other	13.1%	13.0%	15.1%	15.1%	7.0%	7.0%
Therapeutic areas in your clinical research experience. Percents sum to more than 100% because a multiple answers were allowed.						
Oncology	53.1%	53.9%	56.1%	56.6%	59.8%	60.2%
Cardiovascular	31.1%	29.9%	31.3%	29.7%	27.7%	26.7%
Hematology	25.8%	25.6%	25.1%	25.3%	28.4%	28.4%
Neurology & pain	23.7%	23.3%	23.3%	22.8%	21.0%	20.3%
Pediatrics	25.3%	25.0%	21.9%	21.6%	18.9%	18.3%
Gastrointestinal	19.7%	19.2%	21.0%	19.6%	19.8%	19.0%
Inflammation/Immunology	17.3%	17.0%	16.7%	16.2%	16.3%	15.8%
Metabolic diseases	16.4%	15.6%	17.2%	16.6%	13.4%	12.7%
Vaccines	14.9%	14.6%	15.6%	15.0%	12.3%	11.9%

	--- October 2015 ----		----- June 2010* -----		-- December 2004 --	
	<u>Total sample</u>	<u>Mem- bers</u>	<u>Total sample</u>	<u>Mem- bers</u>	<u>Total sample</u>	<u>Mem- bers</u>
Number of respondents. Actual percentage bases were somewhat less due to item non-response	4,469	3,880	4,546	4,025	1,550	1,401
Obstetrics & gynecology	11.4%	11.2%	11.0%	10.4%	10.3%	9.7%
Psychiatry	11.2%	10.9%	12.9%	12.6%	10.4%	10.1%
Urology	11.0%	10.9%	12.2%	11.4%	13.4%	13.1%
Dermatology	9.8%	9.4%	9.3%	9.0%	9.3%	8.7%
Anti-Infective	9.0%	8.5%	11.7%	11.0%	13.7%	12.9%
Ophthalmology	8.3%	8.0%	7.9%	7.6%	5.8%	6.1%
Otolaryngology	3.8%	3.8%	3.1%	2.9%	3.2%	3.3%
Dental	2.6%	2.3%	2.4%	2.2%	1.5%	1.3%
Other	24.0%	23.5%	22.9%	23.0%	23.2%	23.3%
Years you have worked in clinical research (including full/part time employment and education)						
Less than 3 years	5.3%	5.1%	5.4%	5.1%	10.9%	10.4%
3 - 4 years	11.7%	11.8%	15.7%	16.0%	19.5%	19.8%
5 - 6 years	14.2%	14.8%	15.6%	16.2%	19.6%	19.8%
7 - 9 years	18.0%	18.8%	18.1%	18.6%	16.3%	16.4%
10 - 14 years	22.9%	22.8%	23.5%	23.5%	17.8%	18.1%
15+ years	27.9%	26.8%	21.7%	20.6%	15.9%	15.6%
Mean	10.9	10.8	9.9	9.8	8.4	8.4
Median	10	9	8	8	7	7
Years in your current position						
Less than 2 years	22.4%	23.0%	15.1%	15.6%	24.2%	24.4%
2-4 years	36.5%	36.8%	44.5%	45.0%	43.6%	43.3%
5+ years	41.2%	40.2%	40.4%	39.4%	32.2%	32.3%
Mean	5.2	5.1	5.1	5.0	4.4	4.4
Median	3	3	4	3	3	3
Years as a SoCRA member (base: SoCRA members only)						
0-2 years		41.4%		46.5%		56.3%
3-4 years		19.0%		21.8%		20.9%
5+ years		39.6%		31.7%		22.8%
Mean		4.7		4.0		3.4
Median		3		3		2
Preference for receiving the SoCRA Annual Membership Directory (2004 only)						
Hard copy mailing					40.8%	41.8%
On-line access via SoCRA home page					59.2%	70.5%
Preference for receiving the SoCRA Source Journal (2010 & 2015)						
Hard copy mailing	57.0%	60.6%	61.7%	65.2%		
On-line access via SoCRA home page	43.0%	39.4%	38.3%	34.8%		
Certified as a CCRP with SoCRA	68.2%	76.5%	62.1%	69.1%	59.4%	64.6%

	--- October 2015 ----		----- June 2010* -----		-- December 2004 --	
	<u>Total sample</u>	<u>Members</u>	<u>Total sample</u>	<u>Members</u>	<u>Total sample</u>	<u>Members</u>
Number of respondents. Actual percentage bases were somewhat less due to item non-response	4,469	3,880	4,546	4,025	1,550	1,401
Years certified as CCRP through SoCRA (Base: SoCRA CCRP certified)						
0-1 year	23.3%	23.6%	25.6%	25.7%	33.7%	33.8%
2-3 years	26.5%	26.7%	31.0%	30.9%	33.6%	33.6%
More than 3 years	48.8%	49.8%	42.5%	43.4%	32.7%	32.6%
Mean	4.9	4.8	3.8	3.9	3.1	3.1
Median	3	3	3	3	2	2
Planning on taking the CCRP Exam with SoCRA (Base: Not certified with SoCRA)	50.4%	62.0%	53.9%	63.2%	56.2%	62.8%
Reasons for not planning to take the CCRP Exam with SoCRA (Base: not CCRP certified and not planning to take exam. Percents sum to >100% because multiple reasons could be selected.)						
Not needed for current job	42.7%	41.8%	42.6%	39.1%	38.1%	35.7%
Already certified through another org.	28.8%	26.4%	28.5%	30.9%	26.8%	26.1%
Employer will not pay or reimburse	22.2%	22.4%	19.9%	16.7%	21.2%	18.4%
Lack of interest	8.6%	8.2%	7.6%	6.8%	6.6%	7.7%
Other	19.9%	23.9%	18.9%	19.0%	23.5%	27.1%
Number of times attended the SoCRA Annual Conference						
Never	69.3%	69.0%	70.7%	70.8%	68.4%	67.9%
1 time	17.5%	17.4%	17.3%	16.8%	21.2%	21.3%
More than once	13.2%	13.5%	12.0%	12.4%	10.4%	5.5%
Mean	0.6	0.6	0.6	0.6	0.6 times	0.6 times
Median	0	0	0	0	0	0
Number of SoCRA Educational Workshops attended						
None	52.6%	50.4%	51.3%	50.9%	56.9%	56.1%
1	20.4%	20.3%	22.6%	22.0%	27.1%	27.7%
2	10.0%	10.0%	11.4%	11.6%	9.2%	9.1%
3	5.7%	6.0%	6.1%	6.4%	3.2%	3.4%
4+	11.3%	11.7%	8.6%	9.0%	3.6%	3.8%
Mean	1.5	1.6	1.2	1.3	0.8	0.8
Median	0	0	0	0	0	0
A SoCRA Chapter is close enough to home or work to attend	60.2%	60.3%	52.5%	52.4%	37.5%	36.9%
Number of times attended your local SoCRA Chapter (Base: all respondents who answered the question)						
0 (never)	63.1%	61.5%	70.2%	69.0%	82.3%	82.2%

	--- October 2015 ----		----- June 2010* -----		-- December 2004 --	
	<u>Total</u>	<u>Mem-</u>	<u>Total</u>	<u>Mem-</u>	<u>Total</u>	<u>Mem-</u>
Number of respondents. Actual percentage bases were somewhat less due to item non-response	<u>sample</u>	<u>bers</u>	<u>sample</u>	<u>bers</u>	<u>sample</u>	<u>bers</u>
	4,469	3,880	4,546	4,025	1,550	1,401
1-3 times	21.2%	21.9%	18.5%	18.9%	11.6%	11.8%
<i>More than 3 times</i>	15.7%	16.6%	11.3%	12.1%	6.1%	6.0%
4-6 times	6.4%	6.9%	5.3%	5.6%	3.1%	2.9%
7-9 times	3.0%	3.1%	1.9%	2.1%	0.7%	0.7%
10-12 times	2.1%	2.2%	1.3%	1.3%	0.9%	0.9%
<i>More than 12 times</i>	4.2%	4.4%	2.8%	3.1%	1.5%	1.6%
Number of times attended your local SoCRA Chapter--"close enough" only (Base: respondents who live or work close enough to attend)						
0 (never)	47.0%	45.0%	50.0%	48.0%	58.4%	57.5%
1-3 times	28.4%	29.3%	29.7%	30.4%	26.0%	26.8%
<i>More than 3 times</i>	24.6%	25.7%	20.3%	21.6%	15.6%	15.7%
4-6 times	9.9%	10.6%	9.8%	10.2%	7.8%	7.4%
7-9 times	4.8%	4.9%	3.5%	3.8%	1.8%	1.8%
10-12 times	3.1%	3.3%	2.1%	2.2%	2.3%	2.4%
<i>More than 12 times</i>	6.7%	7.0%	4.9%	5.4%	3.7%	4.0%
Belong to other professional organizations:	39.8%	38.5%	47.5%	46.6%	56.2%	56.0%
Professional certification is paid by employer:	58.8%	59.7%	58.5%	59.7%	56.6%	58.0%
There was or will there be financial compensation (a raise) for receiving professional certification:	22.3%	22.9%	19.5%	19.9%	18.6%	18.9%
Type of financial compensation for receiving certification - percents sum to more than 100% because multiple answers were allowed. (CAUTION: Small base - only those who did or will receive financial compensation)						
Salary increase	75.9%	77.0%	76.8%	77.3%	78.5%	79.3%
Bonus	17.0%	16.3%	17.9%	17.8%	16.8%	17.2%
Other	11.6%	11.4%	12.3%	12.0%	14.0%	12.9%
Number of hours per week you work in clinical research						
40+	63.1%	62.7%	64.6%	64.5%	59.9%	59.2%
Under 40	36.9%	37.3%	35.4%	35.5%	40.1%	40.8%