# In the Public Interest: Open Access and Public Policy

2005 ACRL/SPARC Forum at ALA Midwinter, Boston, MA
January 15, 2005

Host: James Neal, Columbia University Librarian

Speakers:

- Jane Griffith, NLM Assistant Director for Policy and Legislative Development, National Institutes of Health
- Gary Ward, Associate Professor of Microbiology & Molecular Genetics, University of Vermont
- Sharon Terry, President and CEO of Genetic Alliance

This year's ACRL/SPARC Forum focused on the need for, and the implications of, the National Institutes of Health (NIH) open access proposal. This proposal calls for the results of NIH funded research to be put in an open access archive, PubMed Central, soon after publication. The final policy decision has been held up in Congress, so rather than discussing implementation of the policy, Jane Griffith discussed the goals and objectives of the proposal, and identified issues NIH considered in drawing up the proposal.

Gary Ward discussed the benefits of increasing open access for the research scientist and the teacher. He also used his experience as a publisher of a professional society's journal to demonstrate that open access, after a brief embargo period, does not harm the profitability of journal publishing.

Sharon Terry described the barriers to access she experienced as a layperson trying to obtain medical literature on a rare disease. She discussed her path to becoming an advocate for open access and in forming the Alliance for Taxpayers, PXE International, and the Genetic Alliance, three organizations that work in various ways to reduce barriers to access to scholarly literature.

Key points by each of the speakers are described below.

Jane Griffith:
The objectives of the NIH proposal include:

1. Create a stable archive of peer reviewed research publications for permanent preservation
2. Create a secure, searchable compendium to facilitate monitoring trends in research
3. Make published results available to the entire spectrum of the public who can make use of it.

The NIH proposal, following revisions in September 2004, requests (not mandates) that authors place accepted manuscripts in PubMed Central 6 months after publication. NIH proposes open access archiving in PubMed Central rather than linking to publisher web sites for several reasons. First, the National Library of Medicine (NLM) is mandated by Congress to build and maintain the medical archive for the benefit of public health. Additionally NLM has pioneered technology and set standards for archiving medical information. While NIH supports a multiplicity of archiving approaches it sees the open access model as most appropriate for its charge and its responsibilities to the public.

The NIH proposal sought comment from publishers, researchers, disease advocacy groups, librarians, and others. Some of the issues raised include concern that public access archiving would harm peer review and have a negative impact on investigators. Griffith explained that only manuscripts that have been peer reviewed will be archived, and that since publishing results of NIH funded research is already a requirement of receiving funding, the burden on investigators will not increase. In fact, investigators in the future will be able to simply link to existing NIH funded research previously archived in PubMed Central to support their findings.

Another concern was that the proposal might harm scholarly publishing as a whole. Griffith stated that there is no evidence that putting NIH funded research in a publicly accessible archive would cause journal cancellations. She said that only a portion of current journal literature results from NIH funded research, and that only about 10% of the articles currently in PubMed Central result from NIH funded research.

Concern was also expressed about the cost of the proposal. Griffith says estimates indicate it will cost $2-4 million each year to implement, and that that is affordable within the $28 billion annual NIH budget.

Further information about the NIH proposal is available at
www.nih.gov/about/publicaccess/index.htm

Gary Ward:
Ward says that from the modern day researcher's perspective, highly diverse research needs simply cannot be accommodated by what individual library budgets can acquire. Even in well funded research libraries he estimates that 20-25% of articles of interest are not immediately available. Interlibrary loan is not a good substitute for onsite collections or for open access in his view: the cost and the delay of interlibrary loan are barriers that impede the researcher's process.

Ward says that from a teaching perspective it does students a disservice to use what is available in an institution's library rather than what exists in the world as a whole: to use a subset of the universe of available information rather than the whole of it. He points out that patients and physicians want and need access to the latest scientific literature. He feels that the lack of open access to NIH funded research in outrageous.

Ward says the benefits of open access to NIH funded research include:

1. Leveling the playing field between states and countries
2. Accelerating the rate of scientific progress by integrating content and search ability
3. Accelerating the rate of scientific progress by allowing more eyes/minds to work on issues

As a publisher of a professional society journal Ward described a business model that works in harmony with open access. The American Society of Cell Biology (ASCB) publishes Molecular Biology of the Cell. ASCB does not depend on journal income to support the society's activities (this statement drew applause from the audience), and is therefore free to find the best publishing model. Following publication, articles in the journal are available only through subscription for the first 2 months, after which access is open. ASCB has found that this 2 month embargo is long enough for it to maintain its subscription base and to run the publishing operation in the black.

ASCB endorses the NIH proposal because:

1. Barriers to scientific communication slow scientific progress
2. Comprehensive/searchable databases increase scientific productivity
3. It is fair that taxpayers get the benefit of their investment
4. Experience shows that subscription income will not be adversely impacted by placing articles in open access 2 months after publication
5. Value added services from publishers are not precluded in the NIH proposal

Ward says that immediate access to research results serves the needs of scientists, patients, physicians and the public. He is concerned that modifications to the NIH proposal are watering down the potential benefits of the original version. For example, in the original proposal, NIH funded research would be placed in PubMed Central 2 months after publication in the journal literature. Modifications have moved that time frame back to 6 months. Ward thinks that if further modifications move it back to 12 months, benefits to the public and the research community will be lost and that the proposal would then have minimal impact.

Sharon Terry:
The case study Sharon Terry presented put a personal, yet generalizable, face on the key issues related to open access to scientific literature, particularly medical literature. Terry and her husband became activists, advocates, and community organizers in support of removing the barriers faced by ordinary citizens to health information. They formed the Genetic Alliance, an international coalition of advocacy groups that has collected hundreds of case studies on parents and advocates who have suffered from the lack of open access to current medical literature. Terry formed the Alliance for Taxpayer Access to secure public access to research funded by taxpayer dollars.

Terry described the process she and her husband followed to get information about a rare disease diagnosed in their children. Their family physician and specialists they consulted were not very knowledgeable initially about the disease and, in what has become a

common scenario, the patients needed to educate themselves and then help their physicians learn about the illness. Terry reported on her experiences with barriers to access to scholarly literature including $25/day fees to enter a research library and charges for interlibrary loan articles. She describes her schemes to become an "authorized user" of various collections such as volunteering to work in a hospital to gain access to its library, and borrowing the logon and password from sympathetic friends who had access to subscribed systems.

In the end Terry and her husband read the relevant literature, created a chart of the disease (it genesis, behavior, and progression) that is still definitive, patented the gene they found was responsible for the disease, and wrote articles that were published in Nature. They did all this against the backdrop of "common knowledge" that laypeople do not need access to scientific literature because they would not be able to understand it. Terry has a master's degree and worked as a university Chaplin, her husband completed high school and worked as a contractor. Despite their lack of formal medical education they did quite well with the research literature once they got their hands on it.

The examples presented by Terry demonstrate the importance of open access and the particularly obvious case for OA to publicly funded research results. She responds bluntly to the charge that the NIH proposal will harm the financial stability of publishers saying "Since when is the NIH/government in the business of ensuring the sustainability of companies?"

Conclusions:

James Neal summarized the session saying the 3 speakers effectively and firmly underscore the ongoing importance of securing open access to scientific literature. Neal said that it is important to look for alliances between stakeholders with common concerns. He also emphasized the importance of gathering and using accurate data to support claims and arguments relative to OA.

The 2005 ACRL/SPARC forum was videotaped and if the quality of that taping is good enough is may be released for viewing at some point. PowerPoint presentations of each of the speakers are available at the SPARC page at http://www.arl.org/sparc/

Report submitted by ELD/SPARC Liaison Kate Thomes (University of Pittsburgh).