NIH Public Access Policy FAQ
November 16, 2007

This FAQ page answers questions that have been raised concerning the National Institutes of Health (NIH) Policy on Enhanced Public Access to NIH-Funded Research. It can help respond to queries concerning the NIH policy that arise from different constituencies on campus.

1) What is the NIH Policy on Enhancing Public Access to NIH-Funded Research?

The NIH public access policy ([http://publicaccess.nih.gov/](http://publicaccess.nih.gov/)) concerns NIH-funded research and stipulates that all investigators funded by NIH submit an electronic version of their final peer reviewed manuscript to the National Library of Medicine's PubMed Central (PMC), which would then make the manuscript publicly available within 12 months of the official date of publication. Currently, this is a voluntary policy, though pending legislation in the US House and Senate would make the policy mandatory for future awards.

2) Why is Congress proposing a change to the NIH policy?

Since the NIH implemented its public access policy in May 2005, the deposit rate by NIH grantees has been less than 5%. Although NIH informs grantees of the deposit policy, the deposit rate has remained relatively static, thus the proposed change from a voluntary policy to a mandatory one.

3) Who benefits from enhanced access to biomedical information?

Members of the scientific and research communities, educators, health care workers, first responders, students, and members of the public all benefit from enhanced public access to biomedical literature. The popularity of NIH's PubMed service proves that the demand for access to biomedical research goes far beyond the current readership able to gain access via subscriptions.

4) Will PubMed Central be the only source for this biomedical information?

PMC will be one of many sources for the biomedical literature it archives once any embargo period for an article has expired. For example, as more and more institutions and organizations establish digital repositories, there will be many sites providing biomedical information, including comparable sites internationally.

5) Does the NIH policy reduce or limit intellectual property rights?

No. NIH-funded research is currently copyrightable and will remain copyrightable under this policy. As before, copyright belongs to the author. If the author submits an article based on NIH-funded research to a journal that requests transfer of copyright, then the author is free to transfer copyright and the journal is free to acquire it. However, under terms of the grantee’s agreement with NIH, "NIH must be given a royalty-free, non-exclusive, and irrevocable license for the Federal Government to
reproduce, publish, and otherwise use the material.” The NIH policy would simply exercise that right while in no way interfering with the right of the author to cede copyright to a publisher if she wishes to do so. The publisher (or author, if she retains copyright) has all the usual rights as a copyright owner. Finally, deposit in PMC ensures that even if an author gives away her copyright, she will still be able to access the work in PMC upon the expiration of any embargo period.

6) Does the NIH policy interfere with the private, commercial marketplace?

No. Currently, much of NIH's annual budget of approximately $29 billion supports research funding at public and private universities, research laboratories, and other institutions. This is a significant investment in scientific research that supports scientific discovery and researchers around the country. The NIH policy is making available the results of this publicly funded research. The policy does not interfere with intellectual property rights of the authors or publishers nor does it mandate which journals researchers should publish in. It does contain provisions to help journal publishers preserve subscriptions sales and society publishers to preserve their membership base. Commercial and not-for-profit journal publishers benefit from this government-funded research by publishing articles generated by federal research dollars. Finally, many believe that there will be positive market effects to other industries due to the acceleration of research.

7) Does the NIH public access to federally funded research policy change or weaken the peer review system?

No. The NIH public access policy to federally funded research does not alter the traditional practice of peer review. The NIH policy calls for submissions only of works accepted by peer-reviewed journals and “includes all modifications from the publishing peer review process.” The policy does not limit an author's journal choices. Journal publishers do not create the content they publish, nor do they generally pay authors for that content or compensate reviewers for the time they spend ensuring the quality of published research through their contributions to the peer review process. The academy supports and provides the peer review.

8) It has been claimed that public access to federally funded research equals government censorship. Is this true?

Current NIH policy (http://grants.nih.gov/grants/guide/notice-files/NOT-OD-05-022.html) calls for authors to deposit their versions of articles in PMC. These articles are freely accessible unless temporarily embargoed for up to one year by their authors. This policy in no way affects the published versions of articles that are held in libraries. To maintain archive integrity for its author-submitted works, PMC is mirrored internationally and is managed by the National Library of Medicine. PMC includes information resources well beyond those placed on deposit resulting from this new policy. Many of those additional resources have been deposited voluntarily by publishers who believe PMC availability enhances the functioning of the scientific record. The NIH public access policy promotes governmental accountability to taxpayers, enhances and accelerates the research process, and provides the broadest possible access to research without substantially harming publishers.