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Demystifying the NIH Public Access Policy: How to Optimize Access to Your Published Research

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Demystifying the NIH Public Access Policy:
How to Optimize Access to Your Published Research

Philip J. Kroth, MD, MS
Holly E. Phillips, MILS, MS

Health Sciences Library and Informatics Center
University of New Mexico

SGIM Mountain West Meeting
September 16, 2006
Objectives

- Describe the NIH Public Access Policy and list the criteria for participation.
- List at least one scientific and one social benefit of participation in the NIH Public Access Policy.
- Amend a publisher’s copyright agreement to preserve his or her rights to deposit their work in an open access repository such as PubMed Central.
Session Overview

• Why Should I Care? (20 minutes)
• The NIH Public Access Policy & How to Participate (20 minutes)
• Break (10 minutes)
• Small Group Discussion (30 minutes)
• Regroup/Summary/Evaluations (10 minutes)
Why Should I Care?
Overview

• “Traditional” Publication Process
• True Cost Examples
• Open Access Publication Process
True Cost Example

- Brain Research ($24,000/year)
- Honda Civic Hybrid ($22,150)
- PLoS Biology (FREE)
Inflation Rate for Medical Journals vs. UNM Health Sciences Library and Informatics Center Journal Budget, 1991-2004
## True Cost Examples

<table>
<thead>
<tr>
<th>Journal:</th>
<th>Individual:</th>
<th>Print:</th>
<th>Online:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Journal of Comparative Neurology</td>
<td>$1350</td>
<td>$21,000</td>
<td>$21,000</td>
</tr>
<tr>
<td>Biochimica et Biophysica Acta</td>
<td></td>
<td>$16,500</td>
<td>$16,500</td>
</tr>
<tr>
<td>Mutation Research</td>
<td>$770</td>
<td>$8500</td>
<td>$8500</td>
</tr>
<tr>
<td>Neuroscience</td>
<td></td>
<td>$6100</td>
<td>$6100</td>
</tr>
<tr>
<td>Toxicology</td>
<td></td>
<td>$5700 (+ online)</td>
<td>n/a</td>
</tr>
<tr>
<td>New England Journal of Medicine</td>
<td>$149</td>
<td>$5700 (+ online)</td>
<td>n/a</td>
</tr>
<tr>
<td>Annals of Internal Medicine</td>
<td>$231</td>
<td>$560</td>
<td></td>
</tr>
<tr>
<td>Journal of General Internal Medicine</td>
<td>$198 (+ online)</td>
<td>$420</td>
<td>$363</td>
</tr>
</tbody>
</table>
“Open Access” Research & Publishing Process

1. **Get Funded**
2. **Write**
3. **Grant**
4. **Paper**
5. **Peer Review**
6. **Target Audience**
7. **Sell**
8. **Open Access Venue**
9. **Publish**
10. **Journal**
11. **Publish**
12. **Give Away Non-Exclusive Rights**
13. **Free**
14. **Write**
15. **Give Away Non-Exclusive Rights**
What are your options as authors?

• Traditional Publishing
  – Peer review
  – Author signs over all rights to paper to publisher
  – Authors’ institution buys subscription for access to paper
  – Access to published work is limited to those with subscription and $$$

• Open Access Publishing (OA)
  – Peer review
  – Signs over nonexclusive rights to publisher
  – Deposit paper in open access venue
  – Vastly improved access to published work
Why do it?

• Purely “selfish” reasons
• “Spend” your academic “capital” wisely
• Greater impact factor
• Improve the speed of scientific discovery
• Improve access to the world’s medical literature
• Model this behavior for colleagues and mentees
• Be a part of the future of scholarly communication
This is not always easy

• You have to manage your copyright
• Not all journals will allow you to retain non-exclusive rights to your work (especially so for junior faculty)
• Promotion and tenure committees like to see publications in particular journals
• Authors are busy people and don’t want to take on an additional task in the research/publication process
• Change is uncomfortable!
The NIH Public Access Policy

&

How to Participate
Overview

• The NIH Public Access Policy
• How to Participation
  1. Choose a journal
  2. Manage your copyright
  3. Deposit your work
The NIH Public Access Policy

*Enhancing Public Access to Archived Publications Resulting from NIH-Funded Research*

The Public Access Policy requests that NIH funded investigators submit their final, peer-reviewed, published manuscripts PubMed Central (PMC).
Why is the Policy Important?

• Good for Authors and Investigators
  – Increases researcher visibility
  – Makes it easier for scientists to mine medical research publications through cross-linking with other NLM databases

• Good for NIH
  – Preserves research results over the long-term
  – Allows NIH to better manage its research investment
  – Creates a paperless grant management system

• Good for the Public
  – Makes research available not only to health professionals, but also to scientists, patients, teachers, and students
How to Participate

Three Steps to Policy Participation
1. Choose a journal
2. Manage your copyright
3. Deposit your work
Steps 1 & 2: Journals and Copyright

Journal Type

Low Effort

Ease of Compliance with Policy

Copyright Control

High Effort
Steps 1 & 2: Journals and Copyright

Journal Type

Low Effort

 PMC Journal

Copyright Control

Total Control

Ease of Compliance with Policy

High Effort
## Journal and Copyright Examples

<table>
<thead>
<tr>
<th>Journal</th>
<th>Copyright Notes</th>
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<tbody>
<tr>
<td>PLoS (PLoS Medicine, PLoS Clinical Trials)</td>
<td>• Articles deposit directly into PMC</td>
</tr>
<tr>
<td></td>
<td>• No time embargo</td>
</tr>
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</table>
Steps 1 & 2: Journals and Copyright

Journal Type

PMC Journal

‘Hybrid’ Journal

Copyright Control

Low Effort

Total Control

Variable Control

Ease of Compliance with Policy

High Effort
# Journal and Copyright Examples

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</thead>
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| PLoS (PLoS Medicine, PLoS Clinical Trials) | • Articles deposit directly into PMC  
• No time embargo |
| Massachusetts Medical Society (New England Journal of Medicine) | • Publisher PDF must be used  
• Publisher copyright and source must be acknowledged  
• On author's web site or institutional server only |
• Published source must be acknowledged  
• Must link to publisher  
• Publisher's version/PDF cannot be used  
• On author or institutional server only |
| Blackwell Publishing (Journal of General Internal Medicine) | |
Steps 1 & 2: Journals and Copyright

<table>
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<td>‘Hybrid’ Journal</td>
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<td></td>
</tr>
<tr>
<td>Closed Journal</td>
<td>No Control</td>
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Ease of Compliance with Policy

High Effort
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</tr>
<tr>
<td>Massachusetts Medical Society (New England Journal of Medicine)</td>
<td>- Publisher PDF must be used  &lt;br&gt; - Publisher copyright and source must be acknowledged  &lt;br&gt; - On author's web site or institutional server only</td>
</tr>
<tr>
<td>Nature Publishing Group (Nature, Nature Medicine)</td>
<td>- 6 – 12 month embargo  &lt;br&gt; - Published source must be acknowledged  &lt;br&gt; - Must link to publisher  &lt;br&gt; - Publisher's version/PDF cannot be used  &lt;br&gt; - On author or institutional server only</td>
</tr>
<tr>
<td>Blackwell Publishing (Journal of General Internal Medicine)</td>
<td></td>
</tr>
<tr>
<td>American Medical Association (JAMA)</td>
<td>- NIH authors may submit articles to PubMed Central  &lt;br&gt; 6 months after publication</td>
</tr>
<tr>
<td>LWW (Academic Medicine)</td>
<td>- Author retains no rights</td>
</tr>
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</table>
Step 2: Control Your Copyright

• Add NIH suggested language to the publisher’s form
  ‘X Journal acknowledges that Y author retains the right to provide a copy of the final manuscript to NIH upon acceptance for X Journal publication or thereafter for public archiving in PubMed Central as soon as possible after publication by X Journal.’

• Attach SPARC Author Addendum to copyright agreement.

• Check with your institution
  – University of California Scholarly Work Copyright Rights Policy
Step 3: Deposit your work

- Automatic if journal deposits in PMC!
- Manual online deposit into PMC (http://nihms.nih.gov)
  - Who submits the manuscript?
    - Principle Investigator
    - Third-party (some libraries may do this)
  - What information is needed?
    - Principle Investigator
    - NIH Award Number(s)
    - Contact information
    - Journal title
    - Manuscript
    - Supplemental material
  - What happens next?
    - Approve preview of manuscript
    - Complete submission statement that includes preferred posting date
Questions?
Up Next

- Break (10 minutes)
- Small Group Discussion (30 minutes)
- Regroup/Summary/Evaluations (10 minutes)