May 30, 2008

Elias A. Zerhouni, M.D. Director National Institutes of Health 9000 Rockville Pike Bethesda, MD 20892

Dear Dr. Zerhouni:

We are writing on behalf of the members of the Association of American University Presses (AAUP). AAUP members have significant interest in the NIH Public Access Policy and we therefore submit these comments regarding the policy in response to NIH's "Request for Information" dated March 28, 2008.

The AAUP is an organization consisting of 126 member and associate member publishers. Each is the nonprofit scholarly publishing arm of a university or college located in the Americas, or of a non-degree-granting scholarly institution. University presses range in size from those that operate at less than the \$1 million level to a few that are many times larger. In aggregate, parent universities provide subsidies to support about 10% of annual costs; presses are expected to gain the balance of the funds they need to operate from other sources, most of which are revenues earned by selling their books, journals, and services in the marketplace.

American university presses contribute enormously to the body of research-based English-language publications offered worldwide each year. All of these member presses publish books, and 57 of the members publish 800 scholarly journals. Over 10,000 new book titles and about 12,000 journal articles are professionally selected, peer reviewed, and published through these presses each year. While many of our members' publications address the humanities and social sciences, a substantial number of our publications present information in the life and biomedical sciences. We believe that our publications are a highly efficient way for university faculty to share their peer-reviewed work both with one another and with a large general public.

The NIH has requested general as well as specific comment on its Public Access Policy. We will address the broadest question first: AAUP is concerned about the possible long-term indirect impact of the limitation on author publishing rights that is implicit in NIH's Public Access Policy. The Policy asserts that the funder of research has a prior claim on the publishing rights an author normally possesses under copyright law. We believe that however well-intentioned and well-executed this transfer of rights may be, it represents a major shift in rights ownership whose impact on the entire system of scientific communication is not known and cannot reliably be predicted. This transfer of rights could trigger a general shift from a "market economy" to a "subsidy economy" to organize the dissemination of articles based on NIH research. While NIH may be well prepared to step in and fund PubMedCentral at a level

required to support this system, we doubt there is a likelihood of success if such a change occurs in other areas such as the humanities and social sciences. Where NIH goes others less well-funded may follow, to the detriment of their publishing institutions and infrastructure. While AAUP member presses are not at all averse to adjusting their business models, and creating new ways of doing things, AAUP suggests that unintended negative consequences to these institutions, from unplanned actions, be weighed as NIH implements its Policy. So as not to overburden this letter with information present elsewhere, we refer you to the AAUP's Statement on Open Access available at <a href="http://aaupnet.org/aboutup/issues/oa/statement.pdf">http://aaupnet.org/aboutup/issues/oa/statement.pdf</a>

NIH requested specific comments on its implementation approaches, compliance monitoring, and training offered. Assuming that the current "implementation approaches" are in fact the policies and procedures now spelled out in the PubMedCentral and NIH websites, we offer these suggestions that we believe would enhance implementation and observance of the Policy.

1. PMC now offers publishers various types of Participation Agreements, and under these publishers may submit NIH-funded articles to PMC on behalf of authors. The current file submission guidelines state:

A journal must provide PubMed Central the full text of articles in an XML or SGML format that conforms to an acceptable journal article DTD (Document Type Definition). The original high-resolution, digital image files must also be provided for all figures. A PDF may be submitted in addition to the XML/SGML version of an article, but not as the primary (or only) form. and

A journal that does not currently produce XML or SGML versions of its articles would have to add this process to its production stream or contract with a vendor to create XML from the article source files.

Most university presses do not now operate production processes that would support production of these XML files. To suggest that they "add this process to the production stream," is not reasonable, when one considers that a press might only have a small number of NIH-funded articles to handle. We recommend that PMC alter the requirement and accept PDFs from publishers, just as PMC now does accept PDFs from authors. This would reduce the burden on many university presses and increase both required and voluntary participation.

2. The descriptive information about PMC explains that PMC is not intended to replace the original publication of the journal articles, rather to archive them and make them accessible in a particular way. The integrity of the contents then continues to rely on the editorial selection processes, peer-review processes, and to some extent on the editorial and production work provided by the journal editorial advisors and on the publishers. In order to present PMC readers with complete information about each article, we recommend that PMC incorporate the name of ,

each journal's publisher in the primary citation of each article. Publishers should be offered the opportunity to provide a link through which readers could access the journal's and publisher's editorial policies, peer-review standards, and funding sources.

The AAUP appreciates this opportunity to comment on the NIH Public Access Policy.

Sincerely,

Peter Givler

**Executive Director**