



FASEB

Federation of American Societies
for Experimental Biology

Representing Over 115,000 Researchers

6120 Executive Blvd., Suite 230, Rockville, MD 20852 | faseb.org

April 6, 2023

Lyric Jorgenson, PhD
Acting Director, Office of Science Policy and
Acting NIH Associate Director for Science Policy
The National Institutes of Health
6705 Rockledge Drive, Suite 630
Bethesda, MD 20892

RE: FASEB Comments in Response to NOT-OD-23-091, Request for Information on the NIH Plan to Enhance Public Access to the Results of NIH-Supported Research

Comments transmitted electronically via [RFI Web form](#) on April 6, 2023

Dear Dr. Jorgenson,

The Federation of American Societies for Experimental Biology (FASEB) appreciates the opportunity to provide comments in response to [NOT-OD-23-091, Request for Information on the NIH Plan to Enhance Public Access to the Results of NIH-Supported Research](#). FASEB is comprised of 27 scientific societies, collectively representing over 115,000 biological and biomedical researchers. As nonprofit scholarly scientific societies, we have missions that are well-aligned with the NIH mission.

Scholarly scientific societies were founded to convene researchers in a field and advance a particular branch of science. FASEB and our member societies have long accomplished this goal through various means, including establishing best practices and standards, policy feedback, workforce and career development, awards and recognition, advocacy, education, and communicating advances in science through publications, conferences, and other means. Over the last decade specifically, we have committed to improving diversity, equity, accessibility, and inclusion in the sciences, and are implementing major investments and activities to drive this change. We are led by and represent many of the same scientists who conduct research funded by NIH. As nonprofits, revenues we collect are reinvested in advancing science and supporting the research community.

FASEB recognizes the value of a refined framework to advance public access and the potential benefits of the taxpayers having access to trusted scientific information. We commend NIH's commitment to broad engagement and to iterative work on this plan. Our specific responses to the questions within the Request for Information are noted below.

How to best ensure equity in publication opportunities for NIH-supported investigators. NIH policy already allows supported researchers to charge reasonable publishing costs - NIH seeks information on additional steps it might consider taking to ensure that proposed changes to implementation of the

Full members: American Physiological Society • American Society for Biochemistry and Molecular Biology • American Society for Pharmacology and Experimental Therapeutics • American Society for Investigative Pathology • The American Association of Immunologists • American Association for Anatomy • Society for Developmental Biology • Association of Biomolecular Resource Facilities • The American Society for Bone and Mineral Research • The American Society for Clinical Investigation • Society for the Study of Reproduction • Endocrine Society • American College of Sports Medicine • Genetics Society of America • The Histochemical Society • Society for Glycobiology • Association for Molecular Pathology • Society for Redox Biology and Medicine • Society For Experimental Biology and Medicine • American Aging Association • Society for Leukocyte Biology • American Federation for Medical Research • Environmental Mutagenesis and Genomics Society • Shock Society • **Associate members:** American Society of Human Genetics • Society for Birth Defects Research & Prevention •

American Society for Nutrition

NIH Public Access Policy do not create new inequities in publishing opportunities or reinforce existing ones.

Researchers interpret NIH's response to the [August 2022 Office of Science and Technology Policy Memo](#) as a *preference* for charging reasonable publishing costs to the direct portion of grants. This misunderstanding could lead grantees down a path that increases overall costs to NIH and slows progress of research activities. Item III.D.1 notes "*NIH intends to develop supplemental information that elaborates on and clarifies allowable costs for publication, consistent with these conditions.*" We encourage that such supplemental information covers *all* allowable paths for charging publishing costs, including from indirect costs and other university general or restricted funds.

Reasons many researchers do not want to add publishing costs to the *direct* portion of their grants include:

- On the university side, publications are primarily supported through the library purchasing subscriptions, and increasingly open access. University general or restricted funds are the source of the support for library purchases, and while varying, include *diverse* streams: federal and private research and development grants (indirect costs), but also federal and state library funds, state and local tax allocations, direct fundraising by librarians, tuition and fees, and endowments. Without a new injection of funds into the direct portion of grants, or a commitment to move existing general funds now supporting publications to directs, an added cost to the direct portion of grants would result in reduced funds to support postdocs, graduate students, and research support staff; to purchase equipment and supplies; to support travel to conferences and other career development opportunities.
- The additional administrative burden would further distract researchers from research activities. In today's approach, a team of societies, publishers, librarians, and institutional grant managers work together to arrange payment, support compliance, ensure proper metadata, and deposition to PubMed Central. If the costs are added to the direct portion of grants, the researcher is likely to be expected to handle some of these activities, such as the payment of fees, or deposition of manuscripts, processes which take time.

Researchers at larger institutions are better positioned to adapt, with libraries already implementing new arrangements (e.g., transformative agreements, subscribe to open) that do not impact the direct portion of the grant. Therefore, FASEB encourages NIH to allow flexibility for institutions to use indirect funds for a variety of publishing models, and to encourage institutions to continue to use the diverse revenue streams beyond indirect costs available in the general and restricted funds to support the costs of publication and make the transition to the realities of the new policy easier and more achievable for researchers.

Researchers from underserved populations, including early career researchers, those from historically excluded backgrounds, and those at less research-intensive institutions, do not have assured access to the aforementioned arrangements. Likewise, some societies are too small to handle detailed negotiations to make such accommodations. These disparities are already a reality. Many societies provide waivers, which the author may find an inconvenience and a barrier, with potential required actions such as requesting a waiver, and submitting a manuscript without assurance that a waiver will be provided until the manuscript is accepted. Waivers are provided at societies' expense, and we recognize this as a stop-gap solution that does not fully support equity. NIH could alleviate these issues by dedicating publishing resources for underserved researchers and societies and by providing guidance to program officers on addressing equity in publication opportunities.

Steps for improving equity in access and accessibility of publications. NIH welcomes input on other steps that could be taken to improve equity in access to publications by diverse communities of users, including researchers, clinicians and public health officials, students and educators, and other members of the public.

By virtue of their broad membership and core missions, scholarly societies are well-positioned to improve equity in access to publications for many stakeholders. However, financial support for these efforts is lacking. With proper funding, scholarly societies would be ideal partners to improve equity in access and accessibility. Examples of practical steps that could be taken more broadly, and are being experimented with at societies, include plain language summaries, alt text for images, creating more videos, working with media on news stories, and engaging through social media. Societies are also well-situated to develop educational materials and facilitate training to support researchers and the broader diverse community on improving communication around the scientific process and a specific field of science. To facilitate this, resources from NIH could be specifically allocated to address the financial need for domain-specific experts, including scholarly societies.

Methods for monitoring evolving costs and impacts on affected communities. NIH seeks information on effective approaches for monitoring trends in publication fees and equity in publication opportunities.

We were unable to identify a comparable approach taken by NIH to monitor fees for other research services or outputs. FASEB recommends that NIH not monitor publication fees lest the impact result in a system that favors quantity over quality. Any reference to a specific cost or price could have the unintended consequence of driving the system towards a ‘one size fits all’ pricing structure that negatively affects quality of resulting publications. The building blocks of scientific integrity – best practices and standards, ethical behavior, and the principles of honesty and objectivity – can lead to improved rigor, and reproducibility and must be included with public access approaches. While peer reviewers are not paid, peer review is far from free of cost. Upholding scientific integrity during peer review and publication increases costs through additional human time and adoption of innovative technologies. FASEB appreciates NIH’s recognition of the value of peer-reviewed research publications and the services provided by scholarly societies to further scientific understanding and improve human health. Therefore, we encourage continued valuation of scientific integrity.

While there might be an interest in monitoring whether funded researchers are requesting more total resources in the direct versus indirect portion of the grant and resultant changes in awarded amounts over time, this would be challenging to monitor without an effective baseline. Similarly, there are many variables that must be considered; a few examples include the growing costs of ensuring quality against papermills or image manipulation, the number of articles published (output) which may grow if public access achieves the goals of open science and drives rapid advances in science, and the changing demographics or preferences for services provided by different societies.

Monitoring equity in funded grants will be important, as is understanding where and how the system is developing and evolving. To obtain a snapshot of the current environment and assess impact of policy changes, NIH could compare the total, median, and mean number of publication fees in the direct portion of grants for different stakeholder groups over time and as a percentage of total published articles funded by the agency.

Early input on considerations to increase findability and transparency of research. NIH seeks suggestions on any specific issues that be considered in efforts to improve use of PIDs and metadata, including information about experiences institutions and researchers have had with adoption of different identifiers.

FASEB is encouraged by NIH's commitment to engage with existing identifier infrastructure and standards already in use across many scholarly societies. Requiring ORCID (Open Researcher and Contributor ID) for the corresponding and/or submitting author has been seamless for integration into societies' manuscript submission, peer review, and publication systems; requiring ORCID for *all* co-authors has posed more challenging but is improving with time. FASEB supports NIH adoption of a DOI (Digital Object Identifier) overlay on existing grants; this activity could foster a more connected ecosystem of grants, publications, and data.

Additional Clarification

FASEB requests more clarification about the types of manuscripts subject to NIH's public access plan, specifically, whether review articles, perspectives, commentaries, or editorials would be included. In our experience, this type of content is most often developed outside of research grants, with content development supported by society staff.

Regarding point III.C.1 (proposes to clarify how NIH-supported investigators may retain sufficient rights to NIH-supported peer-reviewed manuscript), we recommend that NIH work closely with the community on the development of any planned guidance. The *1940 Statement of Principles on Academic Freedom and Tenure* is the professional standard of academic freedom widely endorsed and included in handbooks at most colleges and universities. It entitles faculty to '*full freedom in research and in the publication of the results.*' Positive partnerships between government agencies, institutions, researchers, and other stakeholders – including scholarly societies - form the foundation for the success of the economic enterprise. FASEB supports researchers having the academic freedom to choose where they communicate and share their research findings, including their preferred choice of journal and their preferred license for any reuse.

Conclusion

FASEB commends NIH for its commitment to engaging and iterating to improve the plan for public access and to develop a policy that allows researchers to comply more readily. As the largest coalition of biological and biomedical researchers in the United States, we hope to continue the discussion, and offer to work with NIH to host dedicated events convening the variety of stakeholders impacted.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kevin C. Kregel'. The signature is fluid and cursive, with the first name 'Kevin' and last name 'Kregel' clearly distinguishable.

Kevin C. Kregel, PhD
FASEB President