



# THE AMERICAN ASSOCIATION OF IMMUNOLOGISTS

## Submission by The American Association of Immunologists to the National Institutes of Health (NIH) Request for Information (RFI) on the NIH Plan to Enhance Public Access to the Results of NIH-Supported Research

April 21, 2023

### Introduction

The American Association of Immunologists (AAI) appreciates this opportunity to submit comments in response to [NOT-OD-23-  
Results of NIH-](#)

professionally trained scientists dedicated to advancing the knowledge of immunology and its related disciplines, fostering the interchange of ideas and information among investigators, and addressing the potential integration of immunologic principles into clinical practice. Founded in 1913, AAI serves its members and the global immunology community by providing a center for the dissemination of information relevant to the field and its practices, organizing and sponsoring educational and professional opportunities, planning and

policy priorities that strengthen the biomedical research enterprise, particularly for immunologists.

ts role as a scientific publisher: AAI owns and publishes *The Journal of Immunology (The JI)*, the most highly cited journal in the field, as well as *ImmunoHorizons (IH)*, a fully open-access, peer-reviewed journal. As a not-for-profit scholarly scientific society, AAI invests the net revenue it receives from publications in programs and activities that

taxpayer-funded biomedical research, adopt and implement a plan that will foster access to accurate, peer-reviewed, reliable scientific information, while ensuring the integrity and quality of the results of

*Plan allows the submission of final published articles to PubMed Central (PMC) (in cases where a formal agreement is in place) to minimize the compliance burden on NIH-supported researchers and also maintains the flexibility of NIH-supported researchers to submit the final peer-reviewed manuscript. NIH seeks information on additional steps it might consider taking to ensure that proposed changes to implementation of the NIH Public Access Policy do not create new inequities in publishing opportunities or reinforce existing ones.*

AAI supports the intent of the NIH Public Access Plan to maintain the existing broad discretion that allows authors to choose how and where to publish their research. Until recently, this was in fact the case for most researchers, who were able to publish in the journal of their choice, which was best suited to their needs and their research findings. However, the White House Office of Science and Technology Policy has issued a policy titled Ensuring Free, Immediate, and Equitable Access to Federally Funded

Research

and a small group of U.S.-based funders: requiring authors to publish only in journals with specific open access models. As a result, fewer authors are submitting to hybrid or subscription-only journals, many of which are owned and/or published by commercial publishers.



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reasonable publication costs to the direct portion of their grants, NIH should develop novel ways and funding mechanisms, and work with academia and institutions to consider alternatives, including the use of indirect funds, that do not require researchers to utilize grant funds intended for research. NIH should also acknowledge, and consider solutions for, the fact that using direct grant funding for publishing costs reduces the available funding for necessary research costs (including support for personnel, equipment and supplies, funding for experiments, etc.), which may decelerate scientific discovery and will almost certainly place an additional burden on less well-funded investigators and/or institutions. The NIH Public

al of the 12-month embargo period, resulting in a fully open-access model, will likely cause publication fees to increase, perhaps dramatically, disproportionately and negatively impacting under-resourced investigators and institutions, especially those that do not have libraries with the means to enter into transformative agreements or other arrangements that would not require authors to pay publication costs from the direct portions of their grants. NIH should monitor, and provide guidance on addressing, disparities in publishing opportunities.

NIH should consider ways to alleviate the potential increase in administrative burden that investigators will face if they become responsible for ensuring their publications are publicly and freely available (e.g., deposition of manuscripts to PubMed). Currently, this service is often provided by the publisher. With regard to *The JI*

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