June 2015
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Public Access to Taxpayer-Funded Research Strengthens Biomedical Research

1. The Fair Access to Science and Technology Research Act (FASTR)

The Medical Library Association (MLA) and the Association of Academic Health Sciences Libraries (AAHSL) support the Fair Access to Science and Technology Research Act (FASTR), H.R. 1477 and S. 779. FASTR will support better patient care, biomedical research and innovation, education, and health information technology through public access to high-quality health information in the United States. This legislation will require federal agencies with annual extramural research expenditures of over $100 million per year to develop policies that provide public access to peer-reviewed journal articles resulting from agency-funded research. Such papers will be deposited in repositories operated by, or on behalf of, the federal agencies.

MLA and AAHSL urge Congress to support FASTR (H.R. 1477 and S. 779).

- **FASTR will enable researchers to realize new discoveries more quickly, accelerate the exchange of information among the research community, and enhance the affordability and distribution of scientific and scholarly research.** The NIH Public Access Policy has resulted in the addition of more than 6,000 new biomedical manuscripts each month into PubMed Central, facilitating readership by hundreds of thousands of researchers and millions of Americans.
- **FASTR will support scientific innovation.** Because discovery is an ongoing process, it is critical that the latest information and research are freely available to scientists, clinicians, innovators, students, and the public. This legislation will augment the impact of federal dollars through increased access to timely clinical and research information that is generated from those dollars.
- **FASTR will enhance access to important research and clinical information currently unavailable to many smaller healthcare, public health, and academic institutions and agencies due to cost-prohibitive journal subscriptions.** FASTR will ensure that more content will be freely available in conjunction with expanded public access policies.
- **FASTR will preserve health information for researchers, students, educators, and the public for generations to come.** Expansion of public access will preserve manuscripts in a stable digital repository maintained by the agency or in another suitable digital repository that permits long-term free public access.
- **FASTR will provide increased access to federally funded research, thereby strengthening biomedical research and improving patient care.** Public access to NIH-funded research has proven extremely beneficial to the medical library community and to its users. As organizations whose members constitute a large percentage of the subscribers to medical journals, we can attest that the availability of NIH-funded research articles in PubMed Central has not led libraries to cancel journal subscriptions. Because research in other disciplines that support medical research (e.g., Veterans Administration) is increasingly relevant to bio-medicine, broadening public access policies across agencies will enable the medical library community to support better patient care, biomedical research, education, and health information technology.

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2. Office of Science and Technology Policy (OSTP) Directive

MLA and AAHSL also support the Office of Science and Technology Policy's (OSTP's) directive calling upon federal agencies with $100 million in the annual conduct of research and development expenditures to develop a plan to support increased public access to the results of research funded by the federal government. This initiative mirrors the goals of the Fair Access to Science and Technology Research Act (FASTR) to facilitate scientific collaboration and provide researchers with easier access to the results of federally funded scientific research and data.

3. Public Access to Public Science Act (PAPS)

PAPS (H.R. 1426) is intended to build on the White House Office of Science and Technology Policy (OSTP) Directive on Public Access and to codify that language into legislation for those agencies under the jurisdiction of the House Committee on Science, Space, and Technology. These agencies include the National Aeronautics and Space Administration (NASA), National Science Foundation (NSF), National Institute of Standards and Technology (NIST), and National Weather Service (NWS). MLA and AAHSL support the intent of PAPS; however, it only covers select federal agencies, and the associations believe the legislation is not as strong as it could be.

Therefore, MLA and AAHSL endorse FASTR over PAPS, specifically because FASTR includes the following provisions that are not included in PAPS:

- immediate deposit of articles of federally owned or approved repositories, in formats and under terms that enable their productive reuse;
- a maximum embargo period of six months; and
- an indication of preferred licensing terms to facilitate article reuse.

MLA and AAHSL urge Congress to support FASTR and the OSTP directive. These initiatives have bipartisan support and facilitate scientific collaboration, provide researchers with easier access to the results of federally funded scientific research and data, strengthen biomedical research, and support better patient care.

Organizational Bios

The Medical Library Association (MLA) is a nonprofit, educational organization with 3,500 health sciences information professional members worldwide. Founded in 1898, MLA provides lifelong educational opportunities, supports a knowledgebase of health information research, and works with a global network of partners to promote the importance of quality information for improved health to the health care community and the public.

The Association of Academic Health Sciences Libraries (AAHSL) supports academic health sciences libraries and directors in advancing the patient care, research, education and community service missions of academic health centers through visionary executive leadership and expertise in health information, scholarly communication, and knowledge management.