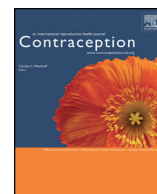




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Contraception

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Editorial

Contraception and *Contraception: X* – our new ‘mirror’ journal



The first issue of *Contraception* was published in January 1970 and the journal has appeared monthly ever since. During its first decades, *Contraception* was a subscription journal available only in print. PubMed indexes every published article in *Contraception*, and all articles are now available online via the journal's website. Ever since the journal became available online, subscribers have been able to choose to receive the journal in print or online (or both), and non-subscribers have been able to download papers by paying the publisher, Elsevier, a one-time fee, referred to as pay-per-view. Since 2001, the online availability of papers has been transforming the publishing landscape, and in recent years, the dominant model of academic publishing has been subscription with the option of pay-per-view [1]. Before the internet, non-subscribers would often write directly to authors and request a reprint of the paper by mail. This cumbersome process of distributing reprints has nearly disappeared since papers have become available online.

In 2012, *Contraception* added the option of publishing “open access” papers, thereby becoming a “hybrid” journal. In hybrid journals articles are available either via subscription with the option of pay-per-view, or are freely available online if authors choose to publish open access (OA). In the OA model authors pay an article publishing charge (APC), retain the copyright of their paper, and thus make their paper freely available for anyone to download and reuse. This is in contrast to traditional subscription models in which authors yield their copyright to Elsevier (or other publisher), which then controls the distribution of the journal and its articles. About 20% of authors of *Contraception's* recent papers have opted for open-access publishing. As more funders have required that grantees publish their work in an open-access fashion, OA for individual papers and for entire journals has grown, and now accounts for about one-quarter of academic publishing. As some universities now require their faculty publish all papers OA, a number of OA approaches have emerged. These include gold OA, which makes articles freely, immediately and permanently available for online download and other OA models (such as ‘green’ and ‘silver’) which may include partial, temporary or delayed availability. In late 2018, Elsevier, the publishing giant that owns *Contraception*, launched *Contraception: X*, which is a “gold open access mirror journal” to *Contraception*. As described on the *Contraception* website:

“*Contraception: X* is the fully gold open access mirror journal. Both Journals share the same aims and scope, editorial team, submission system and rigorous peer review. The editorial system submission process and letters will continue to refer to *Contraception*. The difference between the journals is the access model under which the journals will publish your work. As an author, upon submission of your paper, you can choose to publish your work in either: *Contraception*, where your work will be

available to readers through subscription; or *Contraception: X*, where your work will be available to readers through gold open access. Publishing gold open access ensures your work is immediately and permanently free for everyone to read and download from ScienceDirect. An Article Publishing Charge (APC) applies, which your institution or funding body often covers.”

Thus, instead of *Contraception* continuing as a hybrid journal, we now have two journals; one is subscription only and the other is open access only. Both the submission system and the joint editorial board will keep these two journals closely linked to each other. Before manuscript acceptance, all editorial processes are the same – in fact, the editors do not even know which of the two approaches to publishing this work authors choose. Papers published in *Contraception X* will appear immediately in Scopus and be freely available for download on Science Direct. Note that other models, such as green OA, provide more limited access than gold OA. A short-term disadvantage of the new OA journal is that PubMed does not yet index it; however, once indexing occurs, even the earliest papers published in *Contraception: X* will appear in PubMed. The current article publishing charge for authors opting to publish in *Contraception: X* is \$3200.

Why do we need a new model or even a new journal? Academic publishing is seeing increasing disruption of traditional models of copyright, payment and distribution. In response to this rapidly changing environment, in 2018, Elsevier launched over 30 ‘mirror’ journals, in which articles are immediately and fully open access. To understand why ‘mirror’ journals are emerging, we need to review briefly the concerns about the older publishing models. A key concern about the traditional subscription model is that the results of research funded by governments, foundations, and non-profit institutions are not available to many scholars or to the public, thus limiting scientific progress and other possible benefits. Another concern is that authors give up the copyright of their own work and lose control over the distribution of their work. In exchange for the copyright, the journal owner takes on the responsibility and expenses of publication and distribution of the scholarly work, and the journal owner receives the profits of the enterprise. A final concern is that access via subscription or pay-per-view is much too expensive [1].

Although print subscriptions were long the mainstay of the model, and individuals can still buy an annual subscription to *Contraception*, most readers now obtain access to *Contraception* via a membership in the Society of Family Planning (SFP), which has a subscription arrangement with Elsevier, or through a subscription held by their academic institution. Academic institutions contract with Elsevier and other publishers to subscribe to their journals; these agreements often bundle a large number of journals into a

single subscription agreement. The cost of institutional subscriptions has been skyrocketing in recent years, causing great stress to library budgets.

For people who do not have a society membership or subscription access via their employer, journal articles reside behind a 'paywall'. So-called 'soft paywalls' allow some access to journal content even without a subscription; *Contraception* allows access to paper abstracts and some articles have always been available to anyone without restriction; but to read most papers, Elsevier currently charges non-subscribers a pay-per-view fee of \$31.50 to download a paper from *Contraception* or its other journals. Note that Elsevier and many other large publishers already participate in the WHO program Health InterNetwork Access to Research Initiative (HINARI) to provide free journal access to readers in lower income countries [2,3].

Many research funders and institutions paying for subscriptions would like to encourage more OA, and some believe that the hybrid model has delayed the uptake of OA publishing. Internationally as well as in the U.S., numerous research institutes have decided that as of 2020, the scholarly work they fund must be published in entirely OA journals; as a result, OA publishing is likely to expand rapidly [4]. However, as many scientific societies own journals and support their society activities with journal profits, the transition to OA may be a great challenge for these scientific societies [5].

In the future, many research funders are likely to pay for the APCs. Unfortunately, few investigators who are ready to submit papers today included APCs in their grant budgets, and not all research projects have external funding support. Authors deciding today whether to pay to publish their paper gold OA should note that any NIH-funded work becomes open access by mandatory deposit of their paper into Pubmed Central within 12 months, even if it is initially published using the subscription model. Elsevier will continue to

deposit NIH-funded *Contraception* papers into Pubmed Central on behalf of the authors without any charge.

In sum, open access has the potential to be a tremendous public good, but the transition away from traditional publishing models will be disruptive and will take time. The charges for subscriptions, pay-per-view, and APCs vary widely; and these charges do not fall equally on funders, libraries, authors, and scientific societies. The financial consequences of moving to OA will take time to settle for the different stakeholders. Meanwhile, *Contraception* now offers both subscription and gold OA models to its audience. *Contraception: X* papers are available online only. To make sure *Contraception's* readers are aware of those papers, the *Contraception* table of contents, both online and in print, will always list articles that appear in *Contraception: X*. Also, the *Contraception* website now includes a link to *Contraception: X* to allow readers to see all of the papers published in *Contraception: X* since its inception.

I encourage *Contraception* readers to read papers in both of our linked journals and for authors to explore which of the two available models of publishing best aligns with their circumstances and goals.

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