DISSEMINATION PLAN
Deliverable D4.1

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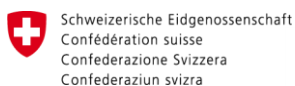
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0.1	2018-11-24	TERZ	First draft
0.2	2018-12-19	TERZ	Full draft for review
1.0	2019-01-17	Litzenberger	All partners approved version release
1.1	2019-09-30	TERZ	Updates befor MTR

LIST OF REVIEWERS AND CONTRIBUTORS

Names of Reviewers	Project Partner	Remarks
All	All	2018-12-31

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EXECUTIVE SUMMARY 1 (INITIAL)

From innovation to market success. The FreeWalker project introduces a novel, ICT-based system for supporting elderly people, people with mild cognitive impairment and persons with dementia (= primary user group) as well as formal and informal caregivers (= secondary user groups) in "Moving Safely, Living Independently". Health care authorities (= tertiary user groups) will benefit from reduced costs.

Basically, this is a concept where you give a primary user (both at home and intramurally) freedom to move outside their home with dynamic safety zones and monitor this in a way that is desired for the situation by location tracking. Flexibility in defining zones and machine-learning features* (such as: typical outdoor behaviours, preferred areas of walking, daily habits) enables FreeWalker to cover more end user needs in a better way at reasonable costs than anything else currently available on the market. To offer a state-of-the-art solution at reasonable costs should guarantee market success.

A very strong focus lies on developing a service from the user perspective. Hence user groups are very much involved in developing FreeWalker at various stages of the project (ideation, concept development, product development, product optimization) by running co-design-sessions (2018), running iterative testings of the FreeWalker prototype 2019, and finally evaluate it between 2019 – 2020 in order to develop it to market maturity.

FreeWalker should become a solution with a strong USP hence becoming commercially successful and a flagship project for the AAL programme.

This dissemination plan outlines how to address the most important stakeholders (such as future clients and customers, business partners, local health authorities, not for profit organizations, academia) of FreeWalker throughout the project lifetime and thereby also adds to the future development of a business plan identifying potential commercial exploitations.

In this document, the dissemination objectives and various approaches to communicate and disseminate the strengths and goals of FreeWalker are defined. In general, a well-structured dissemination strategy is essential for the success of FreeWalker throughout and beyond the project period.

It might well be possible **that completely new ideas** may arise; e.g. it could be considered to establish a connection to hearing aid producers (such as Sonova) to evaluate the option of linking the FreeWalker device with hearing aids. This will have a **strong implication** on the business plan. Another idea that needs further consideration is voice control: this might be a feature that would make FreeWalker even more easy to use and hence increase the market potential (taking into consideration that this has been discussed in other AAL-projects, but given the progress voice control makes, this still could be an option for the near future). -> See also: Turning Alexa into AALexa: how to utilize consumer products for AAL (Workshop 6, September 25, 2018, AAL Forum). Additionally, fall detection could be a feature that might be included to cover an important need of anticipated end users. And finally, wandering predictions could be a topic worth to be looked at as an element of machine learning.

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* "There is often a confusion of why ML methods should be used rather than traditional statistics, including regression modeling. In short, ML methods allow for automated prediction of the unknown thus providing wide selection of techniques, while inferential statistics and traditional statistical modeling are about detecting regularities and trends in data, as well as studying asymptotic properties of created models."
MLI, page 5

EXECUTIVE SUMMARY 2 (MTR – SEPT 30, 2019))

1) **Up to now (Sept 30, 2019) the progress of the project is not much visible to our stakeholders,** as the technical development to create a prototype is not of great interest to our target groups and should not be communicated before robust testing. Testing will start later in 2019 with the beta-tests. As a result, dissemination in the first 18 months was focussing on
   - the co-design process, highlighting the early inclusion of end-users
   - the Dynamic Save Zones as the most important USP for FreeWalker

2) **Co-design sessions** were held in 3 countries (the Netherlands, Austria, Switzerland). Participants (potential end-users) were recruited via various media, mainly
   - newspapers
   - internal newsletters
   - AAL alumni (e.g. people who participated in Day Guide)
   This <u>recruiting</u> always was a necessity and opportunity to present FreeWalker with its goals and potential benefits and also with its process of co-developing a service together with potential end-users. The <u>sessions</u> were an opportunity to win candidates for alpha and beta testing and, later on, ambassadors for FreeWalker.

3) These limitations also influenced the content of our **FreeWalker website** (-> 6.1 in this document). However, with a **comic-video**, showing FreeWalker in action, we made an important step to show the value FreeWalker can add to primary and secondary clients. **Partner websites** (-> 6.2) do not yet add much information going beyond the consortium's website. Maybe it makes sense to simply link to the consortium's website in order to save resources. To publish special contributions, some partners use articles in magazines (see 6 below) or newsletters (see 4 below) instead with just a link to it on their website.

4) **Electronic Newsletters** (->6.4) are widely used in some partner organizations, e.g. in the terzNewsletter with a report of a FreeWalker co-design session.

5) **Social Media** (-> 6.6) focused on the announcement of events. This is the area with much room for improvement. By **adding stories (personalization!)** as soon as they are available – starting with the alpha tests end of 2019 – we will deliver content that fits the social media.

6) **Press and Media Coverage** (-> 6.8)
   Update: Health&ICT magazine no. 4/2019 by Wil Wintjens from IVENGI with an article on FreeWalker

7) **Events, such as congresses and fairs** (-> 6.9), were mainly used for explaining FreeWalker and its USP. Posters and roll-ups were and still are the main tool to achieve a positive level of attraction. So far it was not yet possible to demonstrate a fully working prototype.
   Update 1: AAL Forum in Aarhus, Sept. 23-25, 2019: FreeWalker has been presented on the AIT booth with a rollup explaining the self-adjusting, "dynamic safe zone" concept that received attention and Klaus Dittrich of AIT was there to answer the questions of the interested visitors.
   Update 2: First Krems Dementia Conference, November 5–7, 2019: organized by Univ.-Prof. Dr. Stefanie Auer (who is a member of the MAS / FreeWalker team)

We are fully aware that with start of the field trials (considering that they prove the system is working more or less in line with our requirements) we have to adopt our dissemination efforts (see below).

8) **Looking beyond MTR, and in line with the Draft Business Plan,** we will focus on two main target client groups a) and b), without losing sight of c):
a) **elderly people** still living more or less independently in their homes (primary clients of FreeWalker)
b) **decision makers** in an intramural setting (secondary clients of FreeWalker, such as: management of care institutions, state representatives for care institutions run by the state)
c) **tertiary clients** (insurance companies, governments, police, …) might be of interest in special cases (see considerations for different countries in the Draft Business Plan)

9) Overall evaluation of FreeWalker dissemination: giving the nature and the progress of the project as outlined above, we are considering the status of our dissemination efforts as "meeting but not exceeding the expectations". One reason for not having reached the maximum may lay in the long-lasting illness of a dissemination key person, that finally led to him leaving the company.

				Progress					Action
Periode			Start Apr 18	In between	MTR Sep 19			Project end	See -> 8 in this document
Overall		Exceeding expectations							
		Meeting expectations							
		Below expectations							

TABLE OF CONTENT

DOCUMENT TABLES

1   INTRODUCTION

1.1   Scope of the document

This deliverable outlines the dissemination strategy for the AAL-project FreeWalker. A structured approach should ensure that the results of the project are not only registered by the AAL community but also among all relevant stakeholders such as future clients and customers, business partners, local health authorities, not for profit organizations, academia. This report shows how the outcomes of the project will be shared with the respective target groups.

The following key elements were identified to achieve the dissemination goals for the FreeWalker project:

Key element	Description	Section No		
Purpose of Freewalker	What are the key objectives of the FreeWalker project?	2.1		
Purpose of Dissemination	What are the key objectives of the dissemination effort?	2.2		
Stakeholders / Target Groups	Who are the relevant people and institutions with a particular interest in the project and its outcomes?	3		
Message	What are our key messages for the stakeholders and target groups?	4, 5		
Methods & Risks	How can we achieve our dissemination objectives? How can we manage risks?	6, 7		
Timing	What needs to be done by when? And how can we evaluate what we achieved?	8, 9		

The primary function of this document is a first outline and overview of the planned dissemination activities for each element. It intends to inform the consortium partner and act as a guideline for their actions. The actual time schedule will vary and might change over the course of the project. Additional activities might be planned in later stages of the project. The dissemination plan will be revised and updated regularly to adapt it to new findings. Therefore, this document should be treated as general framework for dissemination and exploitation.

1.2   Audience of this document

In line with the project's description of work (DoW), this is a publicly available document and will be provided on the project website. The main focus remains on the FreeWalker consortium, as it intends to present a common understanding and agreement among project partners on the common strategy and activities planned. It aims at fostering discussion within the consortium on plausible additional measures to take in order to increase the impact on the relevant stakeholders.
In notion with the AAL programme, the public document allows other AAL projects to use concepts of the FreeWalker dissemination plan in their projects.

The relevant stakeholders for the FreeWalker project, however, are not a direct audience of this document, as they will be reached through the defined activities. All public deliverables can be found in the table below and will be published on the website.

Del. no.	Deliverable name	WP no.	Nature/type of deliverable	Dissemination level	Actual or *planned* Delivery Date
D1.1	Participants list and work plan of the end-user advisory board	1	report	public	2018-10-15
D4.1	Dissemination Plan	4	report	public	2018-12-19
D4.2	Website of the project and social network accounts	4	website and accounts	public	2018-09-30
D1.2	Usability analysis document (iterative), approved by all project partners	1	report	public	2019-06-13
D5.3	Calendar Year Report 1 to AAL to be electronically provided by the coordinator.	5	report	public	2019-02-20
D5.6	Mid-term report and review questionnaire according AAL's guidelines.	5	report and review questionnaire	public	*2019-10-10*
D5.4	Calendar Year Report 2 to AAL to be electronically provided by the coordinator.	5	report	public	*2019-12-31*
D5.5	Calendar Year Report 3 to AAL to be electronically provided by the coordinator.	5	report	public	*2020-12-31*
D3.7	Final evaluation report on the FreeWalker services based on the three trials from each country	3	report	public	*2021-03-31*
D4.3	Dissemination Report	4	report	public	*2021-03-31*
D5.7	Project final report. It will summarise the whole project experience as well as the concrete results obtained while its execution.	5	report	public	*2021-03-31*

Since FreeWalker is developing a market solution, a lot of the content produced in other deliverables may contain IPR or other information crucial for the commercialization. These deliverables are restricted and will not be published. If possible, the general findings and results of some deliverables will be summarized and made available for the public on the project website.

1.3 Guide to this document

The dissemination plan is structured into three broad sections:
- Strategic approach, including objectives, understanding of stakeholders and methodological approach
- Dissemination work details including branding, channels and activities
- Targets and measurements

1.4 Special terms, abbreviations and acronyms

Terms, Abbreviation	Description	
AAL	Active Assisted Living	
Primary User (PU) / Primary Client (PC)	Seniors, MCI, PwD	
Seniors	Elderly people (no MCI, no PwD)	
MCI	Mild Cognitive Impairment	
Dementia, PwD	Person with Dementia	
Alzheimer's Disease, PwAD	Person with Alzheimer's Disease	
Secondary User (SU)	Informal / Formal Caregiver	
Tertiary User (TU)	Formal caregiver from institution, emergency centers, police	
EU / EUO	End User / End User Organization	
CG	Caregiver	
SZ	Save Zone	
SC	Save Corridor	
ISZ	Initial Safety Zone	
DSZ	Dynamic Safety Zone	
SBL	Soft Boarder Limit	
LS	Locating Service	
MOPAS Device	Safety tracer, localization	
Happy Walker Navigation App	Navigation	
CareCenter Software	Emergency database	
DoW	Description of Work	
WP	Work Package	
WP4	This Dissemination Report	
USP	Unique Selling Proposition	
N/A	Not Applicable	
Wandering	Aimless, slow, pointless movement	

2 PURPOSE

2.1 Objectives of FreeWalker

FreeWalker will integrate several proven components of AAL assistive devices and technologies, resulting in an innovative service with high market potential. A flexible and versatile solution for guiding and monitoring elderly or persons with cognitive impairments in the outdoor environment will be realized. A focus will be on supporting caregivers by providing emergency information in order to recover disoriented persons safely. The primary target groups in FreeWalker are persons with cognitive impairment, living at home or in an institutional care setting, as well as their (in)formal carers. The aim is to promote persons with cognitive impairment to stay active and physically healthy by reducing the fear of going out. By providing information to recover a missing person, caregivers are supported, and their burden reduced in the case of an emergency.

The FreeWalker System will use GPS localization and take into account the information of the daily schedule and habits of a person to understand where the person is going. If there are indications for getting lost or becoming disoriented, different counter measures and support will be initiated. FreeWalker will integrate market-ready components of MOPAS (localization), HappyWalker (navigation) and CareCenter Software (emergency database). Results from the currently running AAL project DayGuide (a guide through tasks of daily live) will be integrated.

FreeWalker will be tested with over 150 people in Austria, the Netherlands and Switzerland.

2.2 Dissemination objectives and strategy

Objective	Description	Update (2019)
0 Clarification	Clarify objectives and roles, stakeholders and target groups. Ensure clear and consistent wording.	OK
1 Framework	Implement a sustainable, consistent and impactful dissemination framework with channels and tools that are fit for the specific FreeWalker purpose	OK
2 Information	Inform all stakeholders about the progress of the FreeWalker project in a timely and meaningful way	Some stakeholders should only be informed when a robust prototype was tested (End of 2019)
3 Creating Awareness	Create a baseline attention among stakeholders and a wider audience for the future exploitation	We are still in the process of developing the Business Plan
4 Engaging	Convince relevant target group of the benefits and usefulness of the FreeWalker solution	This is only possible after the successful execution of the Beta Testing (Mid 2020)
5 Promoting	Implement dissemination campaigns that support and maximise exploitation outcomes	Planned for second half of 2020

Table 1: Dissemination Plan Objectives

The consortium aims to secure
- attention for the project
- future exploitation of the projects' findings

By successfully disseminating results and progresses of FreeWalker, the project consortium will be able to identify potential multipliers and additional partners for commercial exploitation of the product. At this stage of the project, various scenarios, e.g. B2B or B2C commercial exploitation, are plausible. The dissemination strategy and dissemination activities will be evaluated after a sufficient period (mid-term review). These findings will add important insights to the development of a detailed FreeWalker business plan.

In order to achieve our dissemination objectives, we propose a differentiated dissemination strategy. After identifying the project's main target groups, we individually design dissemination channels and instruments for each target group. This individually concentrated approach benefits from streamlined and tailored communication approaches for our target groups.

The dissemination plan relies on the individual efforts of each partner within the FreeWalker consortium. Notwithstanding, a collective approach and philosophy is essential in order to ensure maximum impact.

3 STAKEHOLDERS AND TARGET GROUPS

3.1 Overview

We are serving the following target groups:

- **Primary (End) Users: Senior, MCI, PwD, PwAD; other: People with Autism, Traumatic Brain Injury (TBI)** by supporting them in "Moving Savely, Living Independently"
- **Secondary (End) Users: Formal and informal caregivers** by giving them "Peace of mind"
- **Tertiary (End) Users: Government, health authorities and others** (police, client / branch organizations for home care, insurance companies) by saving money
- **Medical doctors** by giving them additional useful information regarding their patients
- **Funding** bodies by delivering value for money
- **Academia and other (AAL) projects** in offering a research impact
- **Non-profit Alzheimer associations**
- **Enterprise / Start-up in medial tech sector** by supporting them to develop a commercially successful service / product
- **Media** by delivering attractive stories / **Fairs** by offering "show-stopper" infos and activities

In order to support the definition of targeted dissemination actions we are putting the target groups in a box displaying their importance for the success of FreeWalker (-> horizontal axis) and the level of current / desired relationship with them (-> vertical axis).
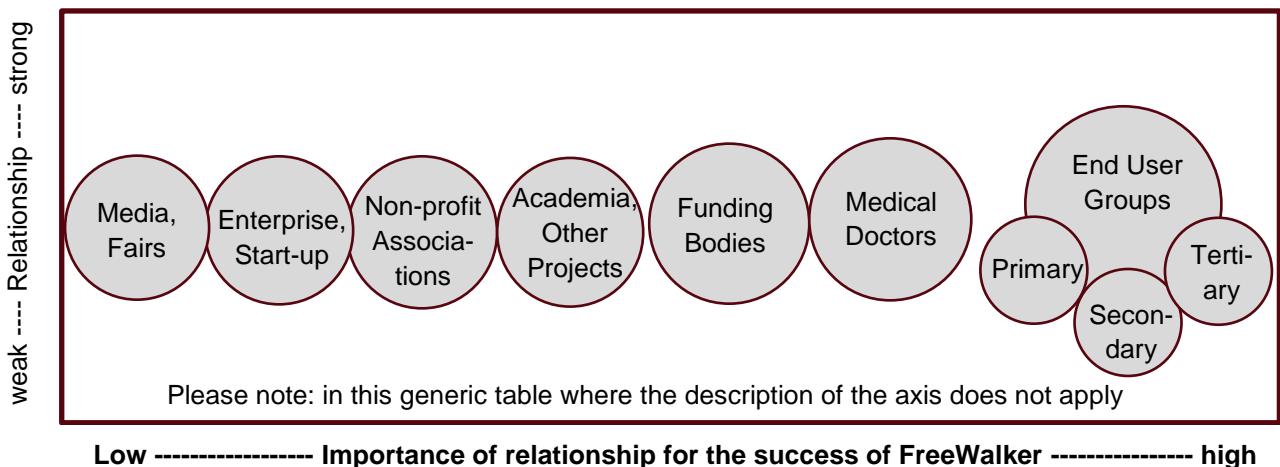

Low ------------------ Importance of relationship for the success of FreeWalker --------------- high

Table 2: Generic view on the consortium's relationship with stakeholder

Below please find the TERZ example of the relationship with stakeholders

Low ----------------- Importance of relationship for the success of FreeWalker --------------- high
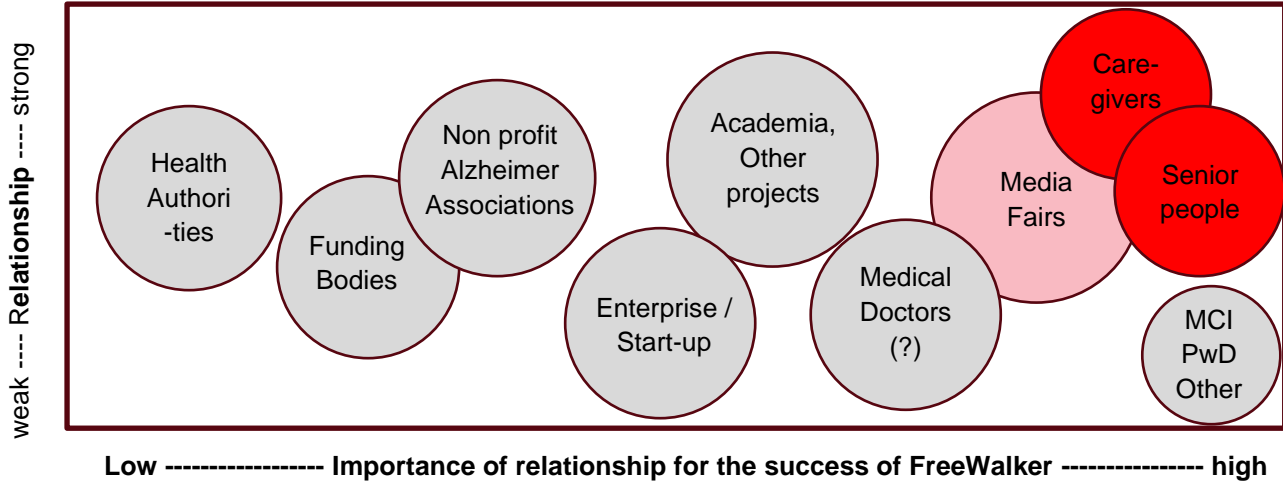
Table 3: Specific TERZ view on the relationship with stakeholders

How to read
- Caregivers / Senior people: Marked red = Primary task / role of TERZ in the project.
- MCI, PwD: It is necessary to include this end user group (= importance high). However, this is not the role of TERZ (= marked grey, not red) nor is it their competency (=weak relationship). As a consequence, a different partner needs to have a strong link to MCI/PwD, what in fact is **TL.**
Action point for TERZ
Even though TERZ has a strong relationship with end user groups, with still need to improve / extend, given the crucial importance of end users regarding our role in the FreeWalker project. In order to achieve this, we will continue to constantly work with caregiver organizations and the media.

3.2 Specific needs of the target groups

Specific needs of the End User Groups a) Primary users (seniors, MCI, dementia)
(http://www.altersatlas.ch/AA?story=802)
-    Improving quality of life (primary objective)
-    Increasing physical activity (primary objective)
-    Customer satisfaction (secondary objective)
-    Determination of mobility related events (falls, injuries) (secondary objective)
-    Correlation of mobility related events with cognitive functions
-    Leaving the apartment (contacts, variety / change, movement / exercise)
-    Safety / security
-    Social interaction
-    Autonomy / close proximity to the familiar environment
-    Image (not being seen as "old" or "handicapped")
-    Information, counselling and escort to (medical and other) services
-    Enabling, overcoming ("it costs me quite an effort to do it")
Please note: primary and secondary objectives are taken from doc. 3.2

Specific needs of the End User Groups b) Secondary users (formal and informal caregivers)
- Decreasing caregiver burden (primary objective); giving peace of mind

Specific needs of End User Groups c) Tertiary users (government, health authorities and others)
- Help them to reduce costs and / or using their resources more effectively
- Positive impact on the health of the (aging) population
- No scandals, no negative press

Specific needs of Medical Doctors
- Valuable information regarding patients

Specific needs of Funding Bodies
- Supporting a project that is in line with their vision / objectives / strategy / guidelines / …
- Getting evidence of the correct and efficient use of their money
- Being mentioned in our communication efforts to improve their image (not necessarily all of them)
- No scandals, no negative press

Specific needs of Academia and other Projects
- Getting timely information / sharing information (success, failures, how to, how not to, traps, …)
- Avoiding duplication of efforts (?)
- Being cross-referenced

Specific Needs of non-profit Alzheimer associations
- Getting information on how to use FreeWalker for their population

Specific needs of the Enterprise / Start-ups
- Creating an economically successful product (service, device, hardware, software, …)
- Increasing their brand reputation
- Getting correct information / requirements
- Being part of the feedback loop to further develop / improve product

Specific needs of the Media / Fair Organizers
- Regional Media: regional link of the information, personalised stories
- Other: innovation with a big impact, outstanding success, something with an USP, primeur / scoop
- Regional Fairs: very often 50plus fairs are somewhat dull, because the focus lies on overcoming the troubles of age. By positioning FreeWalker
    - as something positive
    - that combines latest technology (AI)
    - with existing products (smartphone and sensor)
    - to increase the free moving space of elderly people and
    - to give peace of mind to carers

    FreeWalker could be a "show-stopper". In order to make this happen, TERZ, as an example, will produce simple videos of people who attended the co-design workshops and were excited – this is expected to come over as very authentic and should catch attention of visitors who normally just walk along.
- Regional Fairs: In addition to our booth, we have to opportunity to present AAL-projects in short sessions with Q&A in a separate discussion forum

3.3   A deeper view on the primary user group

The range within the primary end user group it huge: from Seniors without any cognitive impairment to people with dementia. It therefore makes sense to highlight the focus of FreeWalker within this target group

Seniors   --------------------------   Mild Cognitive Impairment   ---------------   People with Dementia

nil   <-<<<<   low <- <<<<<<   **Level of Cognitive Impairment** >>>>>>>-> high >>>>>>-> max
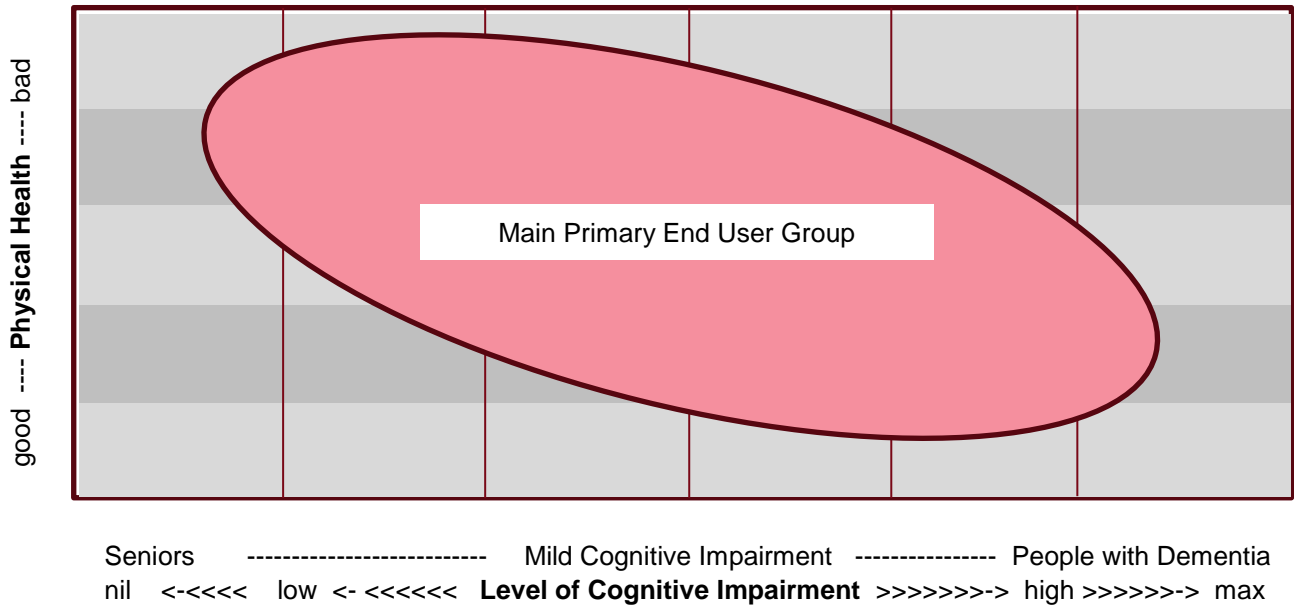
Table 4: Deeper view on the Primary Users

Please note: this is the target group of end users (people to whom FreeWalker should be sold in the future). The study participants as outlined in document D3.2 (2.4.6), however, is specified differently (see inclusion and exclusion criteria in D3.2)

3.4   A specific view on blockers and enablers

Are all of the stakeholders also enablers? As **we help people to help themselves** it is likely the case that we are affecting some of them in a negative way, e.g.
  - by reducing their opportunities to make money
  - by losing business (because less services are needed, e.g. catering)
  - by making them (e.g. a group of professions) redundant
  - by avoiding duplications or overlapping of services
  - by creating jealousy or something similar
Please note that already the (true or false) perception is reason enough to act as a blocker.

Municipality as an enabler for AAL market (Workshop1, AAL Forum, September 25, 2018)

4 KEY MESSAGES TO STAKEHOLDERS AND TARGET GROUPS

4.1 Slogans

Throughout the project, we will work with the official project slogan:
"FreeWalker – Moving Safely, Living Independently"
It is suggested to focus on the message above and not to create additional slogans.

As FreeWalker is in competition with existing GPS based Trackers, we must highlight the specific features to promote the additional value of FreeWalker. Below please find a comparison between the current solutions and FreeWalker that shows our USP:

4.2 Comparison of FreeWalker with competing products

This table helps to highlight the FreeWalker USP on which any dissemination / marketing should be based on. It also helps to avoid confusion between similar AAL projects - hence it could make sense to copy / paste this table into the dissemination plans of similar AAL projects. Furthermore, this table helps to understand what FreeWalker potentially should be able to deliver (-> requirements, end user needs, based on comparison with competition; this element must be crosschecked with the design and results of the co-design workshops).

How to read

Very important / USP　❓ = Important, but unclear　⚠️ = Is a must　✔ = OK　* see end of table

Feature	Free Walker	Care Link	Top 10 GPS Tracker*	"Lifestyle", e.g. Amparos S71
GPS tracking	✔	✔	✔	✔
Static zones ("geo fence")	✔		✔	✔
Dynamic zones	✔			
Manage **) "Wandering"	Erratic movement detection	tbc ✔		
Emergency action	✔		✔	✔
2-way communication	✔			
Voice control				
Self-learning	✔			

Fall detection	✔ ***)			
Sleepmonitoring				
Collecting medical data				
Level indication e.g. in shopping center	If there is WiFi			
"Lifestyle" Features	✔		Car, Luggage, Door-Alarm	
Control using Smartphone	✔		✔	
Control using Tablet	✔		✔	
Easy first-time configuration	✔			
Graphical support to create routes	✔			
Easy to adapt to new situations	✔			
Simple administration	✔			
Training & Education	⚠	✔		
After Sales Support	✔		Hotline ✔	
Battery running time	Up to 7 days		Up to 30 days	
Inductive battery charging?				
Charging of add. battery			✔	
Costs	Euro 300			
Test results (e.g. reliability)	✔			
Consumer view	n/a yet		3/5	

Table 5: Comparison of FreeWalker with competing products

*) According to alzheimers.net: AngelSense, GPS Smart Sole, iTraq, MedicAlert Safely Home, Mindme, PocketFinderProject Lifesaver, Revolutionary Tracker, Safe Link, Trax

*) According to CaringVillage: Angel Sense, Pocketfinder, iTraq, Trax, SpyTec, Yepzon, SPOT, GPS SmartSole (includes people at risk of kidnapping as a specific user group), Trackimo, Medical Guardian

**) Wandering Management / Prediction: Research with huge innovation potential (see: Location Predicting Using GPS Trackers by the Machine Learning and Inference Laboratory (MIL) with SmartSole) – see also Annex 11.2 of this paper).

***) This is only the case when the smartphone is supplemented by a MOPAS device

4.3 Key messages

Based on the specific needs of the various target groups (Section 3) the focus of the key message could be on:

Target groups	Specific Message	Details
Primary Users	"Moving Savely, Living Independently"	Start by end of 2019 (recruiting of test persons)
Secondary Users	„Peace of mind"	"
Tertiary Users	„Saving money", "Effective use of resources"	Start by beginning of 2020 (end of alpha tests)
Medical doctors	Get in touch with us, we can support your patients	"
Funding bodies	"Value for money"	"
Academia, other projects	Research impact	"
Non-profit Associations	Get in touch with us, we can support your clients	"
Enterprise / Start-up	Business opportunities	"
Media / Fairs	Attractive stories / attracting visitors	"

Table 6: Specific key messages to target groups

5   FREEWALKER BRANDING - VISUAL IDENTITY

A coordinated appearance is essential to establish and strengthen the FreeWalker brand. Using the same templates, colour schemes and wording assures that the stakeholder recognizes FreeWalker as one, even though the consortium partner have their own corporate identity.

5.1   Logo

The FreeWalker Logo was developed by Ivengi.com and agreed upon by the consortium. It symbolizes the movement and safety, that FreeWalker will enable its users.	
The logo will be used in all project materials including the website, PowerPoint presentations, newsletter, fact sheet, social media profiles and project deliverable documents.	

5.2   Templates

A series of templates have been developed for the partners to use and are available on the SharePoint server. All documents should be based upon:

- Deliverable template
- Minutes of meeting template
- Document template
- PowerPoint presentation template

5.3   Reference to AAL funding

The FreeWalker project receives funding from the Active Assisted Living Programme (AAL Programme) by the European Union. The AAL Dissemination guidelines state that:

"Any communication or publication, including information given to press, publicity material, official notices, reports, publications, shall acknowledge that the project is/was carried out under the AAL Programme and involved National Funding Authorities, and shall display, in an appropriate way, the European logo".
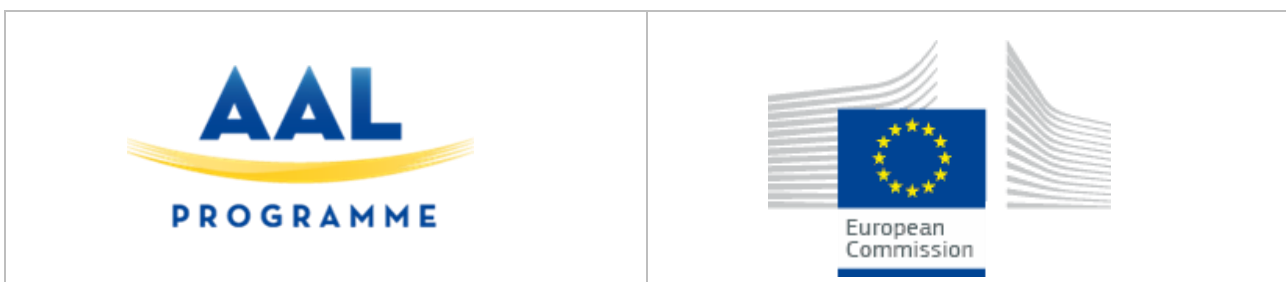
FreeWalker is co-funded by the AAL Joint Programme and the following national authorities and R&D programmes in Austria, Switzerland and the Netherlands.

6 DISSEMINATION CHANNELS & METHODS

After defining our target groups, messages goals and identiy, we can describe the channels that will be used to achieve as good dissemination results as possible. FreeWalker will use a variety of channels and their focus will differ during the scope of the project.

6.1 Project website

The website is available at: www.freewalker.eu or www.freewalker-aal.eu. It includes only public area info.

Through the website, different target groups can be reached and informed. It will contain general information about FreeWalker, deliver an overview over the projects objectives and show the benefits and usefulness for the main stakeholders. All "public" classified deliverables are available since Oct 3, 2019.

Visitors will find an agenda with all upcoming events related to FreeWalker as well as a news section. Updates about the progress and results of the projects and reports of past events will keep the user interested and raise awareness.

All involved partners will be presented on the website with a short description. The contact information of the project coordinator as well as the dissemination leader are available online. There is also the possibility to use a contact embedded in the website.

6.2 Partner website

All partners are encouraged to develop subpages for their own websites. These should provide a basic overview about the objectives and goals of the project and link to the main FreeWalker website. Relevant news, articles and updates about the progress of FreeWalker can be posted on the partners website.

Issuer	Media	Description of the Specific FreeWalker Contribution	Date	Target Groups
AIT	AIT website	Project information	2018	Non specific
Kepler	Website	N/A		
CareCenter	Subsite on CareCenter	Short description	2018	"
Creagy	https://www.creagy.ch/	AAL-part under construction		"
tanteLouise	Website	N/A		
MAS	Subsite on MAS	Short description	2018	"
Vilans	Subsite 1 on Vilans	Short description	2018	"
Vilans	Subsite 2 on Vilans	Short description	2018	"
TERZ	Subsite on TERZ	Short description	2019	"
Ivengi	Direct Link	Focussing on DSZ, in Dutch	2018	"

Table 7: Partners' website highlighting FreeWalker

6.3 SharePoint

All restricted documents will be shared on an internal SharePoint, which was set up by the project coordinator. This area is available only to project members and protected by password (each partner has his login and password). Restricted area allows comfortable access to project documents and enable effective communication between partners. This area is updated by project coordinator and WP/Task leaders.

6.4 Electronic newsletter

Relevant information will be submitted by the partner's own newsletters. It should always include an overall element (e.g. a short description of FreeWalker, overall status, …) plus the specific contribution of the respective partner

Issuer	Media	Description of the Specific Contribution	Date	Target Groups
CareCenter	CareCenter Online News	Information about Kick Off was presented at Website	Apr 2018	
CareCenter	CareCenter Newsletter	Information about Kick Off was sent out to all customers	June 2018	
Vilans	Vilans newsletter	Information on project	July 2018	
TERZ	terzNewsletter (monthly) – Mailing to all members and retirement homes in CH	FreeWalker: co-operation with end users (scroll down to see article on FW)	Dec 2018	Primary Users, Secondary Users
TERZ	terzNewsletter	FreeWalker: test persons wanted	Nov 2019	Primary Users
Ivengi	Ivengi newsletter	Every 2 months the last customer cases inside	2018	

Table 8: Partners' newsletter highlighting FreeWalker

6.5 Partner printed newsletter / report (not available online)

Issuer	Media	Description of the Specific Contribution	Date	Target Groups
TERZ	terzBulletin (3 / year) for people not online	Focus will be on Beta Testing	2020	Selected Primary Users
MAS	Annual Report	Presentation of the project	Nov 2018	2500 pcs

Table 9: Partners' printed newsletters (not available online)

6.6 Social media

Social Media is a simple way to interact with all relevant stakeholders. FreeWalker will use Twitter and Facebook to primarily disseminate and promote news and results about the project. But also to reach out to other AAL partners, potential stakeholders and in the best case react with interested users.

The Twitter handle @AAL_FreeWalker has been reserved and a Facebook Page been created. All social media accounts will connect and interact with the consortium partners and will either further promote their project relevant content or create FreeWalker posts for them to share. That way FreeWalker can utilize the already existing social media network of our partners.

Issuer	Media	Description of the Specific Contribution	Date	Target Groups
FreeWalker	Twitter	Poster	Sept 2019	
FreeWalker	Facebook	Poster	Sept 2019	
CareCenter	Twitter	Information about Kick Off was posted	Apr 2018	
CareCenter	Facebook	Information about Kick Off was posted	Apr 2018	
MAS	Facebook	Information about project (In preparation)	Dec 2018	
Vilans	Twitter	Information about Kick Off	Apr 2018	
Ivengi	Linkedin	DSZ, in Dutch, with 2 positive comments!	2018	

Table 10: Social Media

6.7 Press and marketing kit

In the course of the project a press and marketing kit will be developed. These materials will build on the corporate design and provide essential information on the project. Moreover, the kits will contain the logos of all consortium partners. It is envisaged to develop a project brochure and a project poster which can be used by the consortium partners for official events related to FreeWalker. Moreover, in accordance with the corporate design of FreeWalker, a Microsoft Word and PowerPoint template will be developed. These templates serve as the basis for any correspondence or presentation regarding FreeWalker.
The press kit can be found on the project website.

6.8 Press and media coverage; journals, professional magazines, …

Issuer	Media	Description of the Specific Contribution	Date	Target Groups
MAS	District Radio Station	Interview about MAS and project work	Dec 5, 2017	
VIL	Newsitem on ICT & Health	Info about FreeWalker	2.8. 2018	
VIL	Interview	Interview H.H. Nap "dynamische leefcirkels"	16/9/2019	
IVEN	ICT&health	Info about FreeWalker	04/2019	

Table 11: Partners' press and media coverage; articles & publications in professional magazines

6.9 Conferences, events, fairs, workshops

Project partners will participate at national and international conferences to present FreeWalker and its results, to raise awareness and promote the project idea. During conferences, fairs and workshops the project printed materials (posters, leaflets) will be disseminated among the audience. Not only can partners gather contact details from potential customers, they will also receive valuable feedback from a broad selection of stakeholders.

Partner	Name and some details on Conference, Fair, Workshop	Description of the Specific Contribution	Date	Target Groups
AIT	Imh - "Innovatiove Modelle in der Pflege und Betreuung"	Oral Presentation	Jun.11, 2018	All
AIT	AAL Forum in Aarhus	Booth with roll up with USP, Klaus D. for Q&A	Sept. 23-25, 2019	All
AIT	First Krems Dementia Conferences	Poster and Abstract	Nov. 5-7,2019	Scientific
AIT	AAL Kongress, Karlsruhe		8.-9. Oktober 2020	
AIT	Tag der offenen Tür, Uni Krems		yearly	
AIT	Niederösterreichisches Forschungsfest		yearly	
KEP	Österreichische Alzheimer Gesellschaft Tagung		yearly	
CCS	Pflegekongress, Vienna	CareCenter will give a lecture about AAL including FreeWalker	29.-30.11.2018	
CCS	Pflegekongress, Vienna	Presenting FreeWalker to visitors	2.-3.10.2019	
MAS	First Krems Dementia Conference		November 5–7, 2019	

VIL	Vilans Relationday	Invited Speaker for 100 people on AAL project at Vilans (including FreeWalker)	19.09.2018	
VIL	AAL Praxiskonferenz Austria	Invited keynote for 100 people on AAL in The Netheralnds (including FreeWalker)	15.11.2018	
VIL	Verklizan Innovation Day	Invited Speaker for 300 people on AAL Project FreeWalker	26.11.2018	
TERZ	"Zukunft Alter", a fair focussing on topics regarding "age", located in Lucerne	Inform about TERZ including FreeWalker project in order to recruit participants for workshops / studies	Nov 30 – Dec 2, 2018	Primary & Secondary Users, Media
TERZ	50plus Weinfelden, same objectives as Lucerne fair	Same as Lucerne	Feb / March 2019	Same as Lucerne
IVEN	Ministry of Health in Rotterdam.	Booth with FW highlighting Save Zone	May 23, 2019	Together w. Safety Tracer
IVEN	Care &ICT exhibition in the Netherlands	FreeWalker	March 12, 13 and 14th 2019	
IVEN	Mobile Health Congress Utrecht	Own stand for FreeWalker	Nov 8, 2018	Together with Vilans
IVEN	Health & ICT Congress Utrecht	Poster FreeWalker	March 2018	Together w. Safety Tracer

Table 12: Partners' conferences, events, …

6.10 Leaflets

Using leaflet is a profitable and impact ensuring way of promotion. FreeWalker will present two leaflets. The first will aim at giving basic information on the project (including logotypes of Active and Assisted Living Programme – AAL, Partner institutions and national co-funding institutions), raising awareness and promotion of the FreeWalker solutions among key target groups. In a later stage of the project a more detailed leaflet will present preliminary results and further information.
See the example of carelink

7 RISKS

"Potential risks and sensitivities - be aware of the relevant current cultural and political climate. Consider how your dissemination might be perceived by different groups. Think about what the risks are to your dissemination plan e.g. intellectual property issues. Contact your funding programme for advice." (Taken from NHS; National Institute for Health Research: dissemination guidance).

Description of risk	Mitigation of risk	Evaluation
Not clear about objectives and roles	Clear from the beginnning	
Unclear use of terms	Some difficulties at the beginning, now ok (e.g. colour and meaning of "Zones"	
Not strong enough inclusion of blockers (see: 3.4.)	No blockers identified; are there no blockers or do we not see them?	
Failure in reaching specific target groups with specific messages (see: 9. Evaluation)	We must increase our efforts with the start of the field trials; see also Business Plan	
Negative touch of the term "geo-fencing"	Use appropriate terms for that, such as "safety area", "safe zone", "walking zone" "exploring zone", "safe corridor"	
Concerns around "data protection"	Emphasize on the benefit for the primary user regarding his/her safety, compared to potential data protection risks	Too early to evaluate
Intellectual property issues		N/A
Cultural and political sensitivities		?

Table 13: Risks and their mitigation

See also Carelink Dissemination and Exploitation Plan, V 2, page 19f:
- Avoid tick box mentality
- Lack of knowledge of risks and opportunities
- Narrow view of key results
- **Focus on technical at expense of users / stakeholders**
- Confusion over Communication, Dissemination, Exploitation
- Lack of reflection / joint discussion with consortia

8 ACTION AND TIMING

8.1 Information and awareness / Understanding and engagement

With the video (ready October 2019) we are expecting to make one important step ahead.

8.2 Creating an impact / Action Plan

Starting in 2020; the result of the study is an important element to support this.

9 EVALUATION

A constant evaluation of the dissemination activities and their impact is crucial for successful dissemination
The dissemination plan and all material will be reviewed every 6 months and updated if necessary.
Feedback from stakeholders is highly appreciated and all partner should gather these for the evaluation. All electronic activities will be evaluated through key indicators, such as reached newsletter user, Twitter and Facebook posts or website visitors.
Below please find an overview on our target groups and how well we reached them with specific messages

Target Groups	Evaluation Criteria	Start Apr 18	In between	MTR Sep 19			Project end	Action: See -> 8 in this document
Primary Users	Number of visitors / clicks / comments							
Secondary Users	Number of personal contacts							
Tertiary Users	Number of personal contacts							
Medical doctors	Feedback							
Funding bodies	Feedback	?	?	?				
Academia, other projects	Number of quotations, number of invitations to present FreeWalker							2020
Enterprise / Start-up	Number of start-ups interested, progress							2020
Media / Fairs	Coverage							

Table 14: Evaluation

10 PUBLIC DELIVERABLES

Not all deliverables can be public, as they may contain IPR or information crucial for the later commercialization. For some of the restricted deliverables a summary will be published on the project website.

D1.1, D1.2, D4.1, D5.3

All available on the consortium's website: www.freewalker-aal.eu

11 ANNEX

11.1 Six expert tips on interviewing people with dementia
Taken from the **CareLink Website**

Go as a human being.

Although it is important to be transparent about why you are doing an interview, don't approach people with dementia as 'a researcher' but as a human being. Introduce yourself, talk about yourself (a bit) and **look for touch points** such as matching interests, that will get you both talking.

Always treat people with dementia as grown ups.

Seems obvious, doesn't it? But it often isn't respected in practice. Because people with dementia will gradually lose some of their abilities there is a tendency to approach them as children rather than grown ups. Depending on how much their condition has progressed, they still maintain much of **their own opinions and preferences**. Therefore, it is important to involve them directly and not to belittle them.

Positively reinforce what people with dementia are capable of.

Although you might be interested in both the capabilities they still have and the ones they have lost, make sure not to rub in what they have lost or what is coming. Many people with dementia naturally have a hard time accepting these losses in terms of capabilities or even the fact they're living with dementia. Therefore, they will often avoid talking about this or denying it altogether. As such, it is important to focus more on what people with dementia are still capable of so we can **leave them with a positive feeling** after the interview.

Use personas as a tool for projection.

To get past those uncomfortable subjects, we have introduced people with dementia to personas of other people with dementia to stories similar to theirs. This allows them to talk about uncomfortable subjects (such as loss of capabilities, wandering, etc.) **in the third person**, making it less confronting.

Make sure to get consent.

An obvious point, but it's important to get their consent, directly from them or via an informal caretaker acting as their legal guardian.

Bring a gift or sweets.

This is a way of thanking your participants for their time and effort but it also creates a more familiar, informal setting for the interview to take place in. And who doesn't like sweets?

11.2 Location predicting using GPS trackers by the Machine Learning and Inference Laboratory (MIL) (2018)*

Below please find excerpts from the report's Abstract section:

Significant number of people with dementia are at risk of wandering and getting lost. These individuals may get hurt, cause distress to families and caregivers, and require costly search parties. This study explores the possibility of using machine learning methods applied to data from GPS trackers to create individualized models that describe patterns of movement. These patterns can be used to predict typical locations of individuals with dementia, and to detect movements that do not follow these patterns and may correspond to wandering. Data from a sample of 338 GPS trackers were used.

For us it is important to take into consideration the following (page 5):

Because the data analyzed here did not include any information about the device users and dementia, in the presented work we cannot claim any relationship between obtained results and confirmed incidents of wandering, thus we assume that any non-typical movement is potentially related to wandering.

(This is also expressed in the subtitle of the study: _Towards_ *predicting wandering in people with dementia*)

From the Conclusions we can learn two things:

a) Studies with people suffering from AD will take 2 – 3 years (at least according to MIL), what we assume is beyond the possibilities of AAL (as a consequence, we have to focus on including the results of available relevant studies)

b) Landmark data extracted from Open Street Maps might be useful for a more accurate positioning of lost people in large buildings with several levels (e.g. shopping centres, train stations) by FreeWalker

One important limitation of the presented work is that data are not limited to AD patients, and in fact there is no information about the device wearers at all. Currently the work is being extended by directed data collection from GPS trackers linked to clinical and socioeconomic information. Individuals with confirmed stage 3-6 Alzheimer's disease will be tracked for 2-3 years to collect sufficient data for prediction of wandering, and possibly linking wandering to progression of AD. On methodological side, the movement patterns are being linked to landmark data extracted from Open Street Maps. This will allow for detection of patterns related not only to coordinates and their relationships, but more importantly to what is located at a given location. The work is also extended with the possibility of predicting movement based on the last known location.