



FAMILY

Running in the FAMILY - Understanding and predicting the intergenerational transmission of mental illness

Project Nr. 101057529

D9.2. – Dissemination and Communication Plan

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Author list D9.2 Dissemination and communication plan

Organisation	Name	Contact information
concentris	Veronika Pičmanová	veronika.picmanova@concentris.de
concentris	Juliane Dittrich	juliane.dittrich@concentris.de
Erasmus MC	Neeltje van Haren	n.vanharen@erasmusmc.nl
Erasmus MC	Lisanne van Houtum	l.vanhoutum@erasmusmc.nl

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Abbreviations

AACAP	American Academy of Child and Adolescent Psychiatry
AEPEA	Association Européenne de Psychopathologie de l'Enfant et de l'Adolescent
CHUV	CENTRE HOSPITALIER UNIVERSITAIRE VAUDOIS
EFPT	European Federation of Psychiatric Trainees
EPA	European Psychiatric Association
EOSC	European Open Science Cloud
ESCAP	EUROPEAN SOCIETY FOR CHILD AND ADOLESCENT PSYCHIATRY
EU	European Union
EUFAMI	EUROPESE FEDERATIE VAN FAMILIEVERENIGINGEN VAN PSYCHIATRISCH ZIEKE PERSONEN IVZW
ERASMUS MC	ERASMUS UNIVERSITAIR MEDISCH CENTRUM ROTTERDAM
FCRB	FUNDACIO CLINIC PER A LA RECERCA BIOMEDICA
FIBHGM	FUNDACION PARA LA INVESTIGACION BIOMEDICA DEL HOSPITAL GREGORIO MARANON
IACAPAP	International Association for Child and Adolescent Psychiatry and Allied Professions
IPR	Intellectual Property Rights
ISAPP	International Society for Adolescent Psychiatry and Psychology
ISBD	International Society for Bipolar Disorders
LU	LATVIJAS UNIVERSITATE
OA	Open Access
OHBM	Organization for Human Brain Mapping
OSF	Open Science Framework
PARADISE	Protected Area for Real Advancement of Discussion and Scientific Exchange
PI	Principal Investigator
PMO	Project Management Office
QC	Quality Check
RADBOUDUMC	STICHTING RADBOUD UNIVERSITAIR MEDISCH CENTRUM
SANS	Social and Affective Neuroscience Society
SEAB	Scientific and Ethical Advisory Board
SC	Steering Committee
SIRS	Schizophrenia International Research Society

UCL	UNIVERSITY COLLEGE LONDON
UZH	UNIVERSITÄT ZÜRICH
WP	Work Package
WPA	World Psychiatric Association

Table of Contents

1	Executive Summary	7
2	Deliverable Report	7
2.1	Introduction and definition	7
2.2	Objectives.....	8
2.3	Communication strategy	8
2.4	Expected results.....	13
2.5	Peer-reviewed publications, posters, and conference talks	19
2.5.1	Principle of authorship	19
2.5.2	Review and approval procedure	19
2.6	Conferences and events	22
2.6.1	Stakeholder dialogues organised by FAMILY.....	22
2.6.2	Relevant other scientific conferences as a platform for showcasing FAMILY results	22
3	Communication Tools and Activities	23
3.1	Project Identity and communication material.....	23
3.1.1	FAMILY communication toolkit.....	23
3.1.2	Target release times	23
3.2	Project website	24
3.2.1	Link	24
3.2.2	Who is in charge.....	24
3.2.3	Quality management activities is in charge.....	24
3.2.4	Target release times	24
3.3	Social media	25
3.3.1	Overview social media accounts	25
3.3.2	Who is in charge (“social media manager”).....	25
3.3.3	Social media audience	25
3.3.4	Hashtags and handles to be used.....	26
3.3.5	Connection between social media accounts, project website and other communication means of FAMILY	26
3.3.6	FAMILY code of social media conduct.....	27
3.3.7	Flexible time of postings.....	27
3.4	Videos/ TV spots / Broadcasting.....	28
3.5	Press release / public media article	28
4	Exploitation of Results	29

5	Educational activity	30
5.1	Portfolios and mentoring program	30
5.2	Training courses	30
5.3	Internships	30
6	Open access	32
6.1	Definitions	32
6.2	Contractual requirements about open access publications.....	32
6.2.1	Open access to scientific publications	32
6.2.2	Open access to research data.....	33
7	Sustainability measures after the end of the project	34
8	Monitoring of Dissemination and Communication activities	35
8.1	Roles and responsibilities	35
8.2	Performance evaluation	36
8.2.1	Process of performance evaluation	36
8.2.2	Key performance indicators	36
8.2.3	Target release times	36
9	Tracking and reporting of Dissemination and Communication activities	37
10	Standard acknowledgement	38
11	Acknowledgement and Disclaimer for this report	38

1 Executive Summary

This document deals with the dissemination and communication measures, that are crucial for the FAMILY project. In the following chapters, the overall objectives, stakeholders and channels of dissemination and communication for the FAMILY project are summarized and clearly explained. The document sets the foundation and stable framework for the implementation of all dissemination and communication activities, exploitation, training activities, as well as publications. The stakeholder analysis was performed by the Steering Committee (SC) and concentris in consultation with the consortium partners. concentris will measure and report on an 18-monthly basis the success of the chosen communication channels using the most appropriate measurements. Based on the collected data, concentris will propose strengthening or weakening of certain communication channels.

2 Deliverable Report

2.1 Introduction and definition

This document sets the outline of the FAMILY dissemination and communication plan. It covers the overall objectives, stakeholders and channels of dissemination and communication for the FAMILY project. Moreover, it establishes exploitation, training activities and procedures for performance evaluation. Finally, it will facilitate the implementation of the FAMILY publication rules as outlined in the FAMILY Grant Agreement (101057529) and the FAMILY Consortium Agreement.

The terms “Communication”, “Dissemination”, and “Exploitation” are defined as follows:

Communication:

“Communication on projects is a strategically planned process that starts at the outset of the action and continues throughout its entire lifetime, aimed at promoting the action and its results. It requires strategic and targeted measures for communicating about (i) the action and (ii) its results to a multitude of audiences, including the media and the public and possibly engaging in a two-way exchange.”

Dissemination:

“The public disclosure of the results by any appropriate means (other than resulting from protecting or exploiting the results), including by scientific publications in any medium.”

Exploitation:

“Means to make use of the results produced in an EU project in further activities (other than those covered by the project, e.g. in other research activities; in developing, creating and marketing a product, process or service; in standardization activities).”¹

¹ [EC Research & Innovation Participant Portal Glossary/Reference Terms](#)

2.2 Objectives

The objectives of this Dissemination, Communication and Exploitation Plan are the following:

- Create platforms and materials for dissemination, training and communication ensuring open access and reproducibility of research outputs
- Systematically share new scientific knowledge and tools as early and widely as possible
- Inform and reach out to society and show the activities performed, and the use and the benefits of FAMILY for citizens
- Involve all relevant knowledge actors including patients, mental health care professionals, policy makers in the mental health care domain and end-users in the co-creation of ethics guidelines, together with WP8.
- Ensure collaboration and synergy with relevant other activities in the field and sustainability of new knowledge
- Foster sustainability beyond the project end and standardisation of results
- Support the development of skills and capacities in mental health research, as well as accelerating the take-up and use of scientific evidence, new technologies and best practices

2.3 Communication strategy

To be maximally efficient and effective, the FAMILY Steering Committee together with its partners defined the relevant stakeholders and groups for which our results will be important:

- Scientific impact:
 - Researchers in neuroscience, psychiatry, developmental psychology, genetically informed statistical methodology, computer modelling communities, social sciences and bioethics, who will benefit from new knowledge, methods, tools, risk prediction models, and reporting guidelines that will be made available to the scientific community.
 - Early-career and mid-career researchers in the FAMILY consortium, who will be trained and supervised in a team-science spirit within a multidisciplinary fertile scientific environment.
 - Intervention developers, who will build on scientific discoveries related to causal risk and resilience factors to develop and investigate new pharmaceutical, psychological and/or lifestyle preventive or treatment interventions.
- Societal and clinical impact:
 - Patients and their families, who face the consequences of mental illness themselves or in their family.
 - Mental health care professionals in child and adolescent mental health services and adult mental health services, who work with these families at high-risk.
 - Policy makers in the mental health care domain, who will benefit from increased knowledge on the role of familial risk for mental illness to improve the mental health care system (e.g. [ethical] guideline development) and stimulate integration between child and adolescent mental health services and adult mental health services. Moreover, implementation of risk prediction tools will bring a change to the total mental health care system, leading to earlier identification of those at risk, reducing under-diagnosis and delay in diagnosis, improving the accuracy of diagnoses, and improving preventive and treatment interventions.
 - General public, to increase knowledge on mental illness and its consequences for vulnerable families, leading to a reduced stigma on mental illness.

Table 1: Target groups, communication goals, multipliers and communication tools to reach them

Target audience	Communication goals, i.e. what we want our target groups to do / understand etc.	Communication tools, i.e. how we want to reach them									
		Publications	Conferences	Guidelines	Data sharing	Website	Social media	Videos	Press releases	Training	
(1) Scientific community											
<ul style="list-style-type: none"> • <u>Doctors / clinicians/ clinical centres</u> 	<ul style="list-style-type: none"> – Increase awareness of familial risk and address issues of intergenerational risk with patients, learn about social and ethical consequences of risk prediction tools, understand how to communicate about risk prediction 	x	x	x		x	x		x	x	
<ul style="list-style-type: none"> • <u>Academic sector</u> (universities, general hospitals and research groups, research networks, research societies) in the fields of: <ul style="list-style-type: none"> ○ Mental health 	<ul style="list-style-type: none"> – The role of genetic and environmental factors and their interaction in risk for mental illness within family context, how can these factors help predict who is at the largest risk, what are social and ethical consequences of risk prediction, how do professionals communicate about risk with patients and families 	x	x	x	x	x	x	x	x		
<ul style="list-style-type: none"> • <u>Early career scientists</u> 	<ul style="list-style-type: none"> – Understand genetically informative statistical models, normative modelling, prediction modelling. Learn about epidemiology, mental illness, intergenerational transmission, diverse set of scientific methodologies (human & animal), open science practices 	x	x		x	x	x	x		x	
(2) Government / Regulatory decision makers											
<ul style="list-style-type: none"> • <u>National agencies</u> <ul style="list-style-type: none"> ○ European Medicines Agency ○ National health authorities 	<ul style="list-style-type: none"> – Lobby for including and adapting clinical guidelines based on new FAMILY findings 	x		x		x	x		x		
<ul style="list-style-type: none"> • <u>European level</u> <ul style="list-style-type: none"> ○ European Commission (Directorate Health Authority) 	<ul style="list-style-type: none"> – Spread general news about FAMILY in the large community of the HORIZON Europe Programme. – Raise awareness, educate, disseminate results at patient and laymen's events 	x	x				x				
(3) General public											
<ul style="list-style-type: none"> • <u>Patients</u> <ul style="list-style-type: none"> ○ Patients with mental illness ○ Patient and interest organisations 	<ul style="list-style-type: none"> – Better understand (predisposition to) mental illness in families, gain acceptance of this condition and decrease stigmatization – Giving feedback and engaging in dialogue 	x	x			x	x	x	x		

Target audience	Communication goals, i.e. what we want our target groups to do / understand etc.	Communication tools, i.e. how we want to reach them									
		Publications	Conferences	Guidelines	Data sharing	Website	Social media	Videos	Press releases	Training	-
<u>Patients’ families and care givers</u>	<ul style="list-style-type: none"> - Publication of results in patient journals and presentation at patient events - Support changes in treatment practice based on FAMILY results - Raise awareness, educate, disseminate results at patient events 										
<ul style="list-style-type: none"> • <u>General public</u> 	<ul style="list-style-type: none"> - Better understand mental illness 		x			x	x	x	x		

Table 2: FAMILY List of stakeholders

Category	Stakeholders	Website	Comment
Multiple Stakeholders	European College of Neuropsychopharmacology ECNP	https://www.ecnp.eu	Brings together research and treatment / public health.
Multiple Stakeholders	European Brain Council EBC	https://www.braincouncil.eu	Brings together researchers, patients, policy makers and industry
Multiple Stakeholders	ESCAP	https://www.escap.eu	European Society for Child and Adolescent Psychiatry not-for-profit association whose purpose is to promote the mental health and wellbeing of children, adolescents, and their families. As well as to improve the quality of their lives and to ensure children's right for support to healthy mental development and for appropriate preventive and therapeutic mental health services and interventions.
Multiple Stakeholders	EFPT	https://efpt.eu	The EFPT represents the consensus of psychiatric trainee's associations across European countries and advocates for what training should look like, regardless of the country. Journal: https://efpt.eu/european-journal-of-psychiatric-trainees/
Multiple Stakeholders	ISAPP	http://www.isapp.org	International Society for Adolescent Psychiatry and Psychology (ISAPP) is an organization established to work for the mental health of adolescents and it is comprised of individual members devoted to working with adolescents, either in the field of child psychiatry and psychology or adult psychiatry and psychology.
Patient organisation	EUFAMI	https://eufami.org	International non-profit organisation. Improving care and welfare for people affected by mental ill health. Enabling their member organisations to act jointly at a European Level, combining their efforts and sharing experience.

Government / Regulatory decision makers	World Health Organisation	https://www.who.int	
Government / Regulatory decision makers	EU Research Council	https://erc.europa.eu	
Government / Regulatory decision makers	EU Commission	https://ec.europa.eu/info/index_en	
Politicians	EU Parliament	https://www.europarl.europa.eu/portal/en	
Professional associations	World Psychiatric Association	https://www.wpanet.org	Collaborative work with international agencies, leading non-government and civil society organisations, and research institutions in many countries. WPA has a formal relationship with the World Health Organization (WHO) and a joint work programme with the WHO's Department of Mental Health.
Professional societies	FENS	https://www.fens.org	Federation of European Neuroscience Societies
Professional societies	Human Brain Project HBP: EBRAINS	https://www.humanbrainproject.eu/en/ https://ebrains.eu	The Human Brain Project (HBP) is building a research infrastructure (EBRAINS) to help advance neuroscience, medicine, and computing
Professional societies	Network of European Funding for Neuroscience Research NEURON	https://www.neuron-eranet.eu	Mission to advance research on the human brain and its diseases; create European research networks.
Professional societies / Health care providers	Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften e.V. AWMF	https://www.awmf.org/awmf-online-das-portal-der-wissenschaftlichen-medizin/awmf-aktuell.html	Scientific-based medicine (all healthcare disciplines)
Professional societies / Health care providers	European Psychiatric Association (EPA)	https://www.europsy.net	EPA is the main association representing psychiatry in Europe. EPA's activities address the interests of psychiatrists in academia, research and practice throughout all stages of career development. EPA deals with psychiatry and its related disciplines and it focuses on the improvement of care for the mentally ill as well as on the development of professional excellence.

Professional societies / multiple stakeholders (bridges)	Pan European Regional Committee (PERC) of the International Brain Research Organization (IBRO)	http://www.ibro.org	A global organization resulting from the union of neuroscience organizations with the aim to promote and support neuroscience training and collaborative research around the world. The IBRO-PERC is a PanEuropean Regional Committee supporting the IBRO mission and helping to plan and implement IBRO activities in Europe. In the last few years, IBRO-PERC has established collaborations with European organizations to promote neuroscience in Europe at all levels, including the training of the next generation of European neuroscientists as well as stimulation of using scientific knowledge to develop and improve treatments of disease
Academics	All FAMILY Researchers	-	

Dissemination of Results

2.4 Expected results

The following Table (Table 3) displays the expected results (i.e., deliverables) of all work packages, the month they are due for submission to the European Commission, the dissemination level according to the Grant Agreement, target groups and users, and the relevance of contents for them.

Del No	Deliverable name	WP No	Short name of lead participant	Dissemination level	Delivery date (month)	External relevance? (YES/NO)	Target Group		
							(1) Scientific audience	(2) Government / Regulator	(3) General public
D1.1.	1st report about feedback from SEAB	1	9 - concentris	SEN	June, 2023	NO			
D1.2.	2nd report about feedback from SEAB	1	9 - concentris	SEN	January, 2025	NO			
D1.3.	3rd report about feedback from SEAB	1	9 - concentris	SEN	July, 2026	NO			
D1.4.	1st report and plan for gender balance	1	9 - concentris	PU	March, 2023	YES	x	x	x
D1.5.	2nd report and plan for gender balance	1	9 - concentris	PU	March, 2025	YES	x	x	x
D1.6.	Final report and plan for gender balance	1	9 - concentris	PU	March, 2025	YES	x	x	x
D2.1.	1st version of data management, harmonisation, and open science plan	2	7 - FCRB	SEN	March, 2023	YES	x	x	x
D2.2.	Data Dictionary and full WP2 Knowledge Base	2	9 - concentris	SEN	March, 2024	NO			
D2.3.	Long-term data (re)use plan	2	7 - FCRB	PU	September, 2026	YES	x	x	
D2.4.	Final Data management, harmonisation, and infrastructure report	2	7 - FCRB	PU	September, 2027	YES	x	x	
D3.1.	Report on the software pipelines based	3	16 - UCL	PU	March, 2023	YES	x		

	on simulation studies								
D3.2.	List of polygenic scores indexing genetic nurture and transmission established	3	16 – UCL	SEN	March, 2025	NO			
D3.3.	List on mediators, moderators, and clinical applications	3	16 - UCL	SEN	September , 2027	NO			
D4.1.	List of epigenetic markers and mediators of intergenerational transmission of psychiatric risk and resilience	4	1 - ERASMUS MC	SEN	March, 2027	NO			
D5.1.	Study initiation package POBI-EMC	5	1 - ERASMUS MC	SEN	March, 2023	NO			
D5.2.	Study initiation package POBI-FCRB	5	7 - FCRB	SEN	March, 2023	NO			
D5.3.	Study initiation package POBI-FIBHGM	5	10 - FIBHGM	SEN	March, 2023	NO			
D5.4.	Study initiation package POBI-CHUV	5	15 - CHUV	SEN	March, 2023	NO			
D5.5.	Midterm recruitment report POBI-EMC	5	1 - ERASMUS MC	SEN	June, 2024	NO			
D5.6.	Midterm recruitment report POBI-FCRB	5	7 - FCRB	SEN	June, 2024	NO			
D5.7.	Midterm recruitment report POBI-FIBHGM	5	10 - FIBHGM	SEN	June, 2024	NO			
D5.8.	Midterm recruitment report POBI-CHUV	5	15 - CHUV	SEN	June, 2024	NO			

D5.9.	Report on the status of posting results clinical study POBI-EMC	5	1 - ERASMUS MC	PU	September , 2025	YES	x		
D5.10.	Report on the status of posting results clinical study POBI-FCRB	5	7 - FCRB	PU	September 2025	YES	x		
D5.11.	Report on the status of posting results clinical study POBI-FIBHGM	5	10 - FIBHGM	PU	September 2025	YES	x		
D5.12.	Report on the status of posting results clinical study POBI-CHUV	5	15 - CHUV	PU	September 2025	YES	x		
D5.13	List of neuroimaging predictive markers of intergenerational transmission shared or not between parents and offspring	5	1 - ERASMUS MC	SEN	January, 2027	NO			
D6.1.	List of maternal care and germline epigenome, and genetic background factors and brain metrics involved in the mechanisms of intergenerational transmission of 'mental' illness in mouse models	6	14 - UZH	SEN	September 2027	NO			
D7.1.	Sets of multimodal neuroimaging, multilevel biological-behavioural demographic components, and components of	7	1 - ERASMUS MC	SEN	September 2025	YES			

	genomic effects on the brain in children and adults								
D7.2.	Report on accuracy and contribution of all (multimodal / multilevel) variables in prediction model and causal pathway models	7	2 - RADBOUDUM C	SEN	September 2027	NO			
D8.1.	Report on ethical and social issues in development and use of prediction tools	8	4 - LU	SEN	September 2025	NO			
D8.2.	Report on attitudes, expectations and views of patients and health care professionals	8	4 – LU	PU	September 2026	YES	x	x	x
D8.3.	Ethical guidelines for professionals on use of prediction tools	8	4 – LU	PU	September 2027	YES	x	x	x
D8.4.	Registration numbers of the clinical studies (WHO Registry criteria)	8	4 – LU	PU	March 2023	YES	x	x	x
D8.5.	Approved medical ethics study protocols	8	4 – LU	SEN	March 2023	NO			
D8.6.	Ethics institutional approvals	8	4 - LU	PU	March 2023	YES	x	x	
D9.1.	Website - internal part online	9	9 - concentris	PU	January, 2023	NO			
D9.2.	Dissemination and Communication plan	9	9 – concentris	PU	January 2023	YES	x	x	

D9.3.	Training Plan	9	9 – concentris	PU	March 2023	YES			
D9.4.	Go-online of the public project website	9	9 – concentris	PU	March 2023	YES	x	x	x
D9.5.	Marketing materials	9	9 – concentris	PU	June 2023	YES	x	x	x
D9.6.	Report on relevant outside initiatives and activities in the field and plan for collaboration	9	9 – concentris	PU	September 2023	YES	x	x	x
D9.7.	Report of first stakeholder dialogue event	9	9 – concentris		April 2024	NO			
D9.8.	Interim Training report	9	9 – concentris	PU	September 2025	YES	x	x	x
D9.9.	Report on second stakeholder dialogue event	9	9 – concentris		September 2025	NO			
D9.10.	Video describing project mission, goals, and achievements	9	9 - concentris	PU	September 2027	YES	x	x	x
D9.11.	Final Training report	9	9 – concentris	PU	September 2027	YES	x	x	x
D9.12.	Translation of ethics guideline	9	9 - concentris	PU	September 2027	YES	x	x	x

2.5 Peer-reviewed publications, posters, and conference talks

2.5.1 Principle of authorship

The FAMILY General Assembly considers that the project was successful in receiving funding, and that the project will only achieve its final goals if there is a broad collaboration between the different disciplines and institutions involved. Therefore, credit is due to all contributors to the programme. On this basis, all peer-reviewed publications resulting directly from the work of FAMILY (both journal and conference) will have shared authorship, i.e., at least one representative of all FAMILY partners involved directly in that work will be invited to be included as co-author (see authorship rules below).

The FAMILY Consortium aligns itself with following rules for authorship:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it has been critically for important intellectual content of the manuscript; AND
3. All authors must provide approval of the final version of a manuscript to be published; AND
4. The authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

2.5.2 Review and approval procedure

Pre-submission review and approval procedure

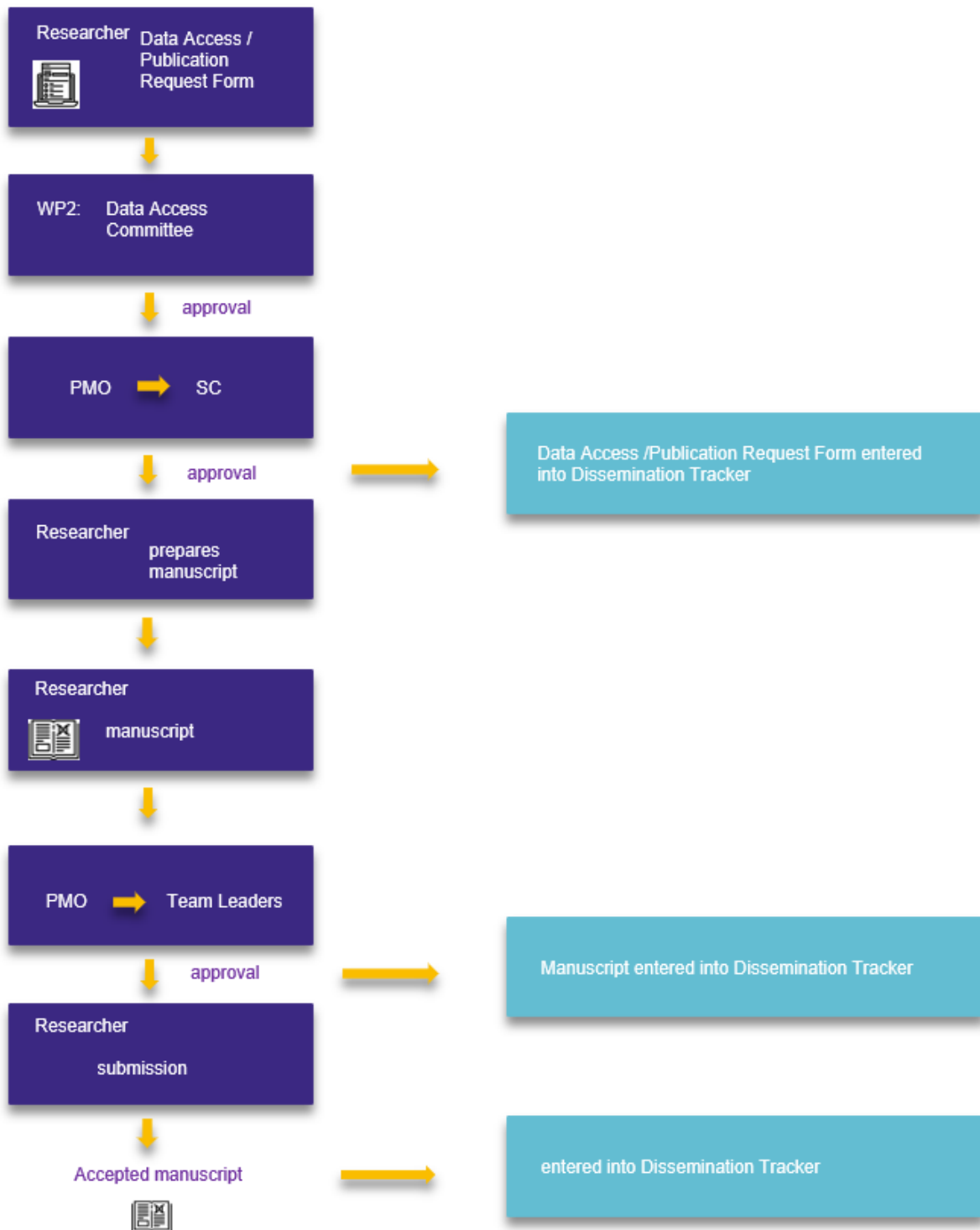
During the Project and for a period of 1 year after the end of the Project, the dissemination of own Results by one or several Parties including but not restricted to publications and presentations, shall be governed by the procedure of the Grant Agreement Art. 26.2 subject to the following provisions.

Prior notice of any planned publication shall be given to the other Parties at least 45 calendar days before planned submission of the manuscript to the respective journal. The main author has to follow the following procedure:

1. The main authors, first and last authors, fill out the 'data access' or 'publication' (in case no data is necessary for the manuscript) request form (which can be downloaded from KEYWAYS) and send it to the Data Access Committee (as part of WP2) for a first eligibility check. When approved, it will be sent to the PMO. The request form summarises on 1-2 pages the proposed research, including the involved WPs, proposed authors, background, hypotheses, analysed variables (if applicable), used methods, and key references.
2. The PMO will forward the data access/publication request form to the Steering Committee who will review it within **14 days**.
3. Once approved by the Steering Committee, the planned manuscript will be entered into the FAMILY dissemination tracker by the PMO.
4. Subsequently, authors analyse the data (if applicable), write the manuscript, and send a final draft, that is approved by all authors, to the PMO. *Publication plans may be adjusted to reflect progress of the study. Author list may be adjusted to reflect actual contributions of involved researchers.*
5. The PMO informs the team leaders (representatives of an WP, an institution, or a cohort within FAMILY), who have officially 30 days to provide feedback.

6. **Any objection** to the planned publication shall be made in accordance with the Grant Agreement in writing to the Coordinator and to the Party or Parties proposing the dissemination within **7 calendar** days after receipt of the notice. If no objection is made within the time limit stated above, the publication is permitted.

Figure 1



An objection is justified if:

- (a) the protection of the objecting Party's Results or Background would be adversely affected
- (b) the objecting Party's legitimate interests in relation to the Results or Background would be significantly harmed.

The objection must include a precise request for necessary modifications.

If an objection has been raised the involved Parties shall discuss how to overcome the justified grounds for the objection on a timely basis (for example by amendment to the planned publication and/or by protecting information before publication) and the objecting Party shall not unreasonably continue the opposition if appropriate measures are taken following the discussion.

The objecting Party can request a publication delay of not more than 90 calendar days from the time it raises such an objection. After 90 calendar days the publication is permitted. Partners continue to have the right to publish results derived from only their own data without having to inform FAMILY bodies/committees.

2.6 Conferences and events

2.6.1 Stakeholder dialogues organised by FAMILY

Type	Content	Dissemination Level	Time point (Month)	Responsible (Lead)
Event	First stakeholder dialogue event	SEN	18	TBD
Event	Second stakeholder dialogue event	SEN	36	TBD

2.6.2 Relevant other scientific conferences as a platform for showcasing FAMILY results

The following scientific conferences are known to date as potential platforms for FAMILY talks, posters and symposia:

Name of conference	Frequency	Internet Link
ECNP	Yearly	https://www.ecnp.eu
ESCAP	Biennial	https://www.escap2023.eu
WPA	Yearly	https://wcp-congress.com/wpa-congresses/
EPA	Yearly	https://epa-congress.org/
SIRS	Yearly	https://schizophreniaresearchsociety.org
ISBD	Yearly	https://www.isbd.org
AACAP	Yearly	https://www.aacap.org//
OHBM	Yearly	https://www.humanbrainmapping.org
SANS	Yearly	https://socialaffectiveneuro.org
IACAPAP World Congress	Biennial	https://iacapap.org
AEPEA	Biennial	https://www.aepea.org

3 Communication Tools and Activities

3.1 Project Identity and communication material

3.1.1 FAMILY communication toolkit

Logo for print and screen:



Chromatic version

available in **CMYK** (ai, pdf, psd, svg, tif)
and **RGB** (jpg, ai, pdf, png, svg)



Monochromatic version

available in ai, pdf, psd, svg, tif

Color Palette:



Dark blue
60 R 40 G 130 B



Yellow
250 R 190 G 0 B



Teal
100 R 190 G 210 B

Letterhead:

A template for a letterhead is available and can be downloaded from KEYWAYS.

PowerPoint template:

A PowerPoint template is available and can be downloaded from KEYWAYS.

3.1.2 Target release times

Type	Content	Dissemination Level	Timepoint (Month)	Responsible (Lead)
Communication material	Logotypes RGB, CMYK, grayscale	PU	01	concentris
Communication material	Letterhead	SEN	01	concentris
Communication material	PowerPoint template	SEN	01	concentris
Communication material	Roll-Up	PU	09	concentris

3.2 Project website

3.2.1 Link

The FAMILY website can be found at <https://family-project.eu> and via the QR-Code.



FAMILY Website QR-Code

3.2.2 Who is in charge

All partners are responsible for their own contents, for generating news items and informing the WP9 leader and PMO on any updates to be made in the dissemination tracker.

The WP9 leader in consultation with the coordinator authorizes any content updates requested by the partners or generated by WP9 and informs concentris accordingly.

concentris is responsible for implementing updates of the project website using the content management system word press.

The Impact Board monitors the website and notifies the WP9 leader and PMO in case of any change requests.

3.2.3 Quality management activities is in charge

concentris performs half-yearly, technical quality checks of the website. This includes (among other things) testing links and technical features of the website, updating plug-ins, checking whether there are any error messages coming up, correct display of all graphical elements (incl. cell phone and tablet views), GDPR notice, and download features.

The WP9 team supported by the **Impact Board** is responsible for content related quality management of the FAMILY website, e.g., correct citations, scientific content, and presentation of results.

3.2.4 Target release times

Type	Content	Dissemination Level	Time point (Month)	Responsible (Lead)
Website	Information about the project, for scientists, governments / regulators, commercial sector, patients and public	PU	6	concentris
Website	Updates (content)	PU	continuously	concentris
Website	Updates (technical QC)	PU	half-yearly	concentris

3.3 Social media

3.3.1 Overview social media accounts

At the time of issuing this document, FAMILY holds two social media accounts:

Twitter: @family_eu



FAMILY Twitter QR-Code

LinkedIn: FAMILY Project EU



FAMILY LinkedIn QR-Code

3.3.2 Who is in charge (“social media manager”)

The following people have access to the social media FAMILY accounts:

- Neeltje van Haren (Erasmus MC)
- Veronika Picmanova (concentris)
- Juliane Dittrich (concentris)

All FAMILY partners are encouraged to

- Inform the social media managers about any news that can be shared.
- Re-tweet FAMILY messages as much as possible.
- To put in contact their institutional social media managers in order to share their communication strategies with the FAMILY social media manager.

3.3.3 Social media audience

With messages shared via the FAMILY social media accounts, we aim to reach the following audiences:

Researchers, policymakers, the EU Commission, patients including their families, and the general public.

3.3.4 Hashtags and handles to be used

The following hashtags (#) and handles (@) shall be included in our tweets as much as possible and as appropriate for each individual message:

European Commission / general public / scientific platforms

#FAMILY_EU

#HorizonEU

@HorizonEU

@EU_HaDEA

@EUScienceInnov

@CORDIS_EU

@CAPP_ErasmusMC

@erasmusmcintl @radboudumc @LIRgGmbH @universitatelv @UniperugiaNews @Folkehelseinst
@Biotech_Spain @concentris_EU @ESCAPonline @EUFAMI @UZH_ch @CHUVLausanne @ucl
@KalischLab @concentris_EU

@SIRSGlobal @OHBM @ISBD4 @AACAP @AEPNyA

@PsiqInfantil @Euro_Psychiatry @MHESME @CNSR_cph @ResilienceRes

Thematic hashtags:

#mentalhealth #MentalHealth #mentalhealthofchildren #family #qualityoflife

#MentalHealthAwareness #WorldMentalHealthDay

#mentaldisorder #mentalillness #adolescentpsychiatry #childpsychiatry #psychology

Mentioning the FAMILY project on social media:

All FAMILY partners agree to tag the FAMILY project in their posts if the content is related to the FAMILY project by using

- the handle **@family_eu** (on Twitter) and
- the hashtag **#FAMILY_EU**

3.3.5 Connection between social media accounts, project website and other communication means of FAMILY

The Twitter and LinkedIn Icons that link to each FAMILY social media account are to be used as much as possible on all means of communication of FAMILY. A maximum of cross-referencing is wanted to improve search engine ranking.

3.3.6 FAMILY code of social media conduct

FAMILY partners agree on the following principles for social media conduct:

- Content owner decides what to post and share. No unauthorized sharing of pictures and information about others without prior consent.
- No information leakage to prevent loss of intellectual property.
- No spread of negative messages.
- No posting of EU classified information (e.g., confidential deliverables).
- No fake messages or spam, only accurate news is posted.
- Use of appropriate, inoffensive language.

3.3.7 Flexible time of postings

We strive to post news at the time they are taking place, for example:

- when there is a project breakthrough, such as a major publication
- when FAMILY is featured at a conference or event
- when FAMILY is presenting at an exhibition fair stand

Events and conferences:

The following timeline applies for posting about FAMILY events and conferences:

- Ideally, 6 weeks in advance: Informing about the event, deciding hashtags to be used and start sharing content alongside.
- Ideally, 1 month in advance: Creating web content and starting to promote it on FAMILY social media accounts using the event hashtag; preparing an event image to share on tweets.
- Before the event: Preparing a list of useful, relevant Twitter handles for participants to engage with before and during the event, such as event speakers and participants; creating a list of posts to tweet during the event.
- During the event: Live-tweeting with interesting pictures, tagging/mentioning people, promoting the relevant hashtag and asking participants to join the conversation; tweeting related content, scientific studies, published papers, web content, always including relevant hashtags.
- After the event: During the days following the event, monitoring impact, and keeping tweeting relevant content with your own hashtag (if any).

Whenever somebody is (planning to) taking part in events or conferences in relation to FAMILY, and he/she mentions the project, please inform the social media managers as mentioned in Section 3.3.2.

3.4 Videos/ TV spots / Broadcasting

FAMILY aims to produce a video about explaining new knowledge on the intergenerational transmission of risk for mental illness at the end of the project. Target group for this video are patients and the general public. The video will be published on YouTube and promoted via the project website and FAMILY social media channels.

Type	Content	Dissemination Level	Time point (Month)	Responsible (Lead)
Video	Video describing project mission, goals, and achievements	PU	60	concentris

FAMILY welcomes any further opportunities for broadcasting or promotion of results on TV. Whenever such an opportunity arises, the WP9 team will discuss details with relevant teams.

3.5 Press release / public media article

FAMILY will inform the general public about major news in a timely manner. Press releases will be distributed to announce FAMILY key publications and other important news (i.e., public events). These will be prepared by the project management office together with the press office of ERASMUS MC and authors.

4 Exploitation of Results

Key Exploitable Results of FAMILY have been defined at the proposal stage. This may change during the course of the project.

Exploitation and valorisation

FAMILY will pursue an open-access approach and will share methods, software, and scripts through GitHub and Open Science Framework to guarantee new knowledge generation during and beyond the duration of the project by researchers outside of the FAMILY consortium. Moreover, WP2 will develop a sustainable future for FAMILY's infrastructure by investigating different possible routes to keep it alive for new scientific initiatives from FAMILY partners and researchers worldwide. The publicly available tools, together with the FAMILY data infrastructure, will enable researchers to investigate new and relevant research questions and to further develop and test statistical methods within a family framework and triad modelling. It allows researchers to apply triad methods to other psychiatric phenotypes than mood and psychosis or to phenotypes outside of the mental health domain, e.g., asthma, immune function, and infections. A sustained availability of the triad data and statistical methods of genetic informative modelling, multimodal prediction and normative modelling is critical for realizing risk prediction in vulnerable families as a future public mental health strategy. Therefore, FAMILY will actively reach out to the scientific community to promote the use of the FAMILY platform.

5 Educational activity

WP9 will identify the early career researchers involved in FAMILY according to a pre-defined set of criteria. Members of this group will rate their level of expertise in different areas and identify training needs and education goals which are not met by their institutional programmes. Results of this will be summarised in a report. Attention will be paid to gender balance within this group and any less represented gender will receive specific support.

5.1 Portfolios and mentoring program

A mentoring program will be set up where early career researchers are linked to senior FAMILY researchers. Senior researchers involved in FAMILY can volunteer to act as mentor. Early career researchers will be offered the possibility to choose a mentor from another site within FAMILY. The mentors will meet with their mentees about four times a year, with at least one in-person meeting annually and additional Zoom/Skype or telephone meetings. They will also be available for further advice and discussion via email. Importantly, female researchers will be offered the option of choosing, as their mentor, a female senior academic from within FAMILY. One of the key aims of mentoring of the female early career researchers is to enhance the retention of female researchers in academic research.

FAMILY will require and support the early career researchers to develop personal portfolios (template available on KEYWAYS) specifying their training needs and wishes. These portfolios will be updated each year and will be discussed by each early career scientist with the supervisor and his/her mentor.

5.2 Training courses

A FAMILY-wide academic training plan will be set up. FAMILY will disseminate knowledge by training early career scientists through multidisciplinary academic training (methodologies, innovations, findings), provided within FAMILY's PARADISE (Protected Area for Real Advancement of Discussion and Scientific Exchange) Meetings. Additionally training in science dissemination and other relevant topics will be covered through involvement in the planning and implementation of dissemination activities.

5.3 Internships

Training can include internships at institutions that are part of other consortia funded in the same call. Internships can vary from brief visits of approx. one week to longer visits of 2-3 months. This format will enhance synergy between the different European initiatives to improve mental health in European citizens.

- **Activities funded:** Internship – up to 2-3 months of duration. Budget source to be decided individually for each case.

Criteria for internship selection:

- Early career scientist (any trainee who is not yet an independent investigator)
- Internship must support FAMILY's and the receiving partner's objectives, and must result in a report
- Covers subsistence only
- Main supervisor's and receiving institution's approval

Decision-making:

The applicant needs to send a request to the members of the Impact Board, cc to the Coordinator and the PMO. The decision for funds being spent on internships will be taken by the members of the Steering Committee based on advice from the Impact Board.

The request needs to address the criteria for selection as outlined above for the Impact Board members to be able to validly advice.

Voting rules and quorum: The Steering Committee shall not decide validly unless two-thirds (2/3) of its members are present or represented. Each member present or represented in the meeting shall have one vote. Decisions shall be taken by simple majority.

6 Open access

6.1 Definitions

“**Open access** (OA) refers to the practice of providing online access to scientific information that is free of charge to the end-user and reusable. 'Scientific' refers to all academic disciplines. In the context of research and innovation, 'scientific information' can mean: 1. peer-reviewed scientific research articles (published in scholarly journals) or 2. research data (data underlying publications, curated data and/or raw data).

Self-archiving / 'green' open access – the author, or a representative, archives (deposits) the published article or the final peer-reviewed manuscript in an online repository before, at the same time as, or after publication. Some publishers request that open access be granted only after an embargo period has elapsed.

Open access publishing / 'gold' open access - an article is immediately published in open access mode. In this model, the payment of publication costs is shifted away from subscribing readers. The most common business model is based on one-off payments by authors. These costs, often referred to as Article Processing Charges (APCs) are usually borne by the researcher's university or research institute or the agency funding the research. In other cases, the costs of open access publishing are covered by subsidies or other funding models.”

Source: <https://op.europa.eu/en/web/eu-law-and-publications/publication-detail/-/publication/9570017e-cd82-11eb-ac72-01aa75ed71a1>

6.2 Contractual requirements about open access publications

6.2.1 Open access to scientific publications

According to the Grant Agreement, ANNEX 5 (p.11),

“The beneficiaries must ensure open access to peer-reviewed scientific publications relating to their results. In particular, they must ensure that:

- at the latest at the time of publication, a machine-readable electronic copy of the published version or the final peer-reviewed manuscript accepted for publication, is deposited in a trusted repository for scientific publications
- immediate open access is provided to the deposited publication via the repository, under the latest available version of the Creative Commons Attribution International Public Licence (CC BY) or a license with equivalent rights; for monographs and other long-text formats, the licence may exclude commercial uses and derivative works (e.g. CC BY-NC, CC BY-ND) and
- information is given via the repository about any research output or any other tools and instruments needed to validate the conclusions of the scientific publication.

Beneficiaries (or authors) must retain sufficient intellectual property rights to comply with the open access requirements.

Metadata of deposited publications must be open under a Creative Commons Public Domain Dedication (CC 0) or equivalent, in line with the FAIR principles (in particular machine actionable) and provide information at least about the following: publication (author(s), title, date of publication, publication venue); Horizon Europe funding; grant project name, acronym and number; licensing terms; persistent identifiers for the publication, the authors involved in the action and, if possible, for

their organisations and the grant. Where applicable, the metadata must include persistent identifiers for any research output or any other tools and instruments needed to validate the conclusions of the publication.

Only publication fees in full open access venues for peer-reviewed scientific publications are eligible for reimbursement.”

6.2.2 Open access to research data

According to the Grant Agreement, ANNEX 5 (pp.11-12)

“The beneficiaries must manage the digital research data generated in the action (‘data’) responsibly, in line with the FAIR principles and by taking all of the following actions:

- establish a data management plan (‘DMP’) (and regularly update it)
- as soon as possible and within the deadlines set out in the DMP, ensure open access — via the repository — to the deposited data, under the latest available version of the Creative Commons Attribution International Public License (CC BY) or Creative Commons Public Domain Dedication (CC 0) or a licence with equivalent rights, following the principle ‘as open as possible as closed as necessary’, unless providing open access would in particular:
 - be against the beneficiary’s legitimate interests, including regarding commercial exploitation, or
 - be contrary to any other constraints, in particular the EU competitive interests or the beneficiary’s obligations under this Agreement; if open access is not provided (to some or all data), this must be justified in the DMP.
- provide information via the repository about any research output or any other tools and instruments needed to re-use or validate the data.

Metadata of deposited data must be open under a Creative Commons Public Domain Dedication (CC 0) or equivalent (to the extent legitimate interests or constraints are safeguarded), in line with the FAIR principles (in particular machine-actionable) and provide information at least about the following: datasets (description, date of deposit, author(s), venue, and embargo); Horizon Europe funding; grant project name, acronym and number; licensing terms; persistent identifiers for the dataset, the authors involved in the action, and, if possible, for their organisations and the grant. Where applicable, the metadata must include persistent identifiers for related publications and other research outputs.”

7 Sustainability measures after the end of the project

The FAMILY project receives funding and has a run-time of 5 years. Sustainability measures will be discussed at a later point, e.g., two years before the end by the GA.

Topics to be discussed in the frame of sustainability are:

- What will happen to the website?
- Exploitation of results after the project end
- Continued funding
- Sustainability of the research infrastructure

8 Monitoring of Dissemination and Communication activities

8.1 Roles and responsibilities

The Coordinator has the ultimate responsibility for tasks defined in the Grant Agreement and represents the Consortium vis-à-vis the Commission. She is responsible for submitting deliverables and reports to the Commission (Grant Agreement, Art. 19 and 20). Publication of deliverables must therefore be signed off by the coordinator prior to submission.

The Project Management Office supports the coordinator with monitoring of project progress and reporting (WP1). Any dissemination, communication or exploitation activity should be notified to the PMO.

The Work Package 9 (Dissemination, communication, training, and guideline development) team directs the work programme of WP9 and is responsible for the implementation of tasks, milestones and deliverables as described in WP9. The WP9 leader should be informed about any dissemination, communication, or exploitation activity.

All partners are responsible for timely dissemination and communication of results in line with the provisions of the Grant Agreement (Art. 29), Consortium Agreement (Art. 8.4 and 8.5) and decisions taken by the General Assembly or the Steering Committee. All partners have experienced legal officers at their institution who can assist in IPR aspects. Individual partners will make sure that their discoveries with commercial potential are appropriately transferred and fully exploited – as peer-reviewed publications, new software, or specific patents.

The Impact Board is responsible for designing a structured communication plan for dissemination and the exploitation of results and will monitor the steps being taken. Together with the Project Management Office it will oversee the comprehensive internal and external dissemination of project results and knowledge.

The **Impact Board** will interview FAMILY partners at the annual GA meetings concerning their IPR and dissemination plans for the next year, and whether intellectual property will have to be protected. The board reports to the Steering Committee. In case intellectual property has to be protected, the Impact Board will provide advice regarding the responsibility for filing and protecting IPRs.

8.2 Performance evaluation

8.2.1 Process of performance evaluation

WP9 and the Steering Committee created this Dissemination and Communication Plan and have defined the key messages of the project for each target and stakeholder group. The success and impact will be evaluated each 18 months and, based on the results, messages and activities will be adjusted.

8.2.2 Key performance indicators

Quantitative:

Scientific performance

- Number of scientific articles published
- Number of talks and posters at conferences

Social media

The following measurements will be reported monthly:

- Number of followers
- Number of impressions

Training

- Number of early career scientists participating in “PARADISE Meetings”

Reaching the public

- Number of articles published in general press
- Number of website visits
- Number of event attendees for events aimed at general public

Type	Content	Dissemination level	Time point (Month)	Responsible (Lead)
Report	Summary report on the success of the chosen communication channels	PU	60	concentris

8.2.3 Target release times

Type	Content	Dissemination Level	Time point (Month)	Responsible (Lead)
Performance evaluation	Performance evaluation of website, social media and other dissemination and communication activities	SEN	18, 36, 48	concentris

9 Tracking and reporting of Dissemination and Communication activities

FAMILY has to submit periodic reports to the European Commission at the following time points:

- RP1: from month 1 to month 18
- RP2: from month 19 to month 36
- RP3: from month 37 to month 48
- RP4: from month 49 to month 60

To collect and prepare content for reporting dissemination and communication activities, the FAMILY dissemination tracker has been developed and will be made available for download on KEYWAYS.

The tracker record plans for journal publications and presentations at conferences, other dissemination activities geared towards the relevant stakeholders, e.g., press releases, interviews and consultation meetings with agencies, and exploitation of generated IP, e.g., patents.

Process for dissemination and communication tracking:

To keep the process as easy as possible, the Steering Committee agreed on the following process:

Bottom-up approach (permanent): Whenever somebody disseminates anything about FAMILY, also if he/she only mentions the project, an **email shall be sent to the Impact Board and WP9 leader** (veronika.picmanova@concentris.de). In that email, the date, event and place, the title and author of the piece of dissemination shall be mentioned. If possible, the slides, the poster or a link shall be included, so that it can be uploaded to KEYWAYS.

NB: For peer-reviewed publications additional rules apply – see Section 2.5.

10 Standard acknowledgement

According to Art. 17 of the Grant Agreement any dissemination of results (in any form, including electronic) must:

(a) display the EU emblem and

(b) include the following text:

“Funded by the European Union, the Swiss State Secretariat for Education, Research and Innovation (SERI) and the UK Research and Innovation (UKRI) under the UK government’s Horizon Europe funding guarantee. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union, or the European Research Executive Agency (REA), the SERI or the UK Research and Innovation (UKRI). Neither the European Union nor the granting authorities can be held responsible for them.”

[Link to EU emblem](#) and guidelines for use.

11 Acknowledgement and Disclaimer for this report

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