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EXECUTIVE SUMMARY

The concept of attitude is probably the most distinctive and indispensable in contemporary social psychology². It is also, arguably, a disposition that influences behaviour rather than overt behaviour itself. In a systematic study on attitudes to race in the US in the 1930s, R T LaPiere recorded that, by 250 to one, restaurants across the USA admitted and served a Chinese couple who presented themselves as customers. In response to a written survey administered some six months after the Chinese couple had been served, 127 to one restaurants questioned said they would decline or make conditions on accepting Chinese customers.³

It is research that has fuelled a debate on whether there are inherent contradictions between attitude and behaviour or, rather, contradictions between one set of behaviours and another or between intentions and behaviour. Which ever is the case, the answer is critically important for public education and/or corporate communication management.

In 2007, PIELLE Consulting, faced with a community relations and public education issue for a Mental Healthcare provider client, undertook research to identify public attitudes to and private concerns about the location of care facilities for those with severe learning difficulties and related mental health issues⁴. The research dramatically illustrates the contradictions of the LaPiere research and the contrast between public attitudes and behaviour based on personal concerns. The research also sets out:

- *a clear set of preferences for media of communication for related information,*
- *the lack of ease of access to objective and relevant information on the subject, and*
- *a clear indication for public education needs and opportunities for the public sector, charitable and non governmental organisations with a mandate for advocacy and care policy for those with severe learning difficulties and related mental illness.*

It also provides a clear demonstration of the value of research bridging the conceptual and the practical to create the understanding between organisations and audiences necessary for effective two way communication in sustainable development programmes.

² Allport – Harvard 1935

³ R T LaPiere and others

⁴ PIELLE Consulting Group 2007

Background

In the UK, residential care for the elderly and those with challenging behaviour associated with learning disabilities, personality disorders and autistic spectrum disorders is provided, in the main, by the private and charitable organisations funded by central and local government health care and welfare programmes. Care Principles is one of the largest of these private sector organisations with over 380 beds and employing more than 1500 staff, providing assessment, treatment, care and rehabilitation for people with a range of challenging behaviour and complex needs.

On Friday 13 July 2007, the company learned that a local community demonstration was to be staged outside an established residential care home that it had acquired, to protest against it being refurbished as a facility for the care of vulnerable adults with severe learning disabilities and related mental disorders. Care Principles had previously experienced little or no opposition when establishing facilities and had positive community relationships. For the first time local residents had demonstrated their opposition to one of their residential care facilities and to the vulnerable adults who would be cared for there, becoming part of the community.

In conjunction with PIELLE Consulting, the corporate and local operational management team responded immediately by establishing a corporate and community communication plan with three clear objectives.

- a. Minimise the impact of the planned protest on Care Principles' incoming Middlestead House residents and its reputation
- b. Set the agenda for communication, rather than reacting to protestors
- c. Create a platform for proactive recovery.

Our priority was to secure continued business operation for this care home, so that its future vulnerable residents could move into the refurbished facility safely in September 2007.

Immediate action was taken to communicate with the two tiers of local government and the local Member of Parliament, the local and regional print and broadcast media and identifiable stakeholders, neighbours and community leaders – health care professionals, business leaders and owners.

As a core part of the communication strategy, a research programme was devised, developed and implemented to cover the four villages (US towns) that constituted the Care Home 'community'. The incident communication team wanted to establish:

- the basis of the hostility to the residential care facility
- the extent of the hostility and its demographic
- the general attitude in the community to care for people with severe learning difficulties and related mental health issues – with a demographic perspective.
- the level of knowledge among the community on the issues of care for people with severe learning difficulties - with a demographic perspective
- the preferred media for communication on local issues

'Public Attitudes – Private Concerns'⁴ was the research study conducted by telephone over a two week period using a random sample of 300 plus covering a community of some 8-10,000 residents. Research findings informed the immediate communication plans and activities and provided the basis for future community relations programmes and the basis for Care Principles' engagement with governmental and non-governmental policy makers, support and advocacy groups.

⁴ PIELLE Consulting 2007

Planning and action

Any incident requires immediate response to prevent escalation. Our first priority was to minimise the impact of action around the 17 July 2007 protest.

In the first three days, in conjunction with client operating management, the PIELLE team:

- a. Prepared messaging: “Middlestead House is not a threat to the community, instead it is a facility of which Breaston should be proud”
- b. Prepared response statement and briefing document about the house, providing the facts to counteract rumour and speculation; provide to local print media
- c. Researched local MP and parish councillors’ details; prepared initial phone brief for client calls to each; prepared letters to be issued with briefing document.
- d. Began preparing question and answer document, further messaging, stakeholder scheduling and forward communication plan ... activity continued over the weekend
- e. Provided response statement and briefing to regional print media and several local radio stations
- f. Provided media guidance and framework response script for parish councillors
- g. Briefed local police, and requested assistance in engaging with the core group of objectors
- h. Arranged for client to remain off-site and, with police assistance, to meet with a small group of reasonable protesters face-to-face
- i. Briefed on site client team and building site workers about the protest, security measures, responses and behaviour

After defusing the initial impact, a second phase of communication was initiated to put the business in recovery mode

Building network of supportive allies, providing them with information to deploy as credible, independent, third party sources of information. That network included:

- i. Local specialist charities and branches of national charities involved in the care sector
- ii. Local businesses and establishments where the community gathers
- iii. Respected community figures – from GPs to church leaders
- iv. MPs, Parish, District and County Councillors

Planning and action/cont

Recognising that Middlestead House' had an existing place in the community as a residential care home for the elderly, a 'house' blog was created to provide an on line vehicle and reference point for communicating the change to the house and as the means for further engagement in two-way dialogue with members of the community and the public at large in the region and beyond.

A planned and sustained communication programme was implemented ahead of a public meeting, scheduled for 10 August 2007 by the core objectors (announced at their 17 July protest):

A briefing document was devised and provided to all community leaders, based on specific queries from the community, research findings and developments

Direct communication was established with local residents, through an open letter (research identified preferred medium) distributed inside the local weekly newsletter two-three days prior to the 10 August 2007 'public meeting'.

Contingency planning was the third and final phase of communication that was developed and implemented

A generic blueprint plan for community communication including supporting information and resources was created for client management use

We advised the client to undertake proactive communication against an agreed template plan for each of its four new facilities due to open within four months, to avoid 'shock wave impact'

We also translated selected data from the research into a generic report of relevance for all Care Principles sites: "Public Attitudes and Personal Concerns".

Measurable criteria as to the effectiveness of communication throughout the campaign included:

- Shift in initial media and community hostility to informed support
- De-escalation of issues and protests from the 17 July 2008 protest meeting

In relation to these specific criteria, immediate outcomes include:

- Local print media did not publish any story prior to or after the initial protest meeting that attracted 100 people to the gates of Middlestead House
- Neutral coverage on the protest meeting in the major regional print media on 18 July 2007, including Care Principles' messages
- No national media coverage (with emotive opposition of this nature, local media often feed nationals)
- Police supportive, cooperative and participative in message delivery
- Supportive (direct and published) letters from multiple members of the community
- Positive pre-protest meetings with local school head teachers, councillors and other community leaders

Measurable criteria as to the effectiveness of communication

In the medium term, outcomes included:

- Improved response to recruitment drive among local health care professionals
- 30 people attended a ‘town meeting’ called by residual protestors for 10 August 2007, including observers and those who supported Middlestead House
- Our community research, that was part of the crisis communication programme, created a platform to actively contribute to public policy in respect of people with learning disabilities and related mental health issues, providing a strong ‘recovery plan’ vehicle.
- In mid – September the first new and vulnerable residents moved into Middlestead House without any protest or disruption.

Long term outcomes

The strength of information revealed in “Public Attitudes and Personal Concerns” – our generic research report, established a proactive public affairs opportunity to:

- i. Inform public policy and engage civil society⁵ by identifying communication issues and opportunities when caring for people with learning disabilities and related mental health issues
- ii. Input to public debate on learning disability and mental health

Specifically that:

- general (attitudes) statements of approval or support for issues can be contradicted by actions when the issue becomes specific and personal
- there is a great desire for information that is not being met by those with a positive advocacy role by those representing or shaping public policy on people with severe learning difficulties and related mental disorders
- there are very clear hierarchies for media of communication on local and community issues for stakeholders and local communities that relates to personalised information

The authority and findings of the research enables the client to enter into a dialogue with the British Institute of Learning Disabilities to agree proactive forward strategies for community education including:

- i. Publication of “Public Attitudes and Personal Concerns” on the BILD website
- ii. BILD to act as independent third party generic source for enquiries that arise in the future
- iii. Potential to develop public education materials.

⁵ Supplementary information item 13: Distribution categories for “Public Attitudes and Personal Concerns”

Appendix (i) MIDDLESTEAD HOUSE RESEARCH results

1. APPROACH

Telephone interviews were conducted with 300 adults to establish: -

1. Attitudes to:
 - a. Learning disabilities and related mental health issues; and
 - b. Residential facilities for the care of people with learning disabilities and related mental health issues.
2. People's views of the level of information that exists on the care of people with learning disabilities and related mental illness.
3. Information and/or communication needs on community matters and preferred methods of communication – direct; internet; local; paper; radio; television; or local meetings.

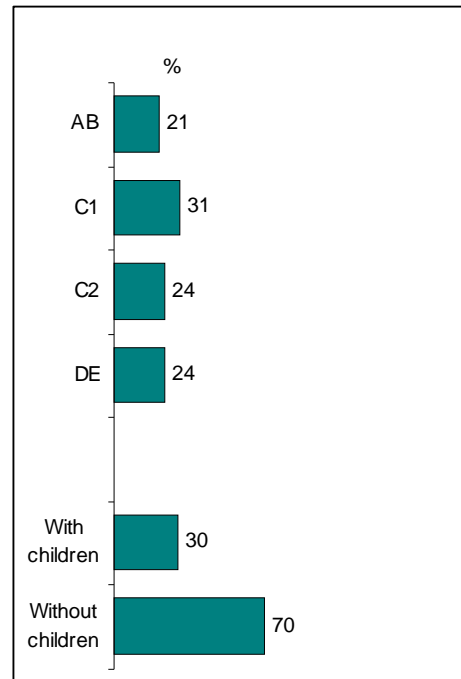
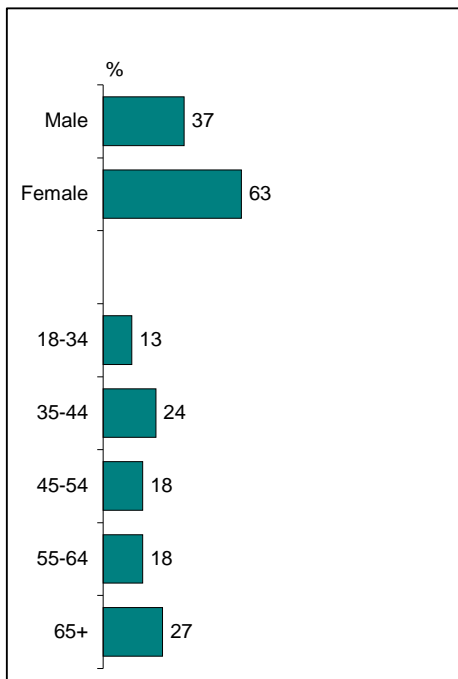
Research was conducted between 2 and 6 August 2007 using Computer Assisted Telephone Interviewing (CATI).

A random sample of residents was drawn.

A broad spread of age ranges was surveyed, with more than a quarter aged over 65. Three in ten of those interviewed have children under 16 and their attitudes were often different from others.

Chart 1.1: Respondents profile

(Base: All)



2. KEY FINDINGS

ATTITUDES TOWARDS FACILITIES FOR PEOPLE WITH LEARNING DISABILITIES

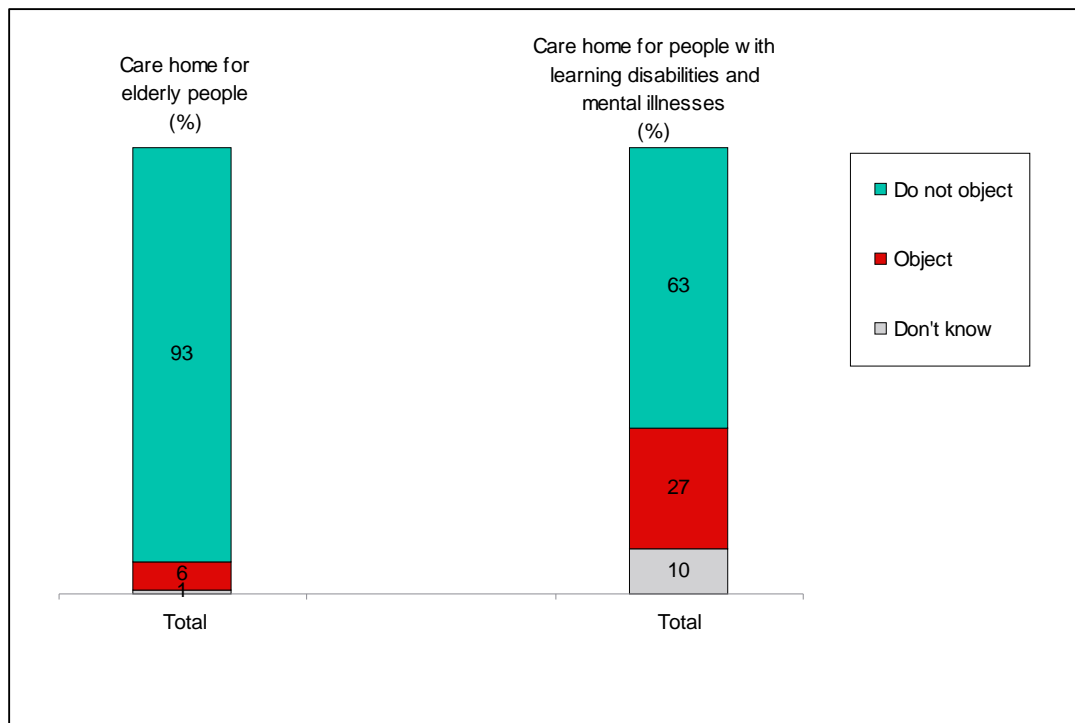
People surveyed were asked their opinion about new developments in a number of business sectors. Respondents indicated that they would be most likely to object to. The construction of a nightclub – 78% would object to its construction. A supermarket is also a concern to 58% of the respondents, followed by a mosque (with 41% objecting).

Fewer people would object to the opening of a garden centre (17%), a leisure centre (21%) or a golf course and country club (22%).

Care homes for the elderly would be well received. The majority of the respondents (93%) would not object if it was built near them. However, a care home for people with disabilities and related mental illnesses would pose a problem to almost three in ten respondents (27%).

Chart 2.1: Objection to care homes

(Base: All)

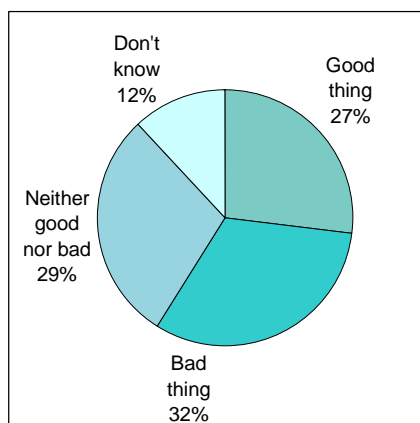


The reasons why people would object to these facilities being built are very different from their objections to a residential care name for people with learning disabilities.

ATTITUDES TOWARDS FACILITIES FOR PEOPLE WITH LEARNING DISABILITIES

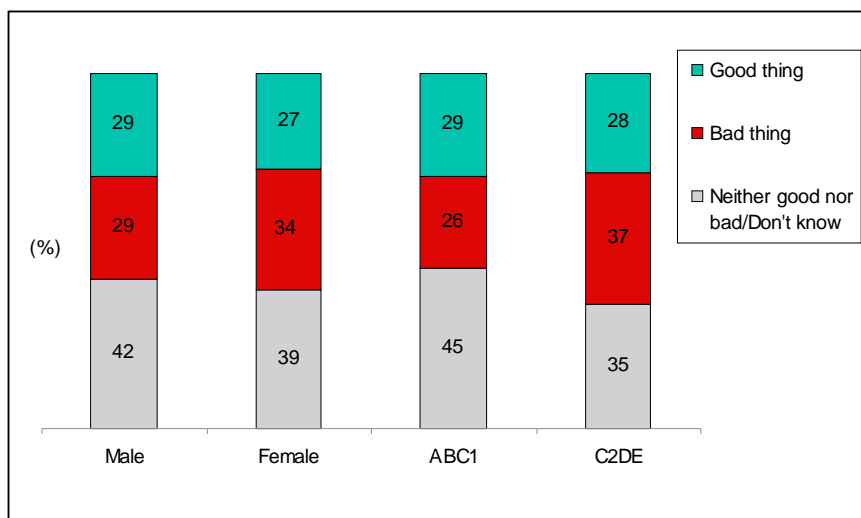
Many respondents are unsure whether having a care home for people with learning disabilities and related mental illnesses is a good or bad thing – 41% could not express their views or were undecided. The opinions of those who express them were fairly evenly split between those who agree and those who disagree about the matter – 32% think it is a bad thing and 27% think it is a good thing.

Chart 2.2: Objection to care home
(Base: All)



Women tend to be a little more negative than men towards the concept of a care home for people with learning disabilities being established in their community – 34% and 29% respectively thinking it is a bad thing. Lower social grades are more likely to think it is a bad thing for the area – 37% of C2DEs are opposed, compared to 26% of ABC1s.

Chart 2.3: Opinions about opening a care home for people with learning disabilities and related illnesses (1)
(Base: All)



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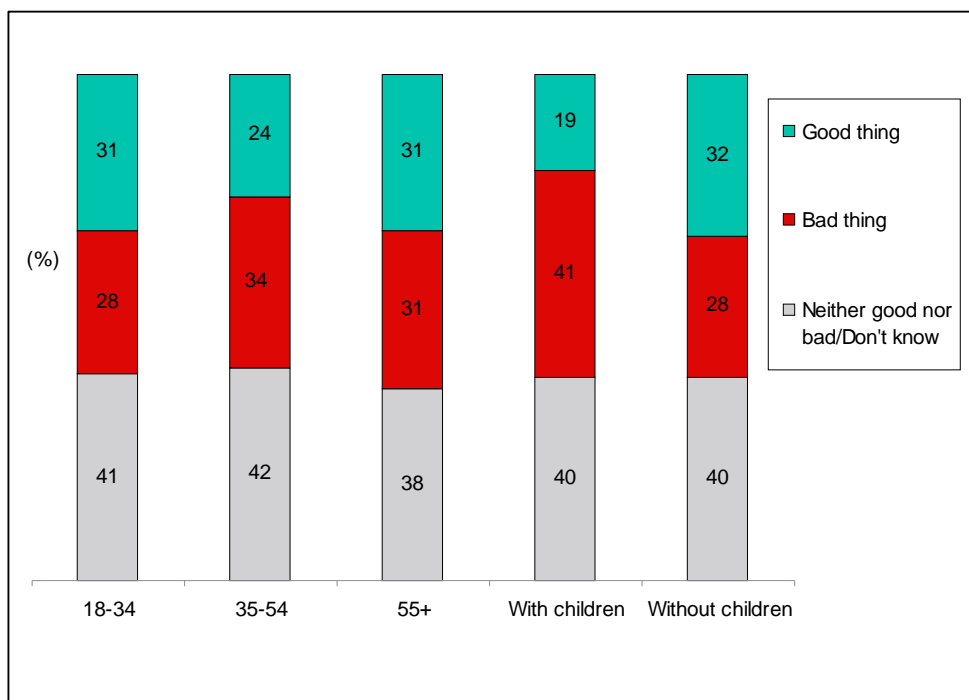
ATTITUDES TOWARDS FACILITIES FOR PEOPLE WITH LEARNING DISABILITIES

Middle-aged people are more likely to object to the conversion of a care home for people with learning disabilities and related illnesses – 34% of people in the age range of 35 to 54 think it is a bad thing, followed by those who are 55 years or older (31%). Under-35s tend to be less negative – 28% think it is a bad thing.

Crucially, people with children tend to oppose the facility more than those without children do. – 41% and 28%, respectively.

Chart 2.4: Opinions about opening a care home for people with learning disabilities and related illnesses (2)

(Base: All)



Respondents indicated that open and transparent information about a proposed care home would make them more comfortable with having such a facility in the community.

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ATTITUDES TOWARDS THE PROVISION OF INFORMATION

A statement was given to respondents so that they could fairly give their views about having more information about learning disabilities and related mental disorders:-

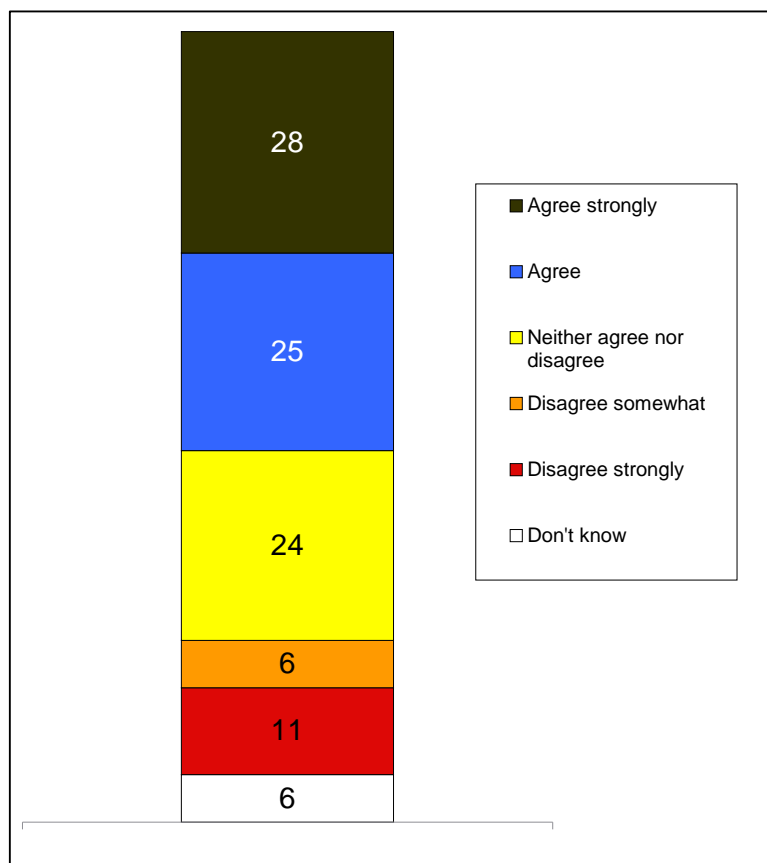
- *'I would welcome having better information about learning disabilities and related mental disorders.'*

Respondents were asked to use a scale of 1 to 10 where 1 meant they disagree strongly and 10 meant they agree strongly.

More than half of the respondents would welcome having better information about learning disabilities and related mental disorders.

Chart 2.5: Would welcome having better information about learning disabilities and related mental disorders

(Base: All)



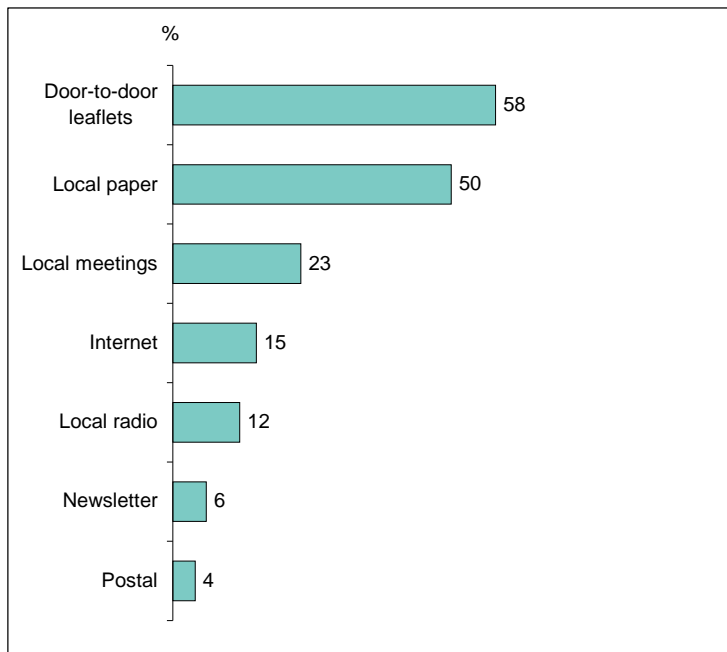
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ATTITUDES TOWARDS THE PROVISION OF INFORMATION

Most respondents say door-to-door leaflets and local newspaper are their preferred ways of receiving information and keeping up to date on issues regarding the local community. Other sources of information mentioned are local meetings, followed by the Internet and local radio.

Newsletters and the post are the least preferred ways of receiving local information or community news.

Chart 2.6: Preferred sources of information regarding local community issues
(Base: All)



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ATTITUDES TOWARDS PEOPLE WITH DISABILITIES

To fairly capture people’s views regarding their attitudes towards disabilities a number of assertions were presented to respondents for their comment and reaction:-

- We need laws that make discrimination based on race, disability or gender illegal.
- Society in Britain discriminates unfairly against people with learning disabilities and related mental disorders.
- Issues of learning disabilities and mental health should be taught in schools.
- People with learning disabilities and related mental illness pose a threat to society.

Respondents were asked to use a scale of 1 to 10, where 1 meant they disagreed strongly and 10 meant they agreed strongly with the statements.

More than half of the respondents think discrimination against people based on race, disability or gender should be illegal (55%).

Interestingly, 17% of all respondents and 25% of those over 55 years old disagree, suggesting they favour discrimination on these grounds. Respondents to this question correlate more strongly with age than with people’s views of whether the opening of a care home in their neighbourhood is a good thing.

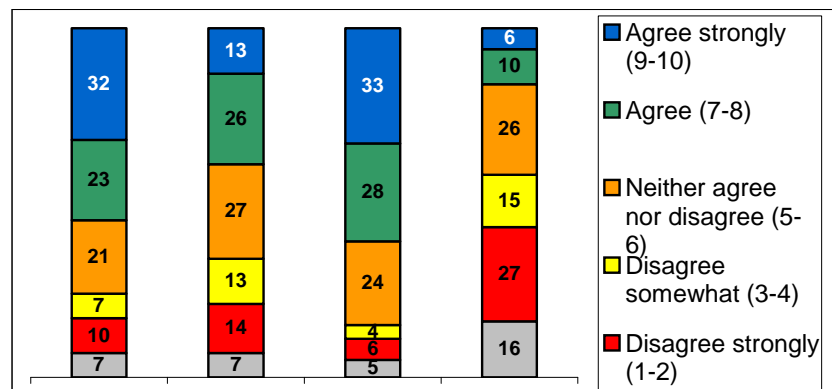
Respondents tend to agree that society in Britain discriminates unfairly against people with learning disabilities and related mental disorders (39%). Only one in four disagrees with this assertion (27%), though many were unsure or gave a neutral response.

Most people believe that issues of learning disabilities and mental health should be taught in schools (61%).

42% disagree that people with learning disabilities and related mental illness pose a threat to society. Only 16% agree that they do, but large numbers give neutral responses (scoring 5 or 6 on a 1-10 scale or responding ‘don’t know’)

Chart 2.7: Attitudes towards disabilities

(Base: All)



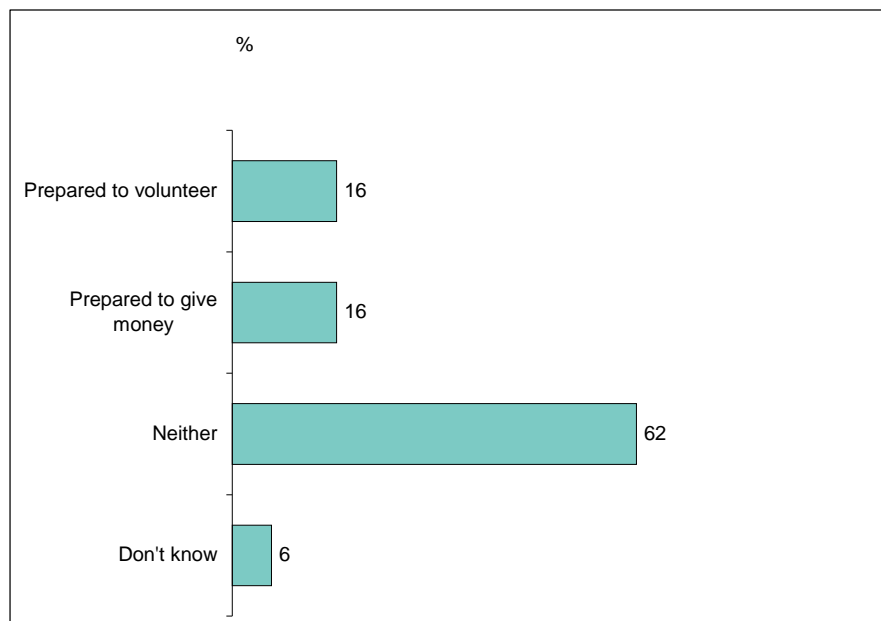
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ATTITUDES TOWARDS ACTIVE SUPPORT FOR RELATED CHARITIES AND VOLUNTARY ORGANISATIONS

Only three in ten respondents claimed to have ever subscribed or volunteered to help or support a charity or organisation devoted to the care of people with learning disabilities and related mental disorders.

However, three in ten of the (70 per cent) remainder said they would be prepared to either volunteer or give money to such a charity.

Chart 2.8: Behaviour towards volunteering
(Base: Those who have never subscribed/volunteered)



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