Understanding and Addressing Anti-Social Behaviour
A Rapid Evidence Review
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Foreword

This publication from the Health Promotion Research Centre in NUI Galway is a welcome contribution to developing our understanding of complex, challenging issues such as anti-social behaviour.

As the report highlights, interpretations of this term can differ depending on the contexts. Discussion in this area can flow between undesirable but relatively unthreatening behaviour into more serious criminal acts which cause significant fear and harm and potentially engage most of our criminal justice structures as well as a broader range of State services.

The negative impact of anti-social behaviour can be significant for local communities, and it is a recurring theme in public discourse. As outlined by the Commission on the Future of Policing (CoFPI), effective policing and community safety require a coordinated and planned response from all the relevant state agencies, and real partnership with communities.

Arising from the current Programme for Government, a Forum on Anti-Social Behaviour was established in 2020 chaired by Minister of State James Browne, T.D., and including representatives from the Department, An Garda Síochána, the Probation Service, Le Cheile Mentoring and Youth Justice Support Services, Solas Project, Community Action Network and the Dublin Community Safety Pilot. The forum provides a focus for national level discussion on how responses can be improved, whether in terms of policing, legislation or necessary community supports and public services. Therefore, this publication is a welcome and timely addition to our knowledge base in this complex policy area.

Arising from the CoFPI report, the Department developed a new Community Safety Policy which will be supported in legislation by the provisions of the forthcoming Policing, Security and Community Safety Bill. The Bill recognises that community safety is not just a policing issue and seeks to enshrine a whole-of-Government approach to empower, listen, and respond effectively to the real concerns of local communities. To support that kind of listening in communities, new Local Community Safety Partnerships are planned to bring together all services and the community at local authority level to serve as a forum for discussion and decisions on community priorities and three such partnerships are currently being piloted and evaluated.
The Department is committed to developing the best available research and evidence to underpin our responses to crime and anti-social behaviour. A key element is the first Criminal Justice Sectoral Strategy (2022-2024), which provides a framework for developing a more joined up, data-driven, criminal justice system, supported by a culture of innovation and evidence-based decision making.

As referenced in this report, much of the discourse on anti-social behaviour focuses on young people and youth programmes and interventions. The primary objective of the national Youth Justice Strategy 2021-2027 is to promote positive behavioural change among young people who may engage in offending behaviours. The development of more effective interventions, based on the best available evidence, is fundamental to implementation of this Strategy. This work is strongly supported by a research partnership between the Department and the School of Law at the University of Limerick, known as the REPPP project, which has already produced a number of important reports feeding into policy development and implementation including the groundbreaking Greentown research into the involvement of children in criminal networks in Ireland. The REPPP team in UL is also leading an important Action Research Project to provide continuing evidence-based support for the operation of Youth Diversion Projects funded by the Department.

The availability of high-quality timely research is essential to give an evidential grounding to the development of new policies and initiatives, so this new report from NUIG will enhance our understanding of the challenges and opportunities which we need to address, as well as pointing to areas where we need to delve further to fill gaps in the knowledge base. The Department is very grateful to the NUIG research team including Dr Elena Vaughan, Mr. Eoin Dennehy, Professor Saoirse Nic Gabhainn and Professor Colette Kelly for their careful and professional analysis. This work provides the Department with an important benchmark for our further research agenda and the continuing development of effective remedies to reduce offending behaviour that has such a negative effect on everyone concerned, particularly disadvantaged communities.

Oonagh McPhillips
Secretary General, Department of Justice
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# Contents

## Executive summary .................................................................................................................. 7
- Introduction ................................................................................................................................. 7
- Methods ........................................................................................................................................ 7
- Results .......................................................................................................................................... 8

## 1. Introduction .......................................................................................................................... 11
- 1.1 Background and context ........................................................................................................ 11
- 1.2 Aims and objectives .............................................................................................................. 13
- 1.3 Research questions ............................................................................................................... 14
- 1.4 Overview of the report ......................................................................................................... 14

## 2. Methods .............................................................................................................................. 15
- 2.1 Introduction ........................................................................................................................... 15
- 2.2 Sources of information ......................................................................................................... 15
- 2.3 Types of evidence and inclusion/exclusion criteria .............................................................. 16
- 2.4 Systematic concept searches ............................................................................................... 16
- 2.5 Abstract screening ................................................................................................................ 18
- 2.6 Data extraction and Critical Appraisal Skills Programme (CASP) quality appraisal ...... 20
- 2.7 Concept mapping ................................................................................................................. 21

## 3. Results .................................................................................................................................. 23
- 3.1 Introduction ........................................................................................................................... 23
- 3.2 Definitions and understandings of Anti-Social Behaviour .................................................. 23
- 3.3 Perceptions of Anti-Social Behaviour .................................................................................. 29
- 3.4 The impacts and effects of Anti-Social Behaviour ............................................................... 33
- 3.5 Underlying factors for Anti-Social Behaviour .................................................................... 34
- 3.6 Approaches to addressing Anti-Social Behaviour ............................................................... 43

## 4. Conclusion ............................................................................................................................. 50
- 4.1 Overall summary of findings ............................................................................................... 50
- 4.2 Limitations ............................................................................................................................ 52
- 4.3 Gaps in knowledge ............................................................................................................... 52

## References ................................................................................................................................ 55

## Appendix .................................................................................................................................. 66
- Appendix A: Sample systematic concept search string (Proquest) ........................................ 66
Executive summary

Introduction

Anti-social behaviour (ASB) is a broad term often used to describe a range of actions and behaviours that violate social norms in specific contexts. Anti-social behaviours are often associated with youth, however this is not an issue that is singularly confined to young people. Anti-social behaviours can have a negative impact on individuals, families and communities, affect mental and physical and well-being and are associated with considerable social and fiscal costs to society.

The purpose of this review was to gather and synthesise all high quality peer-reviewed international and national literature on anti-social behaviour, in order to help inform policy development in relation to anti-social behaviour in Ireland.

Methods

A rapid review approach was used for this evidence review. Rapid review methods involve systematic evidence syntheses techniques and a quick turn-around, in order to help inform decision-making around best-practices in a specific policy context (Tricco et al., 2017). Systematic concept searches, using relevant key terms were run in three databases to search for peer-reviewed literature. Searches were also conducted for pertinent grey literature. A total of 3,085 studies were identified. A Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flow diagram was used to keep track of records. Independent screening against inclusion/exclusion criteria was conducted by two reviewers. The Critical Skills Appraisal Programme (CASP) was applied to assess quality and to act as an additional screening process. Sixty-five pieces of peer-reviewed literature were included in the final analysis for narrative review.
Results

Review of the gathered evidence highlighted the following findings:

Definitions of anti-social behaviour

Definitions of ASB vary widely across the literature and other sources and there is no commonly agreed definitive definition. Legal and policy definitions in Ireland tend to align with legal and policy definitions in the UK, however even within Ireland, there are varying definitions used across different policy and legislative texts, both nationally and regionally. Similar ambiguity and variance exists cross the gathered peer-reviewed literature, with the term anti-social behaviour operationalised differentially depending on discipline, geographic region and context. This points to the subjectivity of the term: for some ASB is considered in terms of common sense understandings of acceptable and unacceptable; other definitions include oppositional type behaviours; while others conflate ASB with more serious criminal behaviours.

Perceptions of anti-social behaviour

Studies on perceptions of ASB in Ireland are sparse. The evidence that does exist suggests that the majority of people in Ireland do not view it as a very big issue, however some people feel greatly affected by it. Studies outside of Ireland show that ASB is typically a problem associated with young people, and young people are more likely to be perceived as perpetrators rather than victims. There is some evidence to suggest that people living in disadvantaged areas, those that are socially isolated or marginalised, and people with poorer health are more likely to perceive ASB as a problem.

The impacts and effects of anti-social behavior

The evidence base on the effects and impacts of ASB on communities, the wider public and on society is very poorly developed. The little evidence that exists suggests that anti-social behaviour may have the effect of excluding...
members of the community from spaces in their neighbourhoods and may impact on quality of life.

**Underlying factors for anti-social behaviour**

There is strong evidence to suggest that a confluence of factors at the individual, family, peer, community (neighbourhood and school) and wider societal level are implicated in the manifestation of anti-social behaviours. Promotive factors at the individual level include personality traits, genetic and epigenetic factors, although these are considered indicative of a pre-disposition rather than being determinative. Promotive factors at the family level include exposure to violence, family conflict and the absence of positive parenting practices. Neighbourhood level promotive factors include neighbourhood deprivation, neighbourhood disorder and high levels of neighbourhood crime. Low educational attainment, an unstable school environment and the perception of teachers being unfair were identified as salient factors at the school level. At the broader societal and structural levels, factors that were promotive of youth ASB included social deprivation and poverty, lack of employment opportunities, and in certain contexts/jurisdictions, contact with the justice system.

**Approaches to addressing anti-social behaviour**

Complex family and community based interventions were identified as being effective in addressing and preventing anti-social behaviour. The majority of the approaches highlighted as effective were based on social-ecological theoretical frameworks, such as functional family therapy (FFT), multi-systemic therapy (MST) and other similar approaches. Several community-based, collaborative and participatory interventions were noted, however formal rigorous evaluations are lacking. Prevention programmes tended to adhere to developmental approaches, which, similar to the MST and other social-ecological approaches, targeted risk and protective factors located across various domains. There was a lack of evidence for the effectiveness of juvenile justice approaches, however comparison of juvenile justice
systems is complicated by the practical, operational and ideological differences of such systems across jurisdictions.
1. Introduction

1.1 Background and context

Anti-social behaviour (ASB) is a broad term typically used to describe a spectrum of problematic behaviours which violate established norms in specific social contexts that can negatively impact both on the individual engaged in the behaviour and on their family and the community in which they live. On the lower end of the spectrum, ASB may include oppositional or ‘difficult’ type behaviours such as uncooperativeness and unwillingness to follow basic rules of social engagement. On the upper end, ASB may encompass more serious violations of formal and informal codes of behaviour to include verbal or physical aggression, harassment or bullying, substance abuse and engagement in crimes such as vandalism and theft (Piotrowska et al., 2019).

Anti-social behaviours predominantly emerge with the onset and development of adolescence (Odgers, 2008). This is perhaps unremarkable, as adolescence is a period of enormous biological, cognitive and psychosocial change, which can affect, among other things, regulation of emotions, impulse control and risk-taking behaviours (Caufmann, 2015). Aside from developmental factors, a constellation of discrete factors are believed to be involved in the manifestation of anti-social behaviours in young people, including epigenetic, structural, psychological and social factors (Catalano, 2005; Murray & Farrington, 2010; Sijtsema, 2018; Tuvblad, 2013). Sex differences have also been observed in the prevalence of anti-social behaviours, with boys more likely than girls to engage in such behaviours (Odgers, 2008).

Developmental theories of crime posit that most young people will grow out of these behaviours, however a small number will persist (Moffitt, 2018). This perspective appears to align with data from Ireland, where figures show that anti-social behaviours that rise to the level of minor criminal offences peak between the ages of 15 and 20, with a majority being first time offenders that do not go on to re-offend (Irish Youth Justice Service, 2013). There is, nevertheless, Irish evidence from Redmond and colleagues to suggest that antisocial behaviour can be a precursor to more serious and persistent criminal behaviours by some children in the context of
their involvement with criminal networks (Department of Children and Youth Affairs [DCYA], 2016).

While anti-social behaviour is often associated with youth, it is important to be clear that it is not a problem singularly associated with youth. It is also important to be clear that the term anti-social behaviour is rather subjective and what may be interpreted as anti-social behaviour in certain contexts and when engaged in by certain groups of people, may be interpreted as normative behaviour in other contexts. This latter point is important to bear in mind also when making comparisons, not just of anti-social behaviour or perceptions thereof, but also when comparing potential responses, interventions and programmes for addressing anti-social behaviour.

In considering youth anti-social behaviour, for instance, there are challenges inherent in comparison of responses given the heterogeneity of the cultural and socio-economic contexts within which such behaviours arise and in the practical, operational and ideological differences between social welfare and youth justice systems (see Reddy & Redmond, 2018). For example, in Ireland the youth justice system centres on a community based model underpinned by guiding principles that includes recognition of the rights of the child (Department of Justice, 2021), and with an emphasis on collaborative, multi-stakeholder early intervention processes, as exemplified by the Garda Diversionary Programme. Under this model, incarceration is always the last resort, rather than first port of call. Consequently, Ireland has a comparatively lower rate of youth detention than other jurisdictions. This makes comparison with a jurisdiction such as the United States – where an estimated 76,000 children¹ per year are prosecuted, sentenced or incarcerated as adults – a significant, if not impossible challenge.

Anti-social behaviour can have far-reaching consequences, not just for the individual involved, who may be marginalised and suffer criminal or other social or legal sanctions, but also on the family and the wider community, whose well-being and peace of mind may be disrupted. Anti-social behaviour is also associated with

significant social and economic costs. In the UK, for instance it is estimated that vandalism alone costs the justice system and victims up to £1.6 billion per year (Rubin et al., 2006). Figures elsewhere suggest that the financial cost of severe anti-social behaviour in childhood can cost up to €29,256 annually per child, with 37% of the burden shouldered by families (Piotrowska et al., 2019). Consequently, anti-social behaviour is a significant challenge that needs to be addressed collectively by families, communities and policy-makers.

Given the considerable implications of anti-social behaviour for individuals, the wider impact on communities and cost to society, it is important that policy prescriptions aimed at addressing anti-social behaviour are grounded in evidence. The purpose of this review is to gather and synthesise all high quality peer-reviewed international and national literature on anti-social behaviour, in order to help inform policy development in this area going forward. It should be noted that it is not within the scope of this review to evaluate current policy frameworks for or programmes aimed at addressing anti-social behaviour in Ireland in a variety of contexts.

1.2 Aims and objectives

The aim of this research was to synthesise all the high quality research related to anti-social behaviour (ASB). The objectives were:

1. To carry out a systematic concept search of relevant databases to gather all relevant high quality published peer reviewed literature relevant to ASB and interventions to prevent and respond to ASB.
2. Using a systematic and structured approach, to assess the quality of and synthesise the evidence on ASB and interventions to prevent and respond to ASB.
1.3 Research questions

Six research questions were developed for this evidence review:

1. How is ASB defined across the literature?
2. What is known about ASB in Ireland?
3. What perceptions of ASB exist i) at the State level and ii) the community level?
4. How does ASB affect i) individuals; ii) families and; iii) communities?
5. What factors tend to underlie ASB, including, living environment, peer behaviour, personal/family circumstances, cultural factors, socialisation and use of alcohol?
6. Which interventions are effective at i) preventing, and ii) responding to ASB? For whom and in what contexts?

1.4 Overview of the report

In this first chapter, we have set out an initial overview of anti-social behaviour and outlined the research aims, objectives and questions underpinning the review. The second chapter of this report provides details of the methods employed to gather, organise and assess the evidence. Chapter three explores the findings of the review, specifically looking at definitions and understandings of ASB, perceptions of ASB, the impacts and effects of ASB, underlying factors for ASB and approaches for addressing ASB. The final chapter provides an overall summary of the findings and outlines the gaps in knowledge, as well as the limitations of the study.
2. Methods

2.1 Introduction

A rapid review approach was used for this evidence review. Rapid reviews are increasingly being adopted as policy-makers require robust, systematic evidence syntheses that can help inform decision-making around best-practice in a specific policy context (Tricco et al., 2017). The turn-around with rapid reviews is considerably quicker than a traditional evidence syntheses, generally completed in under 12 weeks compared to 12 months for a systematic review. Rapid reviews employ many of the techniques of systematic review methods, including using systematic database searches using pre-defined inclusion/exclusion criteria and relevant identified concept terms, screening process and quality assessment. The process is, however, streamlined by limitation of sources, database limitation of geographic origin to the most relevant comparable policy contexts, and/or use of a single reviewer rather than undertaking a double review process. There are some limitations to the methodology – for example there is the potential for sampling bias as a result of this streamlining process. Nevertheless, rapid reviews are considered sufficiently rigorous and reliable to inform the policy making process in an evidence-informed manner. The steps and process of this rapid review are outlined below.

2.2 Sources of information

Three databases were chosen for this rapid evidence review, including Applied Social Sciences Index & Abstracts (ASSIA), Web of Science and PsycINFO. These databases were selected as they host a wide variety of multidisciplinary material from disparate fields, including social sciences, health, social work, criminology and law. Structured internet searches were also carried out using OECD Open Government Data and Open Gray databases for Government and technical reports.
2.3 Types of evidence and inclusion/exclusion criteria

The evidence reviewed included: 1) rapid, systematic or other high quality literature reviews and meta-analyses published anywhere; 2) qualitative and quantitative studies published in Ireland, the EU or the UK; 3) Grey literature such as governmental and non-governmental (NGO) reports.

The exclusion criteria determined that studies were not included if:

- They were published before 2010
- They were published outside of Ireland, the EU or the UK (excluding systematic reviews)
- If they were published in a language other than English.

2.4 Systematic concept searches

Systematic searches using terms that captured three distinct concepts, namely ‘anti-social behaviour,’ 'people/place’ and ‘type of research output or evidence' were run within the specific databases. These search terms were agreed upon following discussion amongst the researchers and in consultation with the research commissioners at the Department of Justice. Within the databases, the search parameters were limited to searching only title and abstracts of published peer reviewed literature. In line with the inclusion and exclusion criteria, further limits were placed on the searches in respect of geographic location, language and type of output or evidence to allow us to render a manageable sample of the most relevant literature. The terms used in the concept searches are displayed in Table 1 below. A sample search string is located in Appendix A.
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<tr>
<th>Concept 1:</th>
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<th>Concept 3:</th>
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<td>Anti-social behaviour</td>
<td>Place/People</td>
<td>Research output/type of evidence</td>
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Table 1: Search concepts and terms used for systematic databases searches
2.5 Abstract screening

A total of 3085 records that satisfied inclusion criteria were retrieved from the database searches. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flow diagram was used to keep track of records (see figure 1). Duplicates in the gathered sample were removed using Endnote data management and bibliography software, resulting in a sample of 2036 for abstract screening. Abstracts were screened using Abstrakr, an online research tool specifically purposed for systematic style evidence reviews. Following a pilot round of screening of a sub-sample of 100 papers, two reviewers (EV and ED) screened each of the 2036 abstracts independently. Conflicts were resolved following discussion to reach consensus among the research team at the end of the abstract screening process. One hundred and seventy-two papers in total were deemed eligible for full-text screening. Full-text screening was carried out using Microsoft Excel by two reviewers (EV and ED), with any conflicts resolved by a third reviewer (SNG). Three basic screening criteria were used during the full-text screening stage, with papers removed if they did not address one of our research questions, if they were not a review or empirical study and if they did not meet the other aforementioned inclusion criteria. This process resulted in the elimination of 98 publications, yielding a final sample of 74 papers deemed eligible for inclusion for data extraction and analysis. See figure 2 for an outline the excluded articles by reason for exclusion.

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2 Documents that dealt mostly or predominantly with more severe infractions of the law and persistent engagement in serious criminality were excluded on the basis that they were beyond the scope of this review.
Records identified through database searching (n = 3085)

Records after duplicates removed (n = 2036)

Records screened (n = 2036)

Records excluded (n = 1049)

Full-text articles assessed for eligibility (n = 172)

Full-text articles excluded, with reasons
Total (n = 86)
Does not address RQ (n=47)
Geographic location (n=13)
Not in English (n=5)
Not a review or empirical study (n=21)

Studies included in data extraction (n = 74)
Studies included in narrative review after CASP appraisal (n=65)

Figure 1: PRISMA flowchart
2.6 Data extraction and Critical Appraisal Skills Programme (CASP) quality appraisal

Data were extracted into Excel by two reviewers (EV and ED), with CASP appraisal occurring in parallel. The information extracted from each record comprised:

1. Title of study
2. Authors
3. Year of publication
4. Country of origin
5. Aims and purpose
6. Research question/s addressed
7. Study population
8. Sample size and composition
9. Control/Comparison (if applicable)
10. Study design
11. Methods
12. Outcomes/Findings
13. Key findings that relate to scope of the review (i.e., to the research questions)
14. Strengths
15. Weaknesses (risk of bias)
16. Gaps in evidence
The Critical Appraisal Skills Programme (CASP) (2018) qualitative checklist was used to broadly evaluate the quality of academic articles. The checklist consists of ten questions to which the researcher may answer ‘yes,’ ‘no,’ or ‘unclear.’ The questions include:

1. Was there a clear statement of the research aims?
2. Is the methodology appropriate?
3. Was the research design appropriate to address the research aims?
4. Was the recruitment strategy appropriate to the research aims?
5. Was the data collected in a way that addressed the research question?
6. Has the relationship between researcher and participants been adequately considered?
7. Have ethical issues been taken into consideration?
8. Was the data analysis sufficiently rigorous?
9. Is there a clear statement of findings in respect of each of the research questions?
10. Is the research valuable?

Use of the CASP checklist acted as an additional screening process, with only studies that met the minimum threshold of five questions answered in the affirmative to be included in the final synthesis. Nine papers were excluded on the basis that they did not meet the minimum threshold. The mean CASP score of the total sample was 7.3 of a possible 10.

2.7 Concept mapping

Leximancer software was used to help address the first research question. Leximancer is a computer assisted data analysis software tool that aids with rapid
identification of concepts, themes and relationships across large volumes of text data. For this process, each of the papers in the final sample was scrutinised for definitions of ASB. If a definition was provided this text was extracted into a table in a Word document. Where definitions were not provided but specific indicators were used to measure ASB behaviours, these were extracted into the Word document instead. These texts were processed through Leximancer to help identify relationships and produce visualisations and concept maps with themes. A visualisation of some of the themes and concepts that were contained in the gathered text is represented in figure 4.

Figure 4: Concept map of themes related to definitions of ASB
3. Results

3.1 Introduction

This chapter provides a narrative synthesis of the findings of the evidence review. It is structured by topic covering definitions and understandings of ASB, perceptions of ASB, the impacts and effects of ASB, underlying factors for ASB and approaches for addressing ASB.

3.2 Definitions and understandings of Anti-Social Behaviour

Arriving at a singular definition of ASB is complicated not only by the range and heterogeneity of the behaviours associated with the phenomena, but also due to the variety of disciplinary fields within which it is researched and studied. These include – among others – psychology, psychiatry, criminology, law, adolescent health, education and sociology. Thus how the concept is defined and operationalised across the literature varies and this can create challenges when trying to measure and assess its prevalence and impact as well as approaches to addressing and preventing it. As well as definitional and conceptual differences within disciplines, disparate definitions and operationalisations of anti-social behaviour exist even within State boundaries. Depending on context, the term appears to be used with a considerable degree of malleability, encompassing both broad and narrow meanings of the term. In this section we will detail legal and policy definitions of ASB in the Republic of Ireland, as well as explore the definitions mapped in the gathered sample of literature.

Legal and policy definitions of ASB in Ireland and the UK

In Ireland the Criminal Justice Act 2006 Part 11 (113) and Part 12A (2) – Anti-social behaviour by children (Amendment in Children Act of 2001/257A/2) – both define anti-social behaviour with reference to adults and children respectively in the following way:

‘… a person behaves in an anti-social manner if the person causes or, in the circumstances, is likely to cause, to one or more persons who are not of the same household as the person—
(a) harassment,
(b) significant or persistent alarm, distress, fear or intimidation, or
(c) significant or persistent impairment of their use or enjoyment of their property.’

This is the definition drawn upon by the report of the Lord Mayor’s Commission on Anti-Social Behaviour (2012), which expands on this with reference to the Oxford English Dictionary definition as behaviour that is ‘destructive of or hostile to other members of society’ (p. 3). Contextualising anti-social behaviour with reference specifically to the City of Dublin, the report broadens the scope of its understanding of ASB as ‘that which negatively affects the experience of the city for its visitors and residents’ while identifying specific acts which it considers contribute to this problem to include: ‘graffiti, vandalism, noise, name calling, public drinking and small scale drug dealing, aggressive begging and harassment’ (p. 3).

An alternate definition of ASB is found also in the Housing (Miscellaneous Provisions) Act 2014. This differs from the definition found in the Criminal Justice Act by expanding it to include:

‘(a) the manufacture, production, preparation, importation, exportation, sale, supply, possession for the purposes of sale or supply, or distribution of a controlled drug (within the meaning of the Misuse of Drugs Acts 1977 to 2007)” and

(b) any behaviour which causes or is likely to cause any significant or persistent danger, injury, damage, alarm, loss or fear to any person living, working or otherwise lawfully in or in the vicinity of a house provided by a housing authority under the Housing Acts 1966 to 2014 or Part V of the Planning and Development Act 2000 or a housing estate in which the house is situate (sic) and, without prejudice to the foregoing, includes—

(i) violence, threats, intimidation, coercion, harassment or serious obstruction of any person,
(ii) behaviour which causes any significant or persistent impairment of a person’s use or enjoyment of his or her home, or
(iii) damage to or defacement by writing or other marks of any property, including a person’s home.’
This definition, rather than the one contained in the Criminal Justice Act, is used by a number of City and County Councils, for instance, Galway City Council (GCC, 2017) and South Dublin County Council (SDCC, 2018), in their anti-social behaviour strategies. In addition to the descriptions contained in section (a) and (b) of the Housing (Miscellaneous Provisions) Act 2014, South Dublin County Council includes further categories of ASB to encompass breaches of tenancy agreements that do not fall within the legal definitions of ASB and ‘unreasonable noise’ (p. 5). Galway City Council, in its definition acknowledges the social context in which ASB occurs, stating that ASB is ‘often symptomatic of social problems, such as drug or alcohol abuse or family breakdown’ (p. 2).

These definitions, particularly the one contained in the Criminal Justice Act, appear to track closely to the UK legal definition, which defines anti-social behaviour in the context of the Crime and Disorder Act (1998) as: ‘Acting in a manner that caused or was likely to cause harassment, alarm or distress to one or more persons not of the same household as (the defendant)’ (UK Home Office, 2004). The UK Home Office National Standard for Incident Recording (NSIR) (NSIR, 2011) expands on this definition by further drawing on that provided by the (UK) Housing Act (1996):

‘Engaging in or threatening to engage in conduct causing or likely to cause a nuisance or annoyance to persons engaged in lawful activities’ and the definition of ASB provided by the Chartered Institute of Housing (1995) as: ‘Behaviour that unreasonably interferes with other people’s rights to the use and enjoyment of their home and community’ (NSIR, 2011, p. 13). The NSIR further proposes three distinct categories/typologies of ASB:

**Personal ASB:** conceptualised as behaviour ‘deliberately targeted at an individual or group or having an impact on an individual or group rather than the community at large’ which ‘… includes incidents that cause concern, stress, disquiet and/or irritation through to incidents which have a serious adverse impact on people’s quality of life’ (NSIR, 2011, p. 14).

**Nuisance ASB:** to include ‘those incidents where an act, condition, thing or person causes trouble, annoyance, inconvenience, offence or suffering to the local community in general rather than to individual victims’ and ‘incidents where behaviour goes beyond the conventional bounds of acceptability and interferes...
with public interests including health, safety and quality of life’ (NSIR, 2011, p. 14).

Environmental ASB: described as dealing with ‘the interface between people and places’ and includes ‘incidents where individuals and groups have an impact on their surroundings including natural, built and social environments’ (NSIR, 2011, p. 15).

While none of these documents enumerate specific behaviours that are captured by the term ASB, the British Crime Survey contains a detailed list of behaviours that respondents are asked about. These include: Youths/teenagers/groups hanging about on the streets; street drinking/drunken behaviour/under-age drinking; vandalism, criminal damage or graffiti; inconsiderate behaviour; youths kicking/throwing/playing football in inappropriate areas; cycling/skateboarding in pedestrian areas or obstructing pavements; people throwing stones, bottles, eggs; loud music or other noise; people using or dealing drugs or drug litter; people being intimidated, threatened, verbally abused or harassed; environmental, including litter or dog fouling; nuisance neighbours; vehicle related, such as inconvenient or illegal parking; abandoned vehicles; speeding cars or motorcycles, joyriding, car revving, boy racers; begging, vagrancy, problems with homeless people; sexual, including prostitution, kerb-crawling or evidence of prostitution (e.g. cards in phone boxes, used condoms); people committing inappropriate or indecent sexual acts in public; and problems with out of control or dangerous dogs (Office of National Statistics, 2015).

Mapping definitions of ASB found in the literature

A broad spectrum of definitions of ASB was found in the gathered literature. Differences were noted along disciplinary and geographic lines. For example, authors with a disciplinary focus on child and adolescent psychology or psychiatry and authors in the United States tended to operationalise ASB as a set of pathological and/or problem behaviours and personality traits, with a focus on constructs such as callous-unemotional traits, irritability and aggression, hyperactivity/impulsivity and oppositionality – characteristics which, within those disciplines, are generally thought to be indicative of conduct disorders (Piotrowska et
al., 2019; Murray & Farrington, 2010; Brumley & Jaffee, 2016). Criminological and sociological literature and authors based in the UK and Europe tended to reference the UK legal definition (e.g., Egan et al., 2012; Neary et al., 2013; Brown, 2013). Many authors did not offer a specific definition of ASB (e.g., Alba et al., 2015; Bacchini et al., 2015; Berti and Pivetti, 2019), while others offered a generic and broad conceptualisation of ASB as violations of ‘norms, social conventions or law’ (Bacchini et al., 2011, p. 275). In some literature where specific definitions were not plainly provided, the scales used to measure ASB give an indication of how ASB is conceptualised. For example, Cutrin et al. (2015) measured juvenile anti-social behaviour using an aggression scale, against the norms behaviour scale, a theft scale and a vandalism scale. Other behaviours that were measured and/or included as examples of ASB included more explicitly criminal behaviour such as shop-lifting and bicycle theft (Drukker et al., 2010), breaking into a house, joy-riding and use of threats or force (Neumann et al., 2010) and certain behaviours characterised as ‘delinquent’ such as bullying, fighting and carrying a weapon (McGauran et al., 2019), and references to health risk behaviours such as drug-taking and substance abuse (Cutrin et al., 2017; Fagan & Lindsey, 2014; Haggerty et al., 2013). Thus the types of behaviours included in definitions tended to vary in respect of severity and frequently overlapped or were conflated with behaviours that may be more commonly construed as criminal.

While there was a heterogeneity in respect of the types and severity of problem behaviours included in conceptualisations of ASB, there was a more general consensus across the literature that ASB was a problem typically associated or concerned with young people. As several authors have noted ASB tends to be constructed in the media, policy documents and general discourse as linked to youth, especially in areas of social deprivation (Egan et al., 2012). Brown (2013) points out that public discourse and political rhetoric on ASB and young people has abounded in the UK since the premiership of Tony Blair, who argued in 1997 that ‘the scourge of so many communities are young people with nothing to do [but] make life hell for other citizens’ (quoted in Squires and Stephen, 2005, p. 6). This is also reflected much of the literature, with one paper conceptualising ASB quite broadly as young people ‘up to no good’ (Kilmurry, 2017, p. 203). Similarly, Hulley (2014) noted that despite ‘common sense’ assumptions around the types of behaviours that
constitute ASB in England and Wales, the term remains ‘slippery’ and is disproportionately attached to specific groups, including young people, people who use drugs and the homeless. This may be unsurprising, given the list of acts and behaviours enumerated in the Crime Survey for England and Wales, which specifically single out the homeless, young people and sex workers as problematic individuals implicated in anti-social behaviour. While these groups may have little in common generally speaking and in terms of the activities each engages in, their one shared characteristic is that they have less access to power. This is a point also taken up by Ward (2011), who notes that what is construed as ASB often depends on the identity of the person rather than on the behaviour itself. She uses the example of charity workers stopping people on the street to ask for money compared with street beggars doing likewise. Both are engaged in essentially the same activity of asking people to part with their money, yet one is regarded as anti-social and the other as pro-social. This perspective is reinforced by a UK study which reported that 60% of adults agreed that an old man shouting at children in the street counted as ASB compared with 100% agreeing that children shouting at an old woman was ASB, showing differences in how age mediated the perception of both victims and perpetrators of ASB (Hulley, 2014).

**Summary**

How ASB is defined varies widely across the literature and other sources. Legal and policy definitions in Ireland tend to align with legal and policy definitions in the UK. Within Ireland, two separate and slightly varying definitions are used in the Provision of Housing (Miscellaneous Provisions) Act 2014 and the Criminal Offenses Act (2001), with the latter adhering more or less to the UK legal definition and the former expanding on this to include a reference to the manufacture and supply of drugs. Local and regional anti-social behaviour policies appear to draw on the definition contained in the Provision of Housing (Miscellaneous Provisions) Act 2014 rather than the Criminal Offenses (2001) Act.

Across the gathered peer-reviewed literature, there is a similar ambiguity and variance in how the term is used and operationalised, though it is commonly understood as a problem predominantly associated with youth. While some authors limit their definitions to difficult, oppositional and transgressive or norm-breaking
behaviours that may cause nuisance to others, other authors include or conflate anti-social behaviours with criminal behaviours, up to and including violent offences. Many authors point to the subjectivity of the term, with ASB often considered in terms of common sense understandings of what behaviours are acceptable and unacceptable. This further complicates the matter, given that differential standards of acceptable behaviour are contingent on local, cultural, social and age/generational factors, which may themselves vary over time and place.

3.3 Perceptions of Anti-Social Behaviour

Assessing perceptions of ASB in Ireland is difficult as there are no studies that have examined this subject in detail in the Irish context. Nevertheless figures from the Central Statistics Office from Crime and Victimisation surveys conducted in 2015 and 2019 provide some insight into the extent of the problem as perceived by the public. In the 2015 survey, respondents (n=13,486) were asked how they were affected by ASB, though the term was not explicitly defined. Of the total sample, 55% reported ASB was not a problem at all; 32% not a very big problem; 9% said ASB was a fairly big problem; and 3% said it was a very big problem (CSO, 2016). People living in Dublin (14%) and non-Irish Nationals (11%) were more likely to report ASB was a fairly big problem (see figure 5). Women aged 18-24 were also more likely to report ASB was a fairly big problem (12%) than other age or sex groups. In the 2019 survey, respondents (n=6720) were asked to what extent anti-social behaviour in their local area impacted their quality of life in the past 12 months. A large majority (71%) reported that their quality of life was not at all impacted by ASB; 17% said not very much; 10% said to a little extent; and 2% said to a great extent. People living in Dublin (14%), people living in a very disadvantaged area (14%), and non-Irish nationals (13%) were more likely to say that ASB was a problem to at least some extent (CSO, 2019). People aged 30-44 were the most likely to report ASB had impacted upon them 11%, as compared to 8% of those over 60, 9% of 18-29 year olds, and 10% of 45-59 year olds. In the 2019 survey responses were not disaggregated by age and sex combined, so no comparison can be made by age/sex.
Within the gathered peer-reviewed literature, several qualitative and quantitative studies from the UK (Hulley, 2014; Taylor et al., 2010; Egan et al., 2012; Egan et al., 2013; Neary et al., 2013) and one qualitative study from the Netherlands explored perceptions of ASB. The largest of these studies, Taylor et al. (2010), undertook a cross-sectional investigation of perceptions of ASB and neighbourhood ethnic heterogeneity, carrying out secondary analysis of data drawn from the British Crime Survey 2006/7 and the UK census 2001. The authors found that among respondents (n=43,115), those in lower income brackets, those living in social rented housing or areas of high deprivation and people experiencing poor or fair health were more likely to perceive high levels of ASB. The authors also report that being of male sex, being single or widowed and those in professional, managerial or intermediate social classes are less likely to perceive ASB. Population ethnic heterogeneity was not found to increase perceived levels of ASB. Higher proportions of 10-19 year olds resident in the area, area deprivation and higher levels of observed crime increased the likelihood of perceiving ASB. These findings indicate as such that deprivation and poverty, rather than diversity, are most strongly associated with perceived high
levels of anti-social behaviour. The authors concluded that the most important neighbourhood characteristics to influence perceptions of anti-social behaviour are the level of deprivation, proportion of teenagers and the level of recorded crime in area, which may be a proxy for actual levels of neighbourhood disorder (Taylor et al., 2010)

A cross-sectional study by Egan and colleagues (2012), carried out in deprived neighbourhoods in Glasgow with adult residents (n=6,008), explored whether perceptions of ASB were associated with poorer health, and whether health, demographic and psychosocial characteristics can help explain why perceived anti-social behaviour varies within disadvantaged areas. Anti-social behaviour was operationalised using the British Crime Survey definition, which explicitly draws on the example of teenagers hanging around the streets as anti-social behaviour.

Among respondents, 22% (n=1,332) said teenagers were a serious neighbourhood problem (the most frequently reported local problem). Similar to the findings of Taylor et al. (2010), those with poorer health status and more frequent use of the health service were more likely to report youth ASB issues in their neighbourhood. Other demographic characteristics associated with perceiving youth ASB as a serious problem included having financial problems and living with children. Interestingly, and perhaps counterintuitive to popular discourse, age was found to have an inverse relationship with perceived ASB, with residents belonging to the youngest cohort of respondents (16-24) more than twice as likely as the oldest group (>64) to perceive ASB as an issue. Reports of teenage ASB were strongly associated with a number of self-reported psychosocial factors including a lack of social support, fewer weekly family contacts, poor neighbourhood safety, low trust in neighbours, and neighbourhood decline. The findings overall suggest that those who perceive ASB as a serious problem tend to be vulnerable, isolated, or living in precarity and do not feel good about their neighbourhood generally.

In a study exploring definitions and interpretations of ASB, Hulley (2014) found that young people are frequently and consistently perceived and labelled as perpetrators of ASB and are less likely to be perceived as victims, particularly by adult observers. In this study, respondents including adults (n=201) and young people (n=185) were asked to name three behaviours they considered anti-social; identify behaviours from a list that were anti-social; and to respond to six vignettes in which an incident of
ASB was described. The vignettes were paired so that the same behaviour was presented in each but the intended victim or perpetrator differed by age. The results showed that only four behaviours, all of which constituted serious crimes – assaulting a police officer, burglary, shop-lifting and murder – were identified as ASB by the majority (over 90%) of both adults and young people, with no significant differences between the samples. Age differences were observed in the types of behaviour perceived as ASB, with young people hanging around being considered ASB by 40% of adults compared to 10% of the young people. Young people were consistently perceived as perpetrators of ASB by adults, but young people did not associate ASB with any particular age group. The same behaviour carried out by adults and young people was also viewed differently – with behaviour by young people more likely to be perceived as ASB where an adult behaving the same way was not.

The findings implicating youth as the perceived perpetrators of ASB align with studies showing that perceptions of ASB are frequently underpinned by negative stereotypes of youth and other groups (Brown, 2013; Egan et al., 2013; Neary et al., 2013; Van der Leun, 2013). The majority of participants (n=81) who took part in focus groups in Glasgow viewed ASB as predominantly a youth issue (Egan, 2013). Participants in these focus groups held deeply negative views of young people, with some employing strong language in characterising the younger generation as ‘arrogant’ and ‘feral animals’ (Egan, 2013, p. 618). Neary et al. (2013) demonstrated how young people themselves tend to also hold negative views of other young people and expect that adults will hold similarly negative views. A Dutch study found that immigrants, including second generation immigrants, often felt wrongly accused and/or stereotyped as perpetrators of ASB (Van der Leun, 2013). Residents (n=337) of 11 ‘problem’ areas in four of the largest cities reported that neighbourhood self-perception was far more positive than typically depicted in the media. Many residents acknowledged problematic social issues but also highlighted the liveliness and heterogeneity of their neighbourhood as a positive. Respondents attributed youth ASB to failures of parenting among some families and felt that targeted social measures rather than repressive policing would be a more appropriate response to issues of youth ASB in their neighbourhoods (Van der Leun, 2013).
Summary

Little is known about perceptions of ASB in Ireland. What evidence we have suggests that while the majority of people in Ireland do not view it as a very big issue that affects their lives, there are some people who feel greatly affected by it. Studies elsewhere have shown that ASB is predominantly perceived as a problem related to younger people, with youth typically perceived as perpetrators of anti-social behaviour rather than victims. People living in disadvantaged areas, people experiencing social isolation and/or social marginalisation and people with poor health are more likely to perceive ASB as a problem. The perception of ASB as a youth issue is frequently underpinned by negative stereotypes of young people.

3.4 The impacts and effects of Anti-Social Behaviour

While it is often stated that anti-social behaviour exacts a toll on individuals, communities and wider society, there is a paucity of research on the impacts of anti-social behaviour. Research published prior to 2010 suggests that anti-social behaviour is associated with significant economic costs. In the UK, for instance it was estimated that vandalism alone costs the justice system and victims up to £1.6 billion per year (Rubin et al., 2006). In general however little is known about how ASB affects the lives and well-being of families and people in the community.

Only one UK study that addressed this issue met inclusion criteria and passed the minimum threshold for CASP to be included in the final sample for review (Teedon et al., 2014). Indeed there were more studies that discussed the negative stigmatising effects of discourses of ASB on young people than there were studies on the impacts of ASB to the individuals and the community (Brown, 2013; Egan et al., 2013; Neary et al., 2013). It should be noted also that the aim of the study that reported on effects of ASB was to explore parental understanding of relationships between local environments and their children’s health and as such the findings on ASB are rather incidental. Nevertheless, it gives some insight into how ASB can affect people in their communities. The study, carried out by Teedon and colleagues (2014) with 85 participants in deprived areas of Scotland found that behaviours that negatively affected the neighbourhood environment – such as drug-littering and dog-
fouling – resulted in disruption to activities and fewer green and open spaces where children could play safely. Anti-social behaviours inhibited people spending time in or occupying certain public spaces, either because they were viewed as dirty and lacking in facilities or because there was an intimidation factor from groups of people hanging around, including young people and people who use drugs. Consequently, anti-social behaviour had the effect of excluding people from spaces and activities that might otherwise contribute to their overall health and well-being.

**Summary**

The evidence base on the effects and impacts of ASB on communities, the wider public and on society is very poorly developed, with only one study in the sample speaking to this issue. This study reported that anti-social behaviours had the effect of excluding members of the community from certain spaces in their neighbourhoods, including green areas that would otherwise be used for leisure and for children’s play.

**3.5 Underlying factors for Anti-Social Behaviour**

Thirty-two pieces of the gathered literature examined factors that may contribute to, or underlie, anti-social behaviour. The vast majority of studies focused on young people and were of medium to high quality. These included several systematic reviews and meta-analyses, as well as a number of high quality longitudinal twin cohort and population level studies. The overwhelming consensus among authors was that a confluence of factors at the individual, family, neighbourhood, school and wider societal level (socio-cultural and macro level) are implicated in the emergence of anti-social behaviours in youth and adolescence (e.g. Brumlee & Jaffee, 2018; Murray & Farrington, 2010; Piotrowska et al., 2019). Authors drew on a range of different theoretical frameworks for their studies, including ‘Broken Windows Theory’ (Estevez & Emler, 2010), ‘Labelling Theory’ (Motz et al., 2020), ‘Routine Activities theory’ (Erdmann, 2021), the ‘Relational Model of Authority’ (Sanches et al., 2012) and Bronfenbrenner’s or the ‘Socio-ecological’ approach (Odgers et al., 2012; Bacchini et al., 2015; Bacchini et al., 2011). This latter approach is a helpful framework, given the consensus that ASB is driven by multiple, over-lapping and
inter-related spheres of influence. The findings are considered below, outlining each level of influence and the associated risk, promotive and protective factors.

**Individual level characteristics and genetic/biosocial factors**

Several individual-level characteristics were identified as playing a contributing role in the emergence of anti-social behaviours in young people. These encompassed both personality traits and dispositional features that have been found to be implicated in ASB and conduct disorders. Such traits include high attention problems/attention deficit disorder (ADHD), poor delayed visual memory, depression, high interpersonal callousness, lower interpersonal skills, poor skills to refuse engagement in anti-social behaviour, all of which are associated with higher externalising problems (Brumley & Jaffee, 2016). Other traits identified that were predictive of conduct disorder and delinquency included low self-control (Vazsonyi et al., 2018), impulsivity (Neumann et al., 2010), lower IQ (Murray & Farrington, 2010) and poor self-image (Erdelja et al., 2013). Conversely, protective factors identified at the individual level included high academic aspirations, high sustained attention, high delayed verbal memory, shyness and negative attitudes toward delinquency (Brumley & Jaffee, 2016).

Being male has been associated with ASB across many studies (Bacchini et al., 2011; Cutrin et al., 2019; Jonkman et al., 2011; Vieno et al., 2010). Odgers and colleagues reported that boys growing up in deprived neighbourhoods may be the most likely to follow an early onset and persistent course of antisocial behaviour (Odgers et al., 2012), while delinquency scores were consistently higher in boys than in girls (Drukker et al., 2010), even across large population studies. For instance, a study exploring the relationship between routine activities and adolescent deviance/delinquency among 66,859 young people across 28 countries (including Ireland) found that older male adolescents are more likely to engage in anti-social behaviour than their female counterparts (Vazsonyi et al., 2018).

Individual health risk behaviours have also been implicated in ASB. Estevez and Emler (2010) found a bidirectional relationship between ASB and drug-use. This is in keeping with other studies which reported that exposure to drugs (Brumley & Jaffee, 2016), alcohol use (Azeredo et al., 2019) and favourable attitudes towards drug and
alcohol use (Jonkman et al., 2011) were linked to increased ASB when accompanied by other risk factors at the family, neighbourhood and peer levels.

A small number of studies looked at genetic and biosocial factors. A systematic review by Azeredo et al. (2019) reported that genetic factors play a role in ASB, for example, moderately influencing how males respond to cumulative risk of violent and non-violent offending and overall delinquency, however the authors acknowledge that the ‘genetic effects on behavioral development operate in a probabilistic rather than deterministic manner’ (p. 523). Thus the presence of genetic factors is considered to predict propensity to engage in anti-social behaviours under certain conditions and in the presence of other risk factors, rather than to have a direct relationship. van Hazebroek et al. (2019) provided empirical support for a biosocial perspective on ASB, finding significant interaction effects for pre/perinatal risk factors and anti-social behaviours in the context of higher levels of social adversity.

**Family level factors**

Numerous family-level factors have been identified as having an influence on ASB. Documented family-level risk factors for ASB include family conflict (Jonkman et al., 2011), absence of family support (Cutrin et al., 2015), living in a one-parent family (Neumann et al., 2010; Valdimarsdottir and Bernburg, 2015; Erdelja et al., 2013), poor familial relationships (Estevez & Emler, 2010) and higher levels of caregiver disruption (Duran-Bonavila et al., 2017). Family conflict has also been found to predict delinquency and other more serious offending. For example, a Spanish study which compared Spanish adolescents in secondary schools with adolescents residing at a juvenile offender centre (n=764) found that juvenile offenders perceived more of an atmosphere of family conflict at home compared with the school-based sample of young people, while those in schools reported higher levels of parental monitoring (Cutrin et al., 2015). In both samples, however, family conflict was significantly associated with anti-social behaviour. These findings align with those of a systematic evidence review of longitudinal studies which reported that poor parental supervision, punitive or erratic parental discipline, cold parental attitude, parental conflict, and anti-social parents, were all significant risk factors for youth ASB (Murray and Farrington, 2010).
There were several studies that looked at the role of parenting practices in mediating anti-social behaviours in young people. Specific practices that were examined included parental knowledge and parental monitoring (Neumann et al., 2010; Cutrin et al., 2017; Cutrin et al., 2019). A longitudinal study carried out in Scotland over five years among Scottish school-children aged 12-17 years (n=4,597), found that risk factors from all levels of social interaction, including individual, family and neighbourhood were partly mediated by parental monitoring and knowledge (Neumann et al., 2010). There was some gender disparities noted by the authors, who reported that the protective effect of parental knowledge on adolescent ASB is significantly stronger for female as compared with male adolescents. Similarly, a Spanish study reported that higher levels of parental knowledge were significantly related to lower rates of substance abuse, non-violent anti-social behaviour and violent behaviours in a sample of community/secondary school youth aged 14-19 (n=584) and youth in juvenile detention centres aged 14-22 (n=292), however, no gender differences were noted in this study. Interestingly, and contrary to what was expected, the same study found that parental support was not negatively associated with ASB and indeed was shown in the community sample to be positively and significantly associated with ASB. Nevertheless, the authors concluded that high levels of parental support appear to be a protective factor for different types of antisocial behaviours, but only through the mediated effect of parental knowledge. Comparable results in respect of parental monitoring were also obtained by a study carried out among Italian secondary school students (n=489), which explored the influence of gender, exposure to community violence, and parental monitoring upon antisocial behaviour and anxiety/depression in adolescence (Bacchini et al., 2011). This study found that the strongest predictor of ASB was exposure to violence as a witness, however they also reported that parental monitoring can act as a protective factor that moderates against ASB, even when an individual has been exposed to violence.

One explanation for the role of the family in influencing youth ASB, may be the impact that one’s immediate family may have in shaping attitudes towards the wider community and to institutional bodies. For instance, a study of various contextual factors involved in anti-social and offending behaviour in the UK, using a nationally representative sample of young people aged between 10 and 16 (n= 2,528) found
that an adolescent’s perception of the characteristics of their community and family contexts tended to colour their views of the police, the school and legal institutions, with these attitudes in turn being related to their participation in risky activities, including drug and alcohol use and anti-social behaviour (Estevez & Emler, 2010). The same study found that parental guidance and support may act as a protective factor against ASB, irrespective of characteristics of the neighbourhood, whereas poor family dynamics and family conflict tended to have a strong negative effect on young people’s behaviour in more deprived and disrupted neighbourhoods. This is supported by the findings of an Icelandic study, which reported that parental ties partially mediate the effect of disadvantage and youth commitment to social norms (Valdimarsdottir & Bernburg, 2015).

**Peer level factors**

The relationship between peer socialisation and engaging in anti-social and deviant behaviour was reported on in empirical studies in Spain (Cutrin et al., 2015) and the Netherlands (Jonkman et al., 2011), as well as in a large population study carried out among school-children in 30 different countries (Vazsonyi et al., 2018). The Spanish study found that in comparison with adolescents in the community, those in juvenile detention centres reported more ties to friends with a history of anti-social behaviour. In both samples links to deviant peer groups were strongly associated with self-reported ASB (Cutrin et al., 2015). The Dutch study similarly reported that interactions with anti-social peers was significantly associated with engaging in ASB (Jonkman et al., 2011). An interesting finding from the international study, which included data from Ireland, was that the association between peer activities and deviance was larger in countries with a higher life expectancy, however the reasons for this are unclear (Vazsonyi et al., 2018). It is worth noting that Vazsonyi et al. (2018) reported that Ireland had the highest mean deviance score of all participating countries, but it is important to note that the Irish data was gathered in urban centres rather than being nationally representative. The findings from these individual studies are reflected in a review from Hoeben et al. (2016), who documented a substantial body of research showing that associating with delinquent peers is significantly correlated with a host of negative outcomes. They reported that peer influence is stronger among adolescents, but still present in young adults. Hoeben et al. (2016) also concluded that parental support, control and prosocial relationships
with parents can buffer the effect of peer delinquency on individual delinquency. It is important to note that while relationships with anti-social peers can promote ASB in young people, socialisation with pro-social peers can have a positive impact on young people and promote pro-social behaviours (Brumley and Jaffee, 2016).

**Neighbourhood level factors**

Risk factors for ASB identified at the neighbourhood level include exposure to violence (Bacchini et al., 2015; Erdelja et al., 2013), neighbourhood disorder (Erdmann, 2021), unsafe and/or high crime neighbourhoods (Hoeben et al., 2016; Murray & Farrington, 2010) and living in areas with high distrust of the police (Estevez & Emler, 2010). However, the most commonly reported community/neighbourhood factor is living in a disadvantaged or deprived area (Neumann et al., 2010; Piotrowska et al., 2019; Valdimarsdottir & Bernburg, 2015; Odgers et al., 2012). A longitudinal study of same sex twins born in England and Wales in 1994 and 1995 (n=2,232) reported a graded relationship between neighbourhood socio-economic status (SES) and child anti-social behaviour at ages 5 and 12 and that the gap between children living in deprived areas and children in more affluent communities widened across childhood (Odgers et al., 2012). Neighbourhood deprivation had a significant and substantial effect on child anti-social behaviour even after controlling for sex, family SES, parental ASB, family history of mental health problems, exposure to domestic violence, and child harm. These effects continued to be observed over the developmental life course of the children. Interestingly and perhaps counterintuitively, a similar study, conducted in 2015 by the same authors and drawing on the same data set, found that boys (but not girls) from low-income families that lived in more economically mixed communities with affluent neighbours had higher levels of ASB than their peers living in concentrated poverty (Odgers et al., 2015). This finding implies some interaction between gender, poverty and social comparison that has not yet been well documented.

Protective factors that have been identified at the community/neighbourhood level include better neighbourhood leisure opportunities (Erdmann, 2021), structured socialising (Hoeben et al., 2016) and good housing quality (Brumley & Jaffee, 2016). Odgers et al. (2019) reported that the persistent effects of neighbourhood and family
deprivation on child ASB are mediated by supportive parenting practices. This aligns with findings on the buffering effects of parental knowledge and parental monitoring (Cutrin et al., 2019) reported above and also with the findings of a recent review of the evidence which found that parenting quality has a significant impact on ASB and is a key mediating factor between anti-social behaviour and poverty (Berti & Pivetti, 2019).

School level factors

School level factors that have been found to be associated with anti-social and delinquent behaviour include low school achievement (Morgado & da Luz Vale Dias, 2017; Murray & Farrington, 2010) and bullying and/or exposure to violence in a school setting (Erdelja et al., 2013; Bacchini et al., 2015). Hoeben et al.’s evidence review (2016) added that unstable schools can negatively impact on delinquency as a result of unstructured socialising. A study conducted in the UK among a nationally representative sample of English and Welsh youth aged 10 to 16 (n=2528) further found that rejection of, and from, school was linked both to anti-social behaviour and to offending behaviours including theft, criminal damage and drug-related offenses (Estevez and Emler, 2010). This aligns with Azeredo et al. (2019) who demonstrated that poor school attachment, in conjunction with other factors, can be a contributing factor in youth ASB (Azeredo et al., 2019). Conversely, high attachment to school was shown to be a protective factor in one systematic review (Brumley & Jaffee, 2016). Another school-level factor that has been shown to be protective against youth ASB is ‘justice judgements’ about teachers – if young people feel they will be treated fairly by teachers and by the processes and procedures involved in meting out school justice, they engage less in ASB (Sanches et al., 2012).

Wider sociocultural/Macro-level factors

The main risk factor for youth ASB and juvenile delinquency identified at the wider societal, sociocultural or macro-level is social deprivation (Morgado & da Luz Vale Dias, 2017; Neumann et al., 2010; Reijneveld et al., 2010). For instance, a study conducted in the Netherlands among youth aged 11.5-13.5 (n=2,230) found that adolescents living in the most deprived tertile had elevated problem behaviour scores compared to those living in the least deprived tertile (Reijneveld et al., 2010). Similarly, a UK study carried out with children and adolescents aged 5-16 (n=7,977)
found that family income had an indirect effect on ASB, and interacted with individual, family and neighbourhood level factors (Piotrowska et al., 2019).

A comprehensive review of the literature on the links between poverty and anti-social behaviour (Berti & Pivetti, 2019) documented how growing up poor can impact on the emergence of ASB. Specifically, they pointed to the pressures that poverty can exert on family functioning and the ensuing negative effects on parental practices such as parental monitoring, which can be a significant protective factor against ASB. They also pointed out that the timing of child poverty is important for a child’s cognitive and social skills development and how early and persistent childhood poverty and social deprivation can have a greater negative effect than sporadic or transitory poverty. Living in poverty also implies low social control, which has been shown elsewhere to be a contributing factor in engaging in anti-social behaviour (Neumann et al., 2010).

Studies elsewhere have shown that there is a significant negative relationship between social disadvantage and commitment to social norms, which may also help explain the consistent association between social inequality and anti-social behaviours (Valdimarsdottir & Bernburg, 2015). An Italian study that looked at the mediating role of norms and values found that values of ‘power’ tended to be associated with risk of ASB, while values of ‘universalism’ and ‘conformity’ acted as protective factors (Bacchini et al., 2015). These findings broadly align with findings elsewhere that have shown that communities and cultures with higher levels of social capital or social connectedness have lower levels of delinquency and crime (Binik et al., 2019). For example, a large population level study conducted among second level students (n=55,201) across 15 countries demonstrated that high levels of social capital were protective against victimisation (Binik et al., 2019). Findings elsewhere suggest that neighbourhood social capital may have an indirect effect on parenting through concerns about neighbourhood safety, and on ASB by adolescents through its effect on parenting (Vieno et al., 2010).

**Developmental pathways to ASB and interactions between levels of influence**

Several studies have suggested that the risk factors and developmental pathways for engaging in ASB may be different for girls and boys, however the evidence is somewhat mixed on this. For example, Neumann et al. (2010) reported that
neighbourhood risk has a direct effect on development of ASB for males, but not for females. Conversely, Drukker et al. (2010), found that a negative neighbourhood social environment was associated with an increase in delinquency in girls but not in boys. A systematic review of the risk factors for ASB found that women’s ASB is influenced by a range of individual-level characteristics and family risk factors, as well as gender-salient interpersonal contexts including childhood sexual abuse, early pubertal development, sex work and intimate partner violence (Javdani et al., 2011). Similarly, Duarte and de Carvalho (2017) reported that a mix of peer and family influences were a contributing factor in female delinquency and concluded that, for women, engaging in ASB often occurs within the context of certain social and environmental conditions, including social inequality and victimisation.

Victimisation has been identified as a risk factor more generally across both genders. For example, a study in Italy found that exposure to violence as a witness or a victim was significantly associated with ASB in different contexts, with exposure to violence outside the home having the strongest impact on adolescent ASB (Bacchini et al., 2015). Similarly, a German study found a relationship between being a victim of violence and delinquent behaviour, with the level of a person’s offending increasing his/her level of violent victimisation (Erdmann, 2021). This aligns with the findings of Azeredo et al.’s systematic review (2019), which concluded that exposure to violence is a more important predictor of adolescent delinquent behaviour than other contextual variables such as peer attachment and parental attachment. Finally, a longitudinal cohort study (n=2,232) conducted in the UK by Motz et al. (2020) found clear support for the labelling hypothesis, showing that contact with the youth juvenile justice system was linked to future anti-social behaviour. Their findings demonstrated that spending a night in jail, having a criminal record and being issued with an Anti-Social Behaviour Order³ (ASBO) significantly increases the risk of

³ An Anti-Social Behaviour Order (ASBO) was a civil order made in Great Britain against a person who had been shown, on the balance of evidence, to have engaged in anti-social behaviour. Use of ASBOs were in use in England and Wales between 1998-2014, although they continue to be used in Scotland. In Northern Ireland, ASBOs were legislated for in 2004, and continue to be applied.
further engagement in anti-social behaviour, with the latter being the greatest predictor of future ASB.

Summary

The findings in respect of underlying and contributing factors to anti-social behaviour overwhelmingly point to ASB being a phenomena that emerges as a result of the confluence of factors that occur at the individual, family, peer, community (neighbourhood and school) and wider societal level. At the individual level, numerous characteristics and personality traits, as well as genetic and epigenetic factors may predict a predisposition towards anti-social behaviour. It is important, however, to acknowledge that the presence of these traits in isolation of other factors at the social and structural level is insufficient to determine patterns of anti-social behaviour. Contributing promotive factors at the level of the family include exposure to violence, family conflict and the absence of positive parenting practices such a parental monitoring and knowledge. Positive family dynamics and good parenting practices, however can act as powerful protective factors also, indicating that family-based interventions may be a promising site for intervention. Neighbourhood level promotive factors include neighbourhood deprivation, neighbourhood disorder and high levels of neighbourhood crime, while school level factors included low educational attainment, an unstable school environment and the perception of unfair teachers. Several protective factors were also found at these levels, including better opportunities for leisure, structured socialising, higher school attachment and the perception of justice. At the broader societal and structural levels, factors that were promotive of youth ASB included social deprivation and poverty, lack of employment opportunities, and contact with the justice system.

3.6 Approaches to addressing Anti-Social Behaviour

Twenty-three pieces of literature addressed approaches to preventing and intervening in anti-social behaviour, with the majority focused on interventions aimed at reducing or responding to ASB, rather than primary prevention. While a small number of studies looked at justice system responses, there was no clear evidence identified that supported these models as effective means of addressing ASB. Instead, the vast majority of the evidence points to complex community and family
based interventions as effective means of responding to and reducing youth anti-social behaviour. The most commonly cited interventions were based around socio-ecological theoretical models that acknowledge the multiple spheres of influence on a young person’s social and cognitive development (e.g. Bronfenbrenner, 1979; 1992). Originally conceived of as an explanatory model to account for the range of social and structural determinants of child development, the social-ecological approach is used across a variety of disciplines and is a useful framework for conceptually separating out the distinct but inter-related spheres of social and environmental influence on an individual’s actions, behaviours and outcomes. The findings related to interventions designed around the socio-ecological model are presented in this section, as well as those from preventative interventions and justice system approaches.

**Family based interventions**

A review of family based interventions aimed at changing risk and protective factors known to be implicated in adolescent ASB looked at several interventions, including three early childhood programmes, one middle childhood programme and one adolescent programme, with the authors reporting that all programmes were effective at reducing family risk factors and improving family protective factors implicated in teen and adolescent ASB and delinquency (Haggerty et al., 2013). The results of this review support several others in the sample that reached similar conclusions (e.g. Sawyer et al., 2015; Dopp et al., 2017; Fox and Ashmore, 2015; Henggeler & Schaeffer, 2010; Henggeler & Sheidow, 2012). Specific treatment models that were repeatedly cited positively in these reviews and in other sources, included: Functional Family Therapy (FFT) (Humayun et al., 2017; Dopp et al., 2017) and Multi-systemic Therapy (MST) (Henggeler & Schaeffer, 2010; Henggeler & Sheidow, 2012). While both FFT and MST are separate approaches, they share common features in that they target multiple developmental domains and spheres of influence on a young person’s life.

One meta-analysis which looked at the effect sizes of such approaches reported that family-based treatment models, including MST and FFT, have long-lasting albeit modest effects on youth anti-social behaviour (Dopp et al., 2017). This supports the findings of Sawyer et al. (2015) who conducted a metal analysis of a range of
interventions, again including MST and FFT, and reported significant sustained but modest effects. A review of MST and other comparable programmes by Henggeler and Sheidow (2012) points out that programmes such as MST are at advanced stages of development and have been evaluated thoroughly, with multiple evaluations in different countries showing significant decreases in recidivism rates. For example, in a randomised controlled trial (RTC) with a 14 year follow-up, Borduin and colleagues (1995; Schaeffer & Borduin, 2005) replicated the effectiveness of MST in a sample of 176 youth and showed a decrease in re-arrests and incarceration by more than 50% (See Henggeler & Sheidow, 2012).

While the majority of studies included in the aforementioned reviews have shown that these approaches can be very effective, it should be noted that one RCT in the sample showed no significant differences between control and intervention group in a study carried out in the UK (Humayun et al., 2017). That study, which was carried out among adolescents aged 10-18 years in England (n=111), reported that while both groups showed large reductions in youth ASB and other indicators, there were no significant differences between functional family therapy and measures as usual (MAU) / control at either 6 or 18 month follow-up. The authors of the study do point out however that this may have been due to better usual services than in some previous studies. They further highlight that this was the first RCT of FFT outside of the US and conducted independently of the programme developers. Both of these attributes mean this study is important and potentially more relevant to the Irish context. Another explanation however for the disparity in results showing effectiveness may have to do with fidelity of implementation, which in the UK study was assessed to be adequate to high in most cases but lower than recommended in 23% of cases. Proponents of MST have highlighted the critical role that fidelity plays in achieving good outcomes (Henggeler & Schaeffer, 2010), so it is also possible that weak fidelity may account for the lack of difference between control and intervention groups.

Community interventions

Besides family-based interventions, other approaches that are found in the literature included community based interventions. One systematic review looked at the effectiveness of mentoring programmes, and reported that there was a significant
impact on delinquency and associated outcomes for youth at risk for delinquency (Tolan et al., 2014). Other studies have highlighted the value of focusing on bolstering protective factors implicated in youth ASB as a means of addressing ASB and preventing recidivism (Navarro-Perez et al., 2020). For instance, interventions that increase opportunities for structured socialising may be helpful. While there was limited evidence for such approaches in our gathered literature, one review emphasised a range of mechanisms through which sport can reduce ASB: namely by reducing boredom, reducing uncontrolled leisure time, providing role models, character building, serving as a substitute for other thrill-seeking behaviours, and reduced labelling (Nanninga & Glebbeek, 2011). Kelly (2013), also drew attention to the role of Sports Based Initiatives (SBIs) in providing spaces for young people to engage in structured socialising as well as to interact and develop relationships with community youth workers and SBI practitioners, who can often act as advocates and mediators for young people in interactions with the police. While highlighting the positive potential for such programmes, the author also critiques such programmes as being part of a structural apparatus that ‘responsibilises’ young people as the agents of ASB, rather than acknowledging and addressing the structural determinants of ASB, such as social deprivation and inequality.

Two studies in our review illustrate the potential for community based initiatives that include young people in decision-making processes and in the design of interventions aimed at addressing youth ASB. Peattie and colleagues (2016) describe a complex community-based intervention that was developed in collaboration with young people in a small town in Wales. The intervention involved a programme of diversionary activities; changes to the behavioural environment; creative educational initiatives; and an information campaign. Although the aim of the intervention was to reduce the deliberate setting of wild-fires in the locale, an unintended and unforeseen other consequence was a significant drop in ASB – 18% during the time period the intervention was on-going, with levels of ASB in the town remaining at around 37% lower than the historical average for the previous two years during the two months after the intervention ended. Similarly, a project carried out in Edinburgh used collaborative participatory process to plan, develop and implement a youth-led initiative called ‘YouthTalk’ to address youth engagement in ASB (Kilmurry, 2017). This involved a range of actions including: A youth-led review of facilities and
activities available; engagement with over 1500 young people; engagement with local service providers and stakeholders; and development of a communication strategy. The authors report a number of outcomes and benefits. The most salient of these were pledges to improve services by local providers, which resulted in delivery of a new parent/carer group in a local primary school; establishment of a youth café and other community based initiatives involving young people; development of a local youth awards programme to recognise the positive contribution that young people make to their communities; and establishing a life skills programme aimed at young people leaving school. Kilmurry (2017) noted that a 17% drop in Police Scotland youth crime figures for the city was recorded following the project. It should be noted however that no formal evaluation of the project and its impacts was carried out. Nevertheless, the findings of both these studies suggest that engaging youth as problem solvers and involving them in decision-making may help reduce local youth engagement in ASB.

**Juvenile justice responses**

There were no studies in the sample that showed evidence for the effectiveness of juvenile justice responses to ASB, however it should be noted that youth justice systems and responses therein vary across jurisdictions. Nevertheless, and with the aforementioned proviso, there were several studies that showed either potentially harmful effects of youth juvenile justice involvement (Basto-Pereira et al., 2018) or the problematic nature of implementing such responses (Brown, 2013; Ward, 2011; Hart, 2011). A study in Spain for instance showed that juvenile detention predicted the number of friends arrested of young people and their level of self-reported delinquency (Basto-Pereira et al., 2018). The findings point to potentially harmful and counterproductive impacts of juvenile justice system involvement for young people, particularly where low level offenses such as ASB are concerned, as this may increase the risk of further criminal behaviour through the negative effects of peer socialisation within juvenile institutions. This aligns with the findings of Motz et al. (2013) who reported that being issued with an ASBO significantly increases the risk of further engagement in anti-social behaviour.

Three studies carried out in the UK further highlight several problems with the use of ASBOs and other legal instruments such as ‘Acceptable Behaviour Contracts’
Brown (2013) for instance found that anti-behaviour specialist unit practitioners (n=70) relied on a range of tactics to persuade individuals to sign ABCs, including methods that might be construed as coercive (threats of eviction, ASBOs and/or imprisonment), which undermined the 'voluntary' nature of the ABC. Issues were raised concerning the legitimacy of such agreements, particularly where young people who may not have capacity to consent were pressured into signing them. Some practitioners expressed the view that ABCs, particularly in their application to young people, and where negotiation of terms was not permitted, were setting people up to fail by placing onerous or unrealistic expectations on young people. Acceptable behaviour contracts were sometimes criticised as lacking in reciprocity and mutuality and acted instead as a list of demands and obligations without reference to supports. Many of the practitioners interviewed opined that this would undermine their effectiveness. This broadly aligns with the findings of Hart (2011) who found that the conditions imposed on children and young people issued with statutory orders were largely unachievable – particularly in the absence of structured support mechanisms – and thus did little to improve public safety. Similarly, Ward (2011) examined the issuance of ASBOs to deal with nuisance activities such as street begging by people who use drugs, and suggested that such instruments serve to displace nuisance drug problems to other neighbourhoods, increase marginalisation and do little to meaningfully addressing the root of the problem.

**Approaches to prevention**

A smaller number of studies looked at prevention approaches, with the majority of these focusing on developmental approaches and early years interventions (Alba et al., 2015). A systematic review of developmental prevention approaches examined 50 programmes, which encompassed individual, family or school programmes that targeted children and adolescents in the community (Farrington et al., 2017). Meta-analysis showed that all programmes included were effective, with the median odds ratio calculated at 1.46, corresponding to a 25% reduction in the prevalence of ASB. The findings thus provide strong evidence of the effectiveness of community-based developmental programmes. These findings are coherent with a review of biocriminological approaches, which examined prevention programmes that address biological risk-factors for ASB in the family, school and community domains and
which also take a developmental approach (Rocque et al., 2012). The authors argued that these programmes are effective because they encourage healthy cognitive development, which has an overall positive effect on ASB levels, however it is difficult to determine whether the interventions reviewed were effective because they addressed biological risk factors or social risk factors. It is more likely that the benefits accrued are multiple and converge. For example, good nutrition is associated with better school performance, which in turn is associated with a reduced risk of ASB (Morgado & da Luz Vale Dias, 2017).

**Summary**

The weight of evidence in the literature reviewed points to the use of complex family and community based interventions as being effective in addressing and preventing ASB. Functional family therapy (FFT), multi-systemic therapy (MST) and other similar approaches that are based on a social-ecological theoretical framework were the most commonly cited as effective and are those for which the most evidence existed. MST in particular has been rigorously evaluated, however it should be noted that the majority of these evaluations have occurred in the United States and were carried out by the programme developers, which is a concern. Several community-based interventions were noted in the literature, mainly focused on sports-based interventions and collaborative participatory approaches that involve young people in decision-making and intervention design. While the studies that explored these approaches suggest they may be effective, formal rigorous evaluations are lacking. Prevention programmes tended to adhere to developmental approaches, which, similar to the MST and other social-ecological approaches, targeted risk and protective factors located across various domains. Reviews of these prevention programmes largely reported positive outcomes. Finally, there was a lack of evidence for the effectiveness of juvenile justice approaches, with studies rather showing these methods to be counter-productive and potentially harmful.
4. Conclusion

4.1 Overall summary of findings

The aim of this rapid review was to synthesise all the high quality research related to anti-social behaviour (ASB) in order to answer the following six research questions:

1. How is ASB defined across the literature?
2. What is known about ASB in Ireland?
3. What perceptions of ASB exist i) at the State level and ii) the community level?
4. How does ASB affect i) individuals; ii) families and; iii) communities?
5. What factors tend to underlie ASB, including, living environment, peer behaviour, personal/family circumstances, cultural factors, socialisation and use of alcohol?
6. Which interventions are effective at i) preventing and ii) responding to ASB? For whom and in what contexts?

In respect of the first research question, we mapped definitions of the term anti-social behaviour that were used across the gathered peer reviewed literature and other sources. Our findings suggest that a very heterogeneous collection of definitions are used and that usage of the term and the meanings attached to it largely depend on the disciplinary, geographic and jurisdictional context in which it is used. Even within Ireland, different definitions are used depending on context, with slight variations noted between the Provision of Housing (Miscellaneous Provisions) Act 2014 and the Criminal Offenses Act (2001). While anti-social behaviour per se is not something that is engaged in singularly by young people, it is clear both from mapping exercise and from the body of literature gathered more generally, that ASB tends to be conceptualised and frequently operationalised as a phenomena that is more or less exclusively focused on young people. This was borne out by the findings in respect of research question 3 which showed that perceptions of ASB tended to revolve around young people, as well as other marginalised or disempowered groups – albeit the latter were less frequently implicated.

In respect of research question 2 regarding what is known about ASB in Ireland, we found no peer reviewed literature that explored anti-social behaviour in the
community in Ireland specifically. One international study that contained Irish data reported that, of the 30 countries that participated in the study, Ireland had the highest deviance score by a fair margin (Vazsonyi et al., 2018). This finding, however, should be interpreted with a degree of caution, as the sample was not nationally representative. Some data from the Central Statistics Office suggests that the majority of people in Ireland do not consider ASB to a significant problem that impacts their lives, however given that there is a lack of studies on impacts and effects of ASB – both in Ireland and more generally – it is difficult to be definitive about this. While for the majority of people in Ireland, ASB may not be a problem that affects them, there is a significant minority for whom anti-social behaviour causes disruption to their lives (Central Statistics Office, 2020). Specifically there were sizeable numbers of people living in Dublin, young women and people living in disadvantaged areas for whom ASB was a recurring issue.

This latter finding may not be surprising, given that findings in respect of the fifth research question showed that social deprivation, poverty and inequality are among the most commonly cited factors that contribute to anti-social behaviour. Other factors were found at the individual, family, school and neighbourhood level, with the broad consensus being that ASB occurs as a result of intersecting and overlapping factors at each of these levels. For this reason, one of the theoretical frameworks most commonly drawn upon in conceptualising the promotive and protective factors implicated in the manifestation of anti-social behaviour was the social-ecological model as elaborated originally by Bronfenbrenner (Bronfenbrenner, 1979). Following from this, findings in respect of research question 6 were understandably centred around complex interventions that targeted multiple domains or spheres of influence on a young person’s life. The evidence in respect of interventions was generally of a high quality and approaches such as MST, based on the social-ecological approach have been through rigorous processes of evaluation. It should be noted however, that most evaluations have been carried out in the US context. Lastly, several studies suggested that contact with the youth justice system may exacerbate tendencies towards anti-social and criminal behaviour. This finding should be interpreted with a degree of caution however, given, as was noted previously the

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4 While there is a paucity of peer reviewed research on ASB in the community, it should be noted that significant research has been carried out in Ireland examining children’s involvement in more serious offending behaviour and participation in criminal networks (See Department of Children and Youth Affairs [DCYA], 2016).
challenges involved when comparing juvenile justice systems which exhibit a relatively high degree of heterogeneity in approach from jurisdiction to jurisdiction (see p. 11 and p. 46).

4.2 Limitations

There are several limitations of this review to which we would like to draw attention. Firstly, rapid review methods are not without their limitations. Specifically, and as previously acknowledged, there is the potential for sampling bias. Secondly, given the quick turn-around required for a rapid review, and the ensuing methodological limitations set in respect of databases searched and search parameters employed, it is also possible that despite our best efforts pieces of literature or programmes relevant to the Irish context may have been overlooked. Thirdly, there are limitations inherent in the scope and types of research that are conducted on this topic and thus on the evidence that is available for review. Lastly, we acknowledge that the definitional challenges in respect of ASB may give rise to a difference of opinion among scholars about what does and does not constitute anti-social behaviour, especially where this is construed to include more serious and persistent infractions of the law; consequently this ambiguity of meaning means that we may have included materials that others may have excluded and excluded materials that others would have included.

4.3 Gaps in knowledge

It is clear from this review that there are certain gaps in our knowledge on anti-social behaviour, both in Ireland and more broadly speaking. Specifically with regard to research question 2 as to what is known about ASB in Ireland – and acknowledging the limitations alluded to above – we were unable to find any relevant peer reviewed studies on ASB in the community. While there is a considerable body of research carried out on underlying factors that contribute to youth ASB and on interventions to address and prevent ASB, much less is known about what the effects of ASB are on individuals, families and the wider community. Part of the problem with this may relate to the difficulties identified around definitions that were identified in this review. The absence of a clear and common consensus as to what anti-social behaviour is both legally and conceptually and the apparent tendency to conflate ASB with what
may more commonly or colloquially be construed and understood as criminal behaviour, create challenges in measuring and assessing how it affects people both involved in and impacted by anti-social behaviour. This is further complicated by the subjectivity of the phenomena that is interpreted distinctly along generational and cultural lines. Given these definitional challenges, future researchers should be specific about what they mean when they refer to anti-social behaviour rather than relying on generic conceptualisations of ASB and assuming that there is a shared understanding of the concept. Additionally, there is a near total dearth of information regarding rates of ASB in Ireland, with even official figures on its prevalence and responses to it difficult to obtain. As such, research is needed to assess the prevalence and impact of ASB on individuals, the community and wider society. Finally, ASB is an issue that can affect all members of society, yet it is clear from this review that the preponderance of the research and the attention to the issue more broadly is focused on young people and those with traditionally less access to power. Future research on ASB in Ireland and elsewhere would be well served by linking in with young people, members of the community and other stakeholders to explore collective solutions to the problem that meet the needs of all members of society in an equitable fashion.
References


Brown, K. J. (2012). 'It is not as easy as ABC': Examining practitioners' views on using behavioural contracts to encourage young people to accept responsibility for their anti-social behaviour. *The Journal of Criminal Law, 76*(1), 53-70. https://doi.org/http://dx.doi.org/10.1350/jcla.2012.76.1.750


Department of Children and Youth Affairs [DCYA]. (2016). *Lifting the Lid on Greentown – Why we should be concerned about the influence criminal networks have on children’s offending behaviour in Ireland.*


https://doi.org/10.1016/j.dr.2018.08.002


Teedon, P., Gillespie, M., Lindsay, K., & Baker, K. (2014). Parental perceptions of the impacts the built environment has on young children's health: A qualitative examination and lay assessment amongst residents in four Scottish communities. Health & Place, 28, 50-57. https://doi.org/10.1016/j.healthplace.2014.03.010


Appendix

Appendix A: Sample systematic concept search string (Proquest)

(((ab(evidence) OR ab(outcome) OR ab(impact) OR ab(measure*) OR ab(effect) OR ab(prevent*) OR ab(intervent*) OR ab(risk) OR ab(review) OR ab("meta-analysis")) AND PEER(yes)) OR ((ti(evidence) OR ti(outcome) OR ti(impact) OR ti(measure*) OR ti(effect) OR ti(prevent*) OR ti(intervent*) OR ti(risk) OR ti(review) OR ti("meta-analysis")) AND PEER(yes))) AND (((ab(community) OR ab(neighbourhood) OR ab(neighborhood) OR ab(ireland) OR ab(irish) OR ab(society) OR ab(policymakers) OR ab(state) OR ab("state actors") OR ab(government)) AND PEER(yes)) OR ((ti(community) OR ti(neighbourhood) OR ti(ireland) OR ti(irish) OR ti(society) OR ti(policymakers) OR ti(state) OR ti("state actors") OR ti(government)) AND PEER(yes))) AND (((ti("antisocial behaviour") OR ti("anti-social behaviour") OR ti("antisocial behavior")) OR ti("anti-social behavior") OR ti(delinquency)) AND PEER(yes)) OR (((ab("anti-social behaviour") OR ab("antisocial behaviour") OR ab("antisocial behavior")) OR ab("anti-social behavior") OR ab(delinquency)) AND PEER(yes)))
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