

Anti-Social Behaviour: researching public perceptions to inform the design of technological interventions.

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Abstract.

Anti-Social Behaviour (ASB) is a sociological phenomenon, due to its misunderstood nature. There is an inconsistency of defined information and presence of misinformation amongst intervention attempts. This paper explores the necessity behind ASB educational intervention development, and the profound disruptive role ASB has in community cohesion instability. Public perceptions of ASB are gathered and investigated to outline this issue.

An online study was conducted over one week, gathering participants from England and Wales through social media and word-to-mouth recruitment. 58 responses were analysed. 62.1% of participants identified as female, 27.6% identified as male, 5.2% identified as non-binary, 1.7% identified as transgender female, and the remaining 3.4% did not provide their gender. Quantitative data was statistically compared, whilst qualitative data was thematically analysed.

The study asked a series of demographic and context-specific questions. After, three hypothetical case studies were provided, requiring participants to suggest appropriate interventions pertaining to the cases. ASB definitions were provided after case study one, to see if this affected participant responses.

93.1% of respondents did not know how to report ASB, with a notable lack of updated knowledge on ASB, interventions, and reporting, and ASB was frequently confused with criminal behaviour. 89.7% felt ASB impacted daily life at least 'a little bit.', with 20.7% reporting 'a lot.' 93.1% felt their ASB knowledge had improved at least 'a little bit' after defining information was provided, with 27.5% reporting 'a lot.' The most common words used within suggestions for intervention were: 'warning' (56); 'ASBO' (30);

'understanding' (28); 'support' (23); 'youth' (21); 'community' (18); 'criminal' (13); 'harmful' (11).

During thematic analysis, nine distinct themes within participant responses were identified, analysed, and discussed. Such as: 'ASB is disruptive', 'ASB interventions are not personalised enough', and 'sympathy towards ASB engagement is biased.' Participants applied more ASB intervention terms, such as 'CPN' and 'injunctions', within responses to case studies 2 and 3 after definitive information was provided. This infers exposure to ASB knowledge improves participant knowledge, influencing opinion. Overall, ASB misinformation and lower awareness was rife amongst the public, and that digital educational interventions have the potential to improve such issues.

An ethical intervention design model (PECBR) was created from said results. The model recommends that the design and deployment of ASB interventions should consider prevention, personalisation, empathy, education, collaboration, consideration, community, balance, and responsibility in ASB. The researcher advocates for validation of the PECBR model, further investigation into ASB misinformation and the refinement and accessibility of information and definitions to better address ASB.

Introduction.

Anti-social behaviour (ASB) has been a reoccurring public concern in England and Wales for many years. Due to its disruption to society's quality of life, through economic and social cost, ASB generally threatens community cohesion, discussed further (1).

ASB is difficult to define due its broad nature, with it differing from criminal behaviour, yet being harmful to society also (2,3). Due to this, definitions of ASB are often inconsistent, sometimes overlapping with defined criminal behaviours. This research will discuss the leading definitions.

ASB is described as behaviour that disrupts society and diverts from respectable social behaviour, with literature referring to ASB engagers as 'disruptors' (4). Although ASB does not derive from criminality, it causes enough disturbance to warrant official intervention.

ASB involves 'low-level incivilities' in England and Wales, which are combatted by ASB interventions (5). The official UK government definition of ASB, which is within the ASB, Crime and Policing Act (2014), generally pertains to 'conduct that has caused, or is likely to cause, harassment, alarm or distress to any person' (6). Local councils in England and Wales tend to define Anti-Social Behaviour similarly to Swansea City Council (7), who state ASB includes:

Harassment: bullying, verbal abuse, hate crime, and intimidation.

Noise pollution: animals, cars, property alarms, TVs, stereos, fireworks, parties, loud noise (music), DIY, and running businesses from home.

Parking: including abandoning vehicles, obstructions to residents, dangerous parking, caravans or HGVs.

Nuisance: gatherings, vandalism, graffiti, fireworks, joyriding / bikes, harassment

Use and trade of illicit substances such as drugs.

Other behaviours: fly tipping, overgrown disruptive gardens, dog fouling/failure to clean after pets, roaming animals/pets.

There are many misconceptions surrounding ASB. It exists as a grey area between criminal behaviour and non-criminal behaviour, whereby civil law and

criminal law become confused (8). For instance, as seen in the categories outlined above, vandalism is detailed as an ASB. Yet, vandalism is also detailed as criminal behaviour in the UK Criminal Damage Act (1971). The act states that individuals found guilty of criminal damage and/or vandalism (the destroying or damaging of property belonging to another with intent and/or reckless intent to damage and/or destroy) may receive a term of imprisonment of up to ten years (9). Clearly, there are crossovers between what is ASB and what is criminal behaviour within the definition alone, contributing to confusion of what ASB actually is.

Another misconception surrounding ASB is that it is primarily associated with young people, drugs, alcohol, and rowdiness (10). Such misconceptions can propel prejudices, labelling, discrimination, leading to a lack of reporting and the presumption that certain demographics engage with ASB over others. Both consequences of such a misconception are equally disruptive to ASB prevention.

Regarding such issues, this discussion will refer to the individuals affected by ASB as the 'affected' rather than the 'victims', and the individuals engaging with ASB as 'engagers' rather than 'perpetrators.' This is due to researcher consciousness of harmful labelling within the discussion of ASB, as the use of the labels 'victim'/'perpetrator' is reminiscent of labels used when discussing criminal cases. This will be avoided to prevent further confusion between criminality and ASB, with labelling theories arguing that labels influence behavioural outcomes and, naturally, prejudices and discriminatory behaviour (11). The importance of language and labelling within ASB discussions will be expanded upon.

Anti-social behaviour interventions.

The UK's ASB interventions arguably are driven by punitive measures, creating an impression of behavioural control (12), rather than prevention. ASB is a multi-faceted issue, involving sociology, criminology, economics, and politics, making it an incredibly difficult issue to address using just one perspective, such as punitiveness. These broad origins may explain why there has not been much development in ASB interventions in the UK- excluding the rebrand of the renowned ASBOs (Anti-Social Behaviour Orders) in 2014 (6).

In April 1998, the UK government introduced ASBOs in section 1 of the Crime

and Disorder Act 1998. The act intended to quell ASB in the UK using official warnings allocated to individuals aged ten and above (13). From 1999, ASBOs were sent by letter, ordering individuals to cease the outlined problematic behaviour (14). When ASBOs were breached and behaviour continued, individuals could be arrested and taken to court (15). ASBOs aimed to not only prevent ASB from reoccurring, but to also prevent ASB from escalating to perceivably worse behaviour, such as criminal activity. In some ways, ASB may be seen as a gateway behaviour into crime and deviancy. For instance, research shows that ASB in youth can continue into adulthood, with the severity of behaviour escalating (16).

As stated, in 2014 ASBOs were replaced. The new measures were CPWs (Community Protection Warnings), CPNs (Community Protection Notices), ABCs (Acceptable Behavioural Contracts), civil injunctions, and fines. CPWs, similar to ASBOs, are warning notices sent by letter to the reported ASB engagers (17). CPWs aimed to prevent CPNs, which are more serious, legally binding orders that follow after a breach of CPWs. CPNs order individuals over the age of sixteen to stop the behaviour reported and/or to avoid certain areas or people. Failure to comply with a CPN is a criminal offence that can consequentially lead to fixed penalty notices and/or civil injunctions (18). Fixed penalty notices notify individuals of £100 fine allocations if they are found to be in breach of their CPN (19). Civil injunctions are used for individuals, also aged ten and above, who are reported to be persistently engaging in ASB, sending individuals to court where they may receive judicial decision of intervention (17). Specific interventions may involve schools, parents/guardians, housing associations, youth justice, mental health services, and so on, though this is case to case and not a nation-wide guarantee.

Aim of research.

This research will critique current implemented interventions, and outline why further development is required. Additionally, public perceptions of ASB, its

interventions, and impacts will be investigated. After perceptions are obtained and analysed, they will be applied to critique of current interventions, offering intervention design improvements to better ASB prevention approaches.

Though, the research aim is not limited to bolstering efforts in preventing ASB, but also intends to increase the quality of support, the promotion of community inclusion in intervention design, the engagement between local councils and the public, and the protection of community/social cohesion.

Literature review.

ASB intervention criticism.

Scholars highlight how current ASB interventions do not efficiently utilise available resources to prevent ASB engagement. Intervention letters (CPWs/CPNs etc) lack the physical presence of an authority figure, diminishing the intended impact of the intervention (20). Moreover, letter notices can incur delays in intervention if the notice is not received in a timely manner, as individuals may have less time to prepare for and respond to ASB consequences, such as court injunctions and/or orders to stay away from specified areas and people, where applicable (21).

Furthermore, with CPW/CPNs sent by post, financial resources and time may be wasted when recipients do not receive the notice, ignore the notice, or hide the notice from parents and/or guardians (applicable to vulnerable populations). Furthermore, despite ASBOs being replaced in 2014, there are not many perceivable differences between the old and current interventions (22).

For instance, CPWs and CPNs are provided through the same letter format as ASBOs were, with the personalisation of intervention still being dependent on the ASB case worker and law enforcement attitudes, not policy. Due to this, it is argued that the replacement of ASBOs was a political move, not a developmental one that aimed to invoke change. The 'rebrand' merely aimed to change the narrative of government intervention, which was highly critiqued for its all-too-easy supply of ASBOs towards broad public behaviours, and the subsequent inferences of public behavioural control that followed.

Adversely, the simplicity of letter notices may be more effective upon younger ASB engagers, which may be why it remains within ASBO replacement. If parents or guardians living with the ASB engager are made aware of the engagement (for instance, they may read the postal CPW before the engager does), they may become actively involved in the prevention of the behaviour.

Such an impact is one based on chance and parental/guardian presence, though, and not meticulous, careful intervention design.

Moreover, in homes of abuse or neglect, the use of postal notices may propel domestic mistreatment of young engagers. For instance, research conducted in the U.S. highlights how the distribution of student report cards triggered domestic abuse (23). If report cards enclosed with school grades can trigger such abuse, then the notion that the distribution of CPW/CPN notices could trigger the same outcome is arguably a safe presumption considering the perceivably worse behavioural nature of the example.

Thus inferring a need for personalisation and consideration when deploying ASB intervention to young engagers to protect them whilst preventing ASB. Moreover, research found that ASB in youth persisted more in individuals whose parents/guardians had familial conflict and parental transgressive behaviour (16). Therefore, triggering domestic issues through postal notices may generally lead to further ASB engagement in young engagers, reducing the efficacy of intervention.

Further criticism outlines how civil injunctions require physical attendance to court, exacerbating the severity of the case due to associations between court and criminality. Scholars have discussed how punitive measures, such as court injunctions, exaggerate the seriousness of non-criminal behaviour, particularly where impressionable young people are involved (24). Ultimately, this intervention contributes to the inaccurate associations between ASB with criminal behaviour. More broadly, heavily punitive interventions inadvertently reinforce that ASB is as severely damaging as crime.

Moreover, research infers that the current UK interventions are more problematic than their predecessors, due to fewer due process protections for the recipients, meaning engagers have less legal right to be notified accordingly of charges than before the ASBO rebrand (22,25). Conversely, some scholars deduce that the interventions are effective due to the respite provided to the affected of ASB,

which aligns with the home office's promises of a 'victim-centric approach' (22), with engagers reporting a reduction in their ASB engagement (26, 27).

Contrariwise, the lack of personalisation and consideration involved in ASB interventions is problematic. For instance, CPNs and CPWs do not, on paper, consider the extraneous, wider variables that may contribute to an individual's decision to engage in ASB. Such variables include, but are not limited to, poverty, housing issues, mental illness, substance misuse, familial/personal issues, and societal strains (such as group behaviour) (28). This lack of personalisation means that underlying causes of ASB are not addressed, whereby punitiveness is favoured over preventing ASB long-term and improving engager quality of life. Thus, ASB interventions lack personalisation in design and deployment, with prevention short-term or limited. Of course, personalisation of case intervention requires time, resources, and money, which presumably limits the government's motivation, or ability, to personalise cases (29).

Literary criticism further outlines how aggressive punitive measures of young ASB engagers only exaggerates public anxiety around youth ASB engagement (30). Essentially, punitive treatment of young ASB engagers propels the prejudice and discrimination of young people in the U.K. being problematic and at blame for the depletion of community cohesion. The severity of measures, that are confusingly similar to criminal interventions (court cases, arrests), also infers to the public that young ASB engagers are criminal. This soon spirals into stigma, whereby young people are presumed to be deviant due to their age.

Consequently, poor social treatment of young ASB engagers, such as negative labelling, may occur. Labels may include 'yobs' or 'deviants', with such prejudices being frequently encouraged and normalised by the media (31). The labelling that these punitive interventions can trigger may increase chances of further ASB engagement, and, potentially, criminal behaviour. This is explained through the self-fulfilling prophecy, a theory surrounding the internalisation of labelling, which is discussed below.

ASB and labelling

The previously implemented intervention ‘ASBOs’ remains renowned for its negative public reception, most notably so when the acronym ‘ASBO’ was misused by the public. For instance, young people were labelled ‘ASBO kids’ (32). Ultimately, ASBOs became associated with the stigma that young people are inherently deviant.

The self-fulfilling prophecy theorises that if an individual is given a label enough, they will fulfil the expected behaviour of said label (33). This is applied to deviance in literature, where labelling of individuals can result in prejudice, stereotyping, discrimination, and internalisation of labels (34).

Individuals internalise and conform to the expected behaviour of labels when prematurely, randomly, or specifically assigned them by society (35). Individuals negatively labelled may experience isolation to varying degrees (discrimination, social shunning, and reduced opportunities). This increases the likelihood of the affected individual fulfilling the label’s expected behaviour, because they have already received a negative consequence associated with the behaviour. Whether they previously acted as the label would infer them to act or not no longer becomes relevant, because they either accept or become the label they have been given. If a child is labelled ‘ASBO kid’, they are more likely to continue or begin to engage with ASB than if they were not.

The theory also outlines ‘moral panics’, which are exaggerated public outbursts pertaining to a particular demographic who are blamed for societal issues or community cohesion disruptions. Such outbursts are often disproportionate to the trigger, whereby targeted demographics are blamed for wider issues. Moral panic outbursts may include negative social labelling, such as the labelling of young people as ‘ASBO kids’, leading to associated deviancy amplification (36).

‘Moral panics’ and labelling are frequently reinforced and led by the media, leading to such outbursts becoming widely influential upon public opinion, increasing the frequency of outbursts (31). The self-fulfilling prophecy has further been associated with the premature labelling of young individuals as offenders,

influencing the beginnings of criminal behaviour (37). Therefore, negative ASB labelling may encourage the development of ASB into criminal behaviour.

Danny Oakley, one of the UK's youngest ASBO recipients in 2006, described how being nicknamed 'ASBROs' by his community, and being front page on a newspaper for his ASB, as an 'adrenaline rush' after leaving court, where they recalled the judge treating him like 'scum' (38). Thus, such an 'adrenaline rush' may have propelled Oakley and his brother to continue their ASB engagement, as they collected over seventy ASB reported cases between themselves during childhood.

Within this example, there is an 'in-group' (society) and an 'out-group' (accused ASB engagers), whereby the 'in-group' exclude the 'out-group' for fear of their differences and favouritism of those familiar to them (39). As the 'in-group' negatively label the 'out-group', the 'ASBO kids' act as their labels would suggest they already do, which is a show of social conformity. Therefore, ASB labelling issues highlight the collective responsibility that both the community and the government must accept in this discussion, where the use of language and societal treatment of one another may be propelling issues.

Thus, labelling and social stigma should be carefully considered in the discussion of ASB, intervention design, and the communication of ASB information. For instance, the removal of the 'victim'/'perpetrator' labels. Understanding and acknowledging such weaknesses in current ASB interventions and attitudes will help to prevent the reoccurrence of harmful labels, the damaging of public opinion on government efforts, and the social isolation of youth within this discussion.

The media's perceptions of ASB interventions.

As stated, along with community labeling, the media also propels public opinion of ASB. Scholars state that ASB interventions creep toward behaviour regulatory

strategies imposed upon the general public (40). Scholars further highlight how ASB interventions may be perceived as behavioural/social control due to ASB intervention overuse (41). For instance, in 2010, a UK couple were banned from having loud sexual relations, with one of the individuals being arrested for breaking the ASBO terms (42). This ASB intervention was not publicly supported, as the punitive interventions utilised seemed disproportionate to the nature of the accused ASB, inferring unnecessary behavioural control and over-policing (43,44).

The media's circulation of the excessive use of ASB interventions reinforces negative opinions on government efforts to reduce ASB, but also contributes to confusion in what ASB is and what it is not. For instance, in the case mentioned, a couple ended up in court for having consensual sexual relations within the privacy of their home, which, frankly, seems absurd. Such a case infers that there is no limit to which the local authorities can control public behaviour. With the media's influence and circulation of such criticisms, public opinions will naturally surmise that efforts to prevent ASB and social disgruntlement are actually the government's extended hand of control, rather than the extended hand of help.

Consequently, this encourages public distrust, leading to lower engagement with local authorities, interventions, support, and reporting, which, ultimately, negatively impacts the efficacy of ASB interventions. Hence, to combat negative circulating opinions on ASB interventions, interventions that educate the public on ASB, support, interventions, and labelling consequences should be prioritised to better trust and engagement between the public and the government. Of course, nothing is so simple, as such efforts may be incorrectly perceived due to existing distrust, which may impact engagement with such educational interventions.

However, through transparency, consideration of public opinion, refinement of ASB definitions, and time, ASB interventions could become more trustworthy.

Self-policing communities

With current ASB interventions lacking personalisation, the voluntary involvement of community members in ASB intervention could bring forth the reaped rewards of community intervention, cohesion, and collective responsibility.

The self-policing of low-level crime in communities across the world are prime examples of how community involvement and engagement in ASB interventions may hold impact. As discussed, the defining line between ASB, crime, and acceptable social behaviour is blurred. Despite this, ASB can be related to low-level street crime, also described as minor offences. These offences can be drunk and disorderly conduct, low-level shoplifting, minor road traffic offences, trespassing, minor arguing, altercations, or disagreements (45), similar to ASB examples.

Brooklyn, New York.

A Brooklyn neighbourhood is occasionally self-policed on low-level street crime by volunteers, resulting in said town having lower criminal statistics than surrounding towns after introducing this community involvement initiative. After witnessing local police letting members of the public successfully quell the non-criminal yet ASB of a group of young individuals chasing a frightened young girl throughout the streets of Brooklyn, reporters infer that there was a mutual understanding between the police and citizens for self-policed low level street crime (46).

The individuals involved in quelling the street crime were not random, however, they were part of a collective formed in 2020 named Brownsville in Violence Out (BVO). BVO stands guard in the streets of Brooklyn across two blocks several times a year for five days. During these five days, the Police redirect all 911 calls from that area to the BVO volunteers.

These individuals have no arrest powers, or powers relating to that of a police

officer, only utilising social tools gained from growing up or living in the area, recognising the people engaging in low-level crime. These relationships with members of the community enlist trust between engagers and those intervening; the volunteers know the streets, the crime, the people, the need for survival, the fear of the town's inhabitants, and personalised details.

The article outlines that the BOV are involved in the local community through providing free child day care, addiction recovery, and stress-reducing activity services, which are often inaccessible to vulnerable minorities. The success in these interactions may allow scholars to question why there was success in short-term, low-cost efforts, rather than governmental, punitive interventions.

This discussion argues that this intervention was successful because the Brooklyn community trusts their community peers to intervene with fair treatment, consideration and understanding. The general public typically trusts their peers (in-group) more than law enforcement or other individuals due to fear and collective paranoia of 'out groups' (55), or distrust in those who instil punitive measures upon them (56).

In application of this theory, the article outlines how the individuals involved in this self-policing are habitants of the town, with many growing up in New York, making them adept in knowledge of criminal occurrence there, giving them the necessary empathic understanding of their peers affected by such issues, but also those involved an understanding which the law enforcement may lack. Additionally, there may be a level of status perceptions influencing whether individuals will engage with intervention or not.

Conversely, one individual in the article stated that they felt a lack of assurance with the police allowing the community, through the BOV, to self-police itself as they felt abandoned and left to survive alone. Literature supports this view, labelling self-policing communities as communities at risk of no longer resembling what we understand a society to be (39). Yet, this view may be due to fear of unknown societal possibilities, with the absence of consistent law and order being a wary topic.

This is a possibility with higher level crime, as if the police simply leave a town unattended for five days, and this is public knowledge, premeditated crimes may be prepared to occur during those five days where police presence/intervention will not be active. Therefore, it bodes to question what procedures would be in place for when extreme incidents occur, such as murder or mass murder, when calls are automatically directed to the BOV.

Community policing such as this needs to instill precautions and planning between the police and the BOV, as the police have training in bomb scares, knife crime, and apprehending individuals with weapons, however these volunteers may not. There is a resounding opinion that these individuals, some of which were involved with past crime themselves, had the capability to deal with extreme situations.

On the other hand, the community self-policing intervention to low-level crime success is existent in other communities across the world. Alike with Brooklyn, many aborigines in Australia have taken increased responsibility in self-policing their community (26). The activities undertaken by these individuals include night patrols, street patrols, bare foot patrols, and mobile assistance patrols (depending on location), and offer safe transportation to individuals in need.

These community driven initiatives also successfully quell ASB and crime in various localities through partnering with other localities or government and non government organisations in security networks (27). Aboriginal communities versus New York communities are immensely different culturally, yet both initiatives hold success. This infers cross-cultural efficacy, with people at the heart of the intervention being the cause for said success. Community policing addresses the responsibility that communities hold on ASB prevalence and intervention through utilising community knowledge on culture and local inhabitants.

Understandably, there are concerns for community self-policing volunteer safety, and the community's safety, in possible extreme situations. Yet, with proper planning for these situations, objectively, this initial success in community

policing, cross culturally, is one that may be considered for ASB intervention in the UK. Communities may be encouraged to become actively engaged in ASB interventions, such as supporting each other, and addressing ASB through community watches, discussion groups, and prompt intervention from local councils where applicable.

ASB, crime, and misinformation

Crime comparisons with ASB may propel misinformation and confusion regarding what constitutes ASB and what constitutes crime. Much alike with ASB, the issue of stalking can be discussed regarding perceptions and grey areas of crime, as stalking is only criminally punishable when the stalker acts or threatens to act, such as threatening to harm a victim/s or harming a victim/s (47). If this does not, the victim can apply for a restraining order, however police intervention cannot go further unless the previously highlighted situations occur (48). These situations can be distressing for victims, as stalkers may cause distress to the victim's daily life and mental health, through intimidation, unwanted attention, and surveillance, much alike with ASB harassment and disputes.

An example of misinformation of this issue surrounds university student perceptions of stalking. These perceptions were found to encompass victim blaming depending on the individual's life decisions, such as engaging in casual dating, or the stalker being known to the victim and surrounding peers meaning victim experiences were minimised or not considered stalking (49). Hence, alike with ASB, misinformation may lead to a lack of knowledge on support and interventions available.

Stalking is compared to ASB due to the similarity to harassment, with the issue of stalking needing to be under certain conditions in order to become criminal. The stalking protection act outlines how a stalking protection order (SPO) can be filed to prohibit individuals from approaching, contacting the victim or family members, entering certain locations, and so on, with breaches leading to arrest and court

cases (50). Similarly, the CPNs and civil injunctions provide a notice of order to stop the reported behaviour, and if found in breach of said order, individuals may be sent to court. Stalking is not ASB, yet is arguably more extreme of a social issue, hence, requires more severe punitive intervention than ASB, however has the same intervention as an ASB engager reported to have an overgrown garden, dog fouling, or partakes in DIY. Therefore, it may be argued that ASB should have varying interventions depending on the extremity of the ASB, to avoid confusion between such cases.

Thus, due to the similarities in the punitive interventions between SPOs and CPNs/civil injunctions, despite the difference in extremity of social behaviour and distress caused to the affected, the confusions and misinformation between crime and ASB are highlighted due to impact upon public knowledge of support available, decreased efficacy and quality of life.

Anti-social behaviour and social cohesion.

A recent topic of high interest in literature (51), social cohesion is defined as a desirable trait of a society, but one that is also deteriorating (52). Social cohesion has many definitions and is difficult to define (53) yet can be described as a utopian society whereby a community is socially integrated with inclusion, maintained social bonds, fair treatment, commonality in social beliefs, mutual respect, and cohesive support (53). Social cohesion is incredibly important because it is what unites a society and has been described as central to the existence of human life (54), which can help prepare for social common foes, such as war or pandemics.

Literature states that social cohesion has declined with the incline of technology's role in daily life, with arguable smartphone reliance, particularly rising from the lockdown and isolation procedures during the recent pandemic (55). The recent pandemic has also threatened social cohesion as despite individuals coming together for the 'clap for the NHS', individuals began suspecting one another of

spreading covid-19, hoarding resources from supermarkets and selling out necessities, with strain being placed on vulnerable and deprived communities (56).

Politically, individuals in the UK have been blaming the decline of social cohesion on the integration of diversity of ethnic populations, worryingly commenting on migrants causing social and political rifts between communities (53). This discussion, conversely, argues that social cohesion has not been on the decline in recent years due to increase in population diversity, rather that the education into equality, prejudice, discrimination, and racism has been lacking. Rather than finding commonalities, people in the UK find differences. The fact remains, that individuals are afraid of change.

The association with social cohesion and ASB lies in the fact that ASB itself represents a lack of cohesion, as engagement with ASB infers discontent with oneself and society through behaviour that disrupts daily life and societal norms. Understanding that improving ASB improves social cohesion is important for intervention development, as to understand what is currently disrupting social cohesion may be what is causing a significant increase in ASB prevalence.

Research component.

Within this research project, a survey component was created to gain enhanced understanding of public knowledge and opinion both relating to and applying to ASB. The aim in this component was to better understand whether the public understood ASB, how it is reported, whether it impacts their lives personally and socially, and whether their input on ASB interventions could be used for Swansea Council's intervention development.

This was a component inspired by the New York experiment previously described, to further research whether the public could be involved with ASB intervention in the UK, initially from the collation of their perceptions. The survey

also aimed to test whether providing basic definitions and information surrounding ASB, as available on the Swansea Council website pages, impacted participant decisions on intervention suggestions for each scenario, testing before and after exposure to said information.

It is moderately hypothesised that participant perceptions toward the case studies will be consistently sympathetic to the elderly couple affected in case study 1, increasing severity for Robert's intervention, particularly due to literature discussing showing a prejudice toward younger individuals engaging in ASB. In case study 2, it is hypothesised that participant perceptions will be lenient toward Sarah due to her motivation behind ASB being her brother that passed from Covid-19, with predicted sympathy being inferred due to the recent pandemic.

In case study 3, it is predicted that participant perceptions will not sympathise with Sam, offering severity in intervention, as the individual affected was visually impaired, and the mention of mental health issues will be ignored as mental health is often not recognised as a disability due to stigma and habitual minimisation in society, as frequent in literature (58). It is further predicted that current interventions presented to participants will be heavily criticised due to lack of differentiation of the ASB measures taken case to case, instead having a few unanimous interventions of fines, injunctions, and CPNs.

These hypotheses are not integral to the study's discussion or outcomes, they are merely predicted insights that align with literature. If the hypotheses are consistent in results, then the current understanding of public perceptions of ASB may not require as much further research before interventions are developed. However, if they are not consistent with current research understanding of the public, then this may infer public perception that research in ASB needs to be expanded past this research, perhaps with broader samples.

Relevance of research.

ASB intervention development is an incredibly difficult task, as people are extraordinarily different, yet similar in their existences. From birth to death, an individual can experience thousands of differing influential factors, including life events (traumatic, joyous, or milestone events) which all contribute to their personality, decisions, and behaviour that makes them dissimilar to the next person. The frequent criticism of ASB interventions indicate a need for new intervention designs involving personalisation to better improve resource, economic and time, and intervention efficacy.

This research intends to achieve this through providing a new angle when looking at and understanding ASB. For instance, the discussion of technological intervention and the design considerations and implications of such. Instead of offering interventions developed from case studies of ASB, this research asks the public what they think, know, and feel towards ASB and the individuals engaging in it from real experiences and knowledge. When responses are gathered, the design implications for technological interventions of ASB will be discussed, to encourage application of the results to future research developments.

To create effective interventions for ASB, levels of knowledge on ASB must be outlined and perceptions must be understood to gauge what needs improving, how interventions can improve and encourage the general public to engage and support interventions to ASB. If the public does not have initial understanding, this study aims to not only outline and prove this with research evidence, but also offer support to improve said understanding and/or perceptions.

If understanding is assessed and improved from the ground up, a new line of communication could then be created between the government initiatives and the public, to involve the public better in interventions for their peers and themselves engaging in ASB. This is necessary to indicate how ASB affects community cohesion and how ASB interventions impact those involved.

Furthermore, discussing the implications of developing technological intervention

for ASB is not a common topic, yet necessary when current interventions are assessed as being outdated and impersonal.

There is little accessible literature that collates public perceptions of ASB definitions, interventions, application, and implementation rather than statistical reports and case studies alone. Literature perhaps infers a lack of clarity on defining ASB, however, there is yet to be a public study that quantifies the knowledge of the public and outlines the influence and application of perceptions on case studies and intervention design, bringing relevance to this research. Thus, this research will attempt to lay the groundwork in literature.

ASB is a multi-faceted issue that is related to political, sociological, psychological and other applications. The topic of ASB and its interventions are affected by and affect the public. Consequently, this discussion deserves a thorough sociological, human centred approach with the public's opinion at the heart of the discussion.

Methods.

Participants.

A total of 59 participant responses were collated over one week through social media advertisement and emails sent around Swansea University academic departments. Of the 59 responses collected, 58 responses were analysed. 1 response was removed from consideration of analysis as consent was not provided, with the participant neither choosing 'yes' or 'no'. 8 responses were partially removed from qualitative analysis as they did not provide answers to parts of the study. For instance, their response was not considered in one question's thematic analysis but was in the completed one. These participants were only partially removed from consideration in order to maintain the integrity of the sample power, as the sample was small already and complete removal may have damaged the study's generalisability. No participants requested a withdrawal of data at the time of this paper being submitted. No answers were excluded from analysis other than this.

The frequencies of participants within each demographic are as follows.

| Age | Frequency |
|------------|------------------|
| 18-22 | 9 |
| 23-33 | 38 |
| 34-54 | 5 |
| 55-75 | 6 |

| Gender | Frequency |
|--------------------|------------------|
| Female | 36 |
| Male | 16 |
| Non-binary | 3 |
| Transgender female | 1 |
| Transgender male | 0 |
| Prefer not to say | 2 |

| Employment status | Frequency |
|--------------------------|------------------|
| Employed full-time | 28 |
| Employed part-time | 5 |
| Student | 20 |
| Retired | 2 |
| Unemployed | 2 |
| Prefer not to say | 1 |

Materials.

The online platform 'Jotform' was used to create the study. UK legislation and Swansea Council's official guidelines to anti-social behaviour report procedures, intervention information, and general information about anti-social behaviour readily available to the public, referenced, was utilised. General literature surrounding ASB, interventions, and definitions were also utilised in procedure. The hypothetical scenarios created from such are as followed, with the details hypothesised as being influential to perceptions being highlighted.

Case study 1:

'Robert is sixteen-years old. He has no record of criminal or ASB behaviour. Robert's teachers often report that he is disruptive in class and sometimes does not show up to lessons, unanswered for. Last week, Robert and his friends had a party at his house with twenty-five attendees next door to an elderly couple.'

'The elderly couple reported the music and party as being too loud and disruptive as the party had kept them up until the early AM hours. They also reported that this was a common occurrence, yet this was the first time they had reported it as Robert had ignored their requests to turn down the music multiple times.'

Case study 2:

'Sandra is 25-years old. Sandra has a criminal record as she committed petty theft ten years ago, but no ASB record. Sandra is employed part-time as a waitress and sometimes volunteers at a local art club for children. A month ago, Sandra lost her brother to COVID-19, he was 33 years-old.'

'Two weeks ago, Sandra was spotted on CCTV spray-painting a local letting agent building's wall. Sandra was identified on CCTV by Police and approached regarding this incident. Sandra confessed and explained that she was spray painting her late brother's name.'

Case study 3:

'Sam is a 33-year-old man, their pronouns are they/them. Sam has no history of ASB or criminal behaviour. Sam has social anxiety and often struggles with social interaction and being outside for extended periods. Sam owns a small Pomeranian dog. Sam walks their dog every day around their property and nearby promenade. Sam often forgets their'

doggy bags when their dog goes to the toilet, leaving dog mess on the streets.

One of Sam's neighbours is a visually impaired individual who often steps in dog mess whilst leaving home. Sam's neighbour made a report on Sam due to their lack of cleaning up after their dog in the publicly accessed promenade and street, stating it commonly disrupted their days.'

Study design.

The study design was a descriptive research design, involving an online survey that collected both quantitative and qualitative data from one data group. This research design was chosen as literature suggests that it is the optimal design for collecting data to provide a direct association between qualitative/quantitative data and a phenomenon (59) as it examines the situation in question in its current state (60).

Procedure.

Creating the survey.

A participant information sheet and debrief sheet was created using said research, outlining the data collection aims, data storage, data usage, exclusion criteria, removal of data, researcher contact details, and ASB report instruction information, with no coercion or reward for participation.

The survey component was created using the online platform 'Jotform'. Questions were curated using the Swansea Council online official guidelines regarding ASB, its definitions, examples, and information regarding how to report ASB and interventions. Scenarios were formed from said understanding of ASB,

with references to gender, age, nature of ASB, with some references to health or societal events, through generalised understanding. The survey was tested on a laptop, iOS phone, and an android phone, with all tests being successful regarding layout and features. Before the study was actualised, ethical consent was applied for from Swansea University ethics boards. Ethical consent for the study was granted before the study went live on 18/09/23 at approximately 18:00 pm, running live until 25/09/23.

The survey.

After being presented with the participant information sheet, participants were asked to provide consent by selecting either 'yes' or 'no', with clarity in that if they failed to answer or selected 'no' that any data provided would be excluded from data analysis and deleted. The survey then began with basic demographic information from survey participants. This included indicating their age range, employment status, and gender, which is presented in the following: age, '18- 22', '23-33', '34-54', '55-75', '75+', 'Prefer not to say'; employment status, 'Employed full time', 'Employed part-time', 'Student', 'Volunteer', 'Retired', 'Unemployed', 'Prefer not to say'; gender, 'Female', 'Male', 'Non-binary', 'Transgender female', 'Transgender male', 'Prefer not to say'. No questions relating to name, contact details, or location were asked.

The survey then asked basic questions pertaining to the respondent's current knowledge of ASB, they were 'In your own words, can you describe what is your current understanding of ASB?', 'What government ASB interventions are you aware of?', 'Has ASB ever personally affected you? If yes, why?', 'Do you know how to complete and submit an ASB report and what happens after you do?', 'Have you ever completed and submitted an ASB report? If yes, why?', 'Please indicate how much you believe ASB affects every-day life in the UK'. After these questions, the term 'intervention' was defined, referencing current ASB interventions in place, where respondents were asked to provide their opinion on the aforementioned.

Respondents were quickly briefed that the next section of the survey would provide them with hypothetical scenarios of ASB to read and provide hypothetical intervention to, being advised to give intervention they believe will not only adequately intervene the situation but also improve support to both engager and those affected.

Three hypothetical scenarios of ASB were created through using Swansea Council's guidelines on ASB definitions and examples of such. During scenario creation, deliberate mention of gender, age, personal background (family loss, school attendance, mental health), and societal event (Covid-19 pandemic) was enacted to test whether the inclusion or exclusion of differing variables (male/female, young/old, mental health/not mentioned, Covid-19 pandemic) would have a noticeable impact on the severity of intervention suggested by respondents.

The first case study was presented before further information (definitions and examples of ASB) was provided, and two after. This was enacted to see if there was a difference in the responses provided for intervention before and after exposure to increased ASB information and whether participants reported an increase in knowledge.

Finally, participants were debriefed with an extended explanation for research rationale and aims and were thanked for their participation. A final page presented information on how to report ASB in South Wales and how to make an ASB report information for those living outside of South Wales, with the researcher's contact email being reiterated also.

Results were analysed using two approaches. Quantitative data was compared against itself, with demographic data creating a baseline to compare against answers. This was completed in SPSS, a statistical data analysis tool, whereby outputs of data means, frequencies, and percentages were calculated for each demographic and quantitative answer.

For instance, those relating to whether provided information bettered the

participant's knowledge of ASB and roughly how much. The most common words mentioned in participant answers were found using a search function, where noted key words were totalled in frequency of prevalence. This was also completed for the top ten mentioned surprising ASB examples.

Qualitative data was analysed, with scoring being created for each quantitative question, with scores being added in total for that question and compared in each demographic chosen group. The scores allocated are as follows: question 8, 'yes' is worth 1, 'no' is worth 0; question 9, 'yes' is 1, 'no' is 0; question 10, 'I'm not sure' is 0 (null), 'Not at all' is 0, 'A little bit' is 1, 'Quite a bit' is 2, 'A lot' is 3; question 14, 'I'm not sure' is 0, 'Not at all' is 0, 'A little bit' is 1, 'Some' is 2, 'A lot' is 3. For question 8, which asks whether participants know how to submit an ASB report, some participants answered 'yes, call the police'. This was difficult to score as can be a police or council matter. For the sake of the study participants were given a 0.5 score when they provided this answer. When participants answered 'yes and no', they were given a score of 0.5 also as this was difficult to use discernment on.

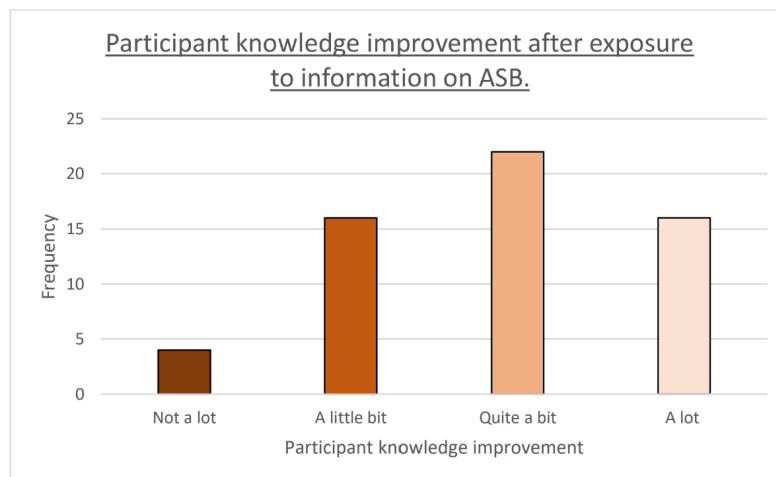
Results.

Quantitative data.

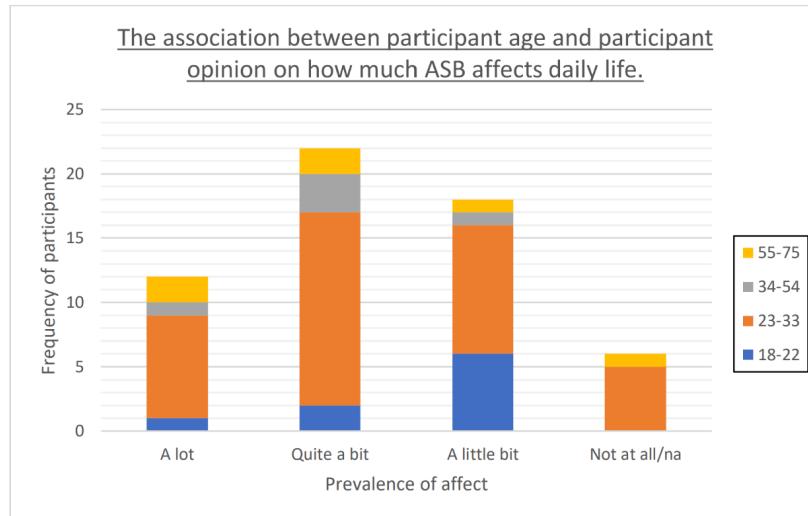
Comparative analysis.

The quantitative questions (2, 3, 4, 8, 9, and 10) were analysed. 43.1% of participants stated that they had personally experienced ASB. 100% of the 58 respondents recorded that they had never submitted an ASB report, with 93.1% stating that they did not know how to report ASB, or what happens after said report. 20.7% of participants indicated that they thought ASB affected daily life 'a lot' with 89.7% of participants believing that ASB affected daily life at least 'a little bit', with the remaining 10.3% being unsure.

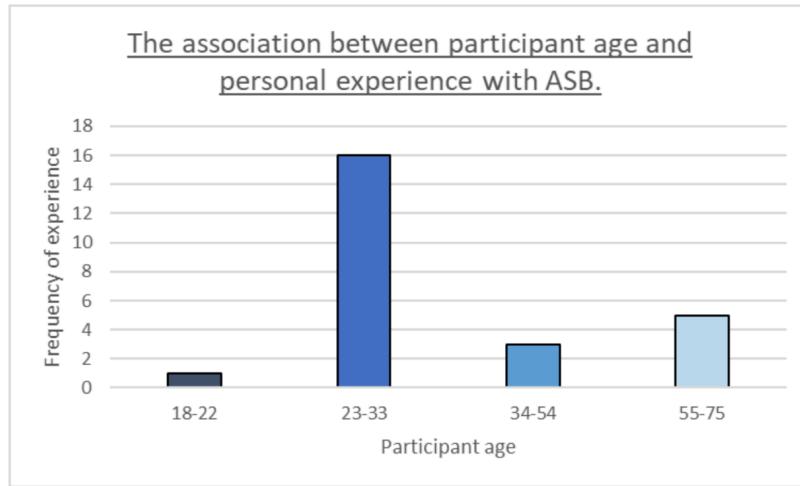
27.5% of the participants stated that after information and definitions on ASB was provided, their knowledge of such increased 'a lot', 37.9% reported 'some' increase, 27.5% reported 'a little bit' of an increase, and 6.9% responding 'not at all' or 'I'm not sure'. This is presented below.



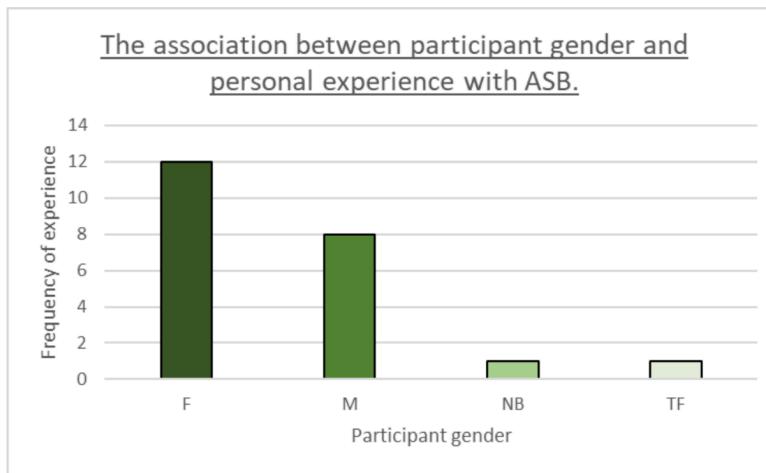
A comparison between participant age groups and participant opinion on how much ASB affects daily life was conducted. The graphical presentation infers that the age group 23-33 believes that ASB is more prevalent in daily life compared to the other age groups in the sample. The comparison is presented below.



A comparison as completed between age and participant reported personal experience with ASB, presented below. A positive association can be seen between 23-33-year-olds and reported personal experience with ASB is visible within this data set.



A comparison was completed between gender and participant reported personal experience with ASB, presented below. An association between the female gender experiencing increased ASB is visible within this data set.



Qualitative data.

Thematic analysis

The qualitative questions (5, 6, 7, 11, 12, 13, 14, 16, and 17) were thematically analysed. Frequent themes were identified in participant answers. The most common

words, associated as main themes, mentioned in participant qualitative answers relating to ASB, definitions, interventions, and scenarios are presented below. Most common words were chosen based on their prevalence in responses and relevance from answer to answer.

| Most common words | Frequency of mention |
|---|----------------------|
| 'ASB, anti-social behaviour' | 85 |
| 'Warning, warn' | 56 |
| 'ASBO' | 30 |
| 'Understanding, understand' | 28 |
| 'Support' | 23 |
| 'Intervention/s, intervene' | 21 |
| 'Young, teenage, youth, children, kids' | 21 |
| 'Fine' (financial consequence) | 20 |

| | |
|--------------------------|----|
| 'Disruptive, disruption' | 19 |
| 'Parent/s, guardian' | 18 |
| 'Community' | 18 |
| 'Clean, cleaning' | 18 |
| 'Noise' | 16 |
| 'Talk' | 14 |
| 'Criminal' | 13 |
| 'Loud' | 13 |
| 'Consequences' | 11 |
| 'Counselling' | 11 |
| 'Harmful, harm' | 11 |

| | |
|--------------------------|---|
| 'Bad' | 9 |
| 'Threat' | 8 |
| 'Aggression, aggressive' | 7 |
| 'Harassment' | 6 |
| 'Punish' | 6 |
| 'Danger' | 4 |

Additionally, there was an observed increase in use of ASB terms, such as 'ASB' and 'CPNs', in each case study 2 & 3's responses, after intervention information was provided, compared to case study 1's responses, inferring improvement of knowledge.

After reading and analysing the data, frequent opinions and key words in participant responses were analysed individually. The quotes analysed below represent frequent opinions across the data set relating to the ASB hypothetical case studies, interventions, definitions, and examples.

Themes.

1. ASB is '*Disruptive*'.

Participants frequently described ASB as disruptive when providing insight to their perceptions. This aligns with the quantitative data collected, where 89.7% of participants stated that ASB affected daily life at least 'a little bit', inferring consistency in participant perceptions of ASB as 'disruptive' and a social issue.

2. ASB involves '*unsociable*' people.

Respondents stated that they believed that ASB described the behaviour of individuals that was not sociable, in application to engaging frequently in socialising in general

society. This misunderstanding indicates that respondents had read the term ASB literally word for word, and provided their answer as such, rather than having knowledge on the term itself and knowing that ASB was a social behaviour relating to harassment, disruption, and intimidation.

3. 'Kids will be kids.'

This is an extract from a participant (student, aged 55-75), regarding case study 1 and Robert's parties. Participants seemed to have expected behaviour of disruptive parties from teenagers due to their age. This response principally partially minimises Robert's behaviour, whilst also generalising it based on his age being that of a teenager.

4. ASBOs are ineffective interventions.

'Sometimes ASBOs are not taken seriously- they do not serve as a deterrent to ASB.'

This sample of a participant response was an opinion that frequently occurred. Participants consistently questioned whether ASBOs were effective enough to be utilised as an intervention. The fact that ASBOs were mentioned 30 times throughout participant answers also presents the lack of updated information known to participants, as CPNs took over from ASBOs as an ASB intervention in 2014.

5. ASB interventions are not personalised enough.

'There should be more attempts to understand and alleviate the causes of ASB, i.e.,

poverty, addiction, child abuse, poor or no prospects, lack of caring support, closure of youth clubs.'

One participant provided the above quote when they were asked for opinions on current interventions. The participants indicated that they were 55-75, retired, and non-binary. The quote's main themes of improving ASB interventions through personalisation or tailoring of interventions and independent inquiry case to case was existent in numerous participant responses. Despite this specific response being provided by only one participant, it is valuable due to its insight into the ineffectiveness of a 'one size fits all' approach in interventions for ASB in the UK.

6. Sympathy is required in certain circumstances of ASB.

'Be a little sympathetic, seems she hasn't done anything wrong in a long time so a little warning telling her not to do it again as it's vandalism.'

This participant opinion to provide Sarah's case study with intervention involving sympathy and consideration for her recent grief was frequent across participant opinions. This furthers the opinion for personalisation of intervention rather than the limited interventions of punitive measures.

7. Community collaboration is necessary for ASB intervention.

'A sympathetic community police officer should visit Robert and engage in a non confrontational dialogue about the effects of his behaviour [...] using a Socratic, non judgmental approach'.

This participant was retired, between the age of 55-75, and identified as non-binary. The suggestion to include community police, or members of the community generally, in interventions was a reoccurring one across participant answers. Participants stressed the need for collaborative responsibility in communities, through community action, community collaboration with law enforcement, and increased community engagement with the engager in the case study.

8. ASB needs to be better defined.

'A lot of these things shouldn't be punished: why is it bad to run a business from home?'

From the participant responses, the following are the top ten forms of ASB expressed to be the most surprising: DIY (14); noise pollution (14); running businesses from home (14); overgrown gardens (12); animals (10); parking (9); bikes (6); fireworks (5); harassment (5); fly tipping (4). Participants did not agree with the ASB defined examples, with many stating that the severity of response of ASB interventions was inappropriate.

9. Mental health is not considered in ASB.

'Sam's anxiety seems completely irrelevant. Issue him with a warning that this is unacceptable and threaten a fine/consequences if he is caught doing it again.'

The participant who provided this quote was male, employed full-time, and between the ages of 23-33. The mental health of Sam was disregarded entirely, including their pronouns. This response inferred little to no empathy for Sam's anxiety, with no mention for the affected neighbour's disability.

Results discussion.

Quantitative data analysis.

There was an association drawn between the participant age group of 23-33 and a common perception that ASB affects daily life 'a lot', more than the other age groups within the sample. This infers that younger age groups may have more frequent perceptions toward the prevalence of ASB. This, however, may have occurred in this data analysis as 65.5% of the participants belonged to the age group of 23-33, so naturally the chance of a significantly larger association would be found between this age group and the variables in the survey. This issue generally encompasses how the sample could have been more diverse, yet this result still holds value as it infers that young people are witnessing ASB frequently.

Additionally, there was an association between female participants and increased personal experience with ASB, inferring that the female gender experiences ASB more than the other genders in this sample. Though, again, this may have been influenced by 62.1% of the participants in the study recording their gender as female.

As 100% of participants stated that they had never completed an ASB report before, it may initially be deduced that participants have not needed to complete an ASB report. Conversely, 93.1% of participants stated that they did not know how to make an ASB report, inferring that participants may have needed to report ASB but were not sure how to. Moreover, the remaining participants stated 'yes' or stated that they would presume to call the police. This response to call the police, nonetheless, may represent the confusion with ASB and generalised crime, and the lack of knowledge on ASB and its interventions.

The age groups, gender, and employment statuses of the participants were collected as literature states that public engagement with government deployed information or interventions can depend on their demographic information due to personal experience with the government, politics, and social standing simultaneously being influenced by individual life experiences, all impacting trust in said interventions (30). These

demographics provide some association or indication as to why certain participants sympathised with case studies more than others. For instance, many students sympathised with Case Study 1 (Robert's house parties), with participants suggesting intervention to better school support was the issue, or the possibility of abuse at home.

Thematic analysis discussion.

Theme 1.

The prevalence of the term 'disruptive' being used by participants inferred that individuals were affected by ASB frequently, aligning with the data collected that 89.7% of participants believed that ASB affected daily life at least 'a little bit'. However, as participants presented a lack of understanding for ASB examples, with many of the described personal instances of ASB not being ASB, this percentage may not be as representative of ASB daily prevalence. Moreover, the prevalence of the opinion that ASB is 'disruptive' may also be due to it being used in case study 1, with the hypothetical elderly couple describing Robert's actions as such twice. Therefore, participants describing ASB as disruptive may be due to participant effects, whereby individuals may copy language used by experimenters (or text in a survey) as they believe that this is what researchers want participants to do (61).

Theme 2.

As participants confused ASB for being unsociable in society, it may be deduced that these participants did not have any or much knowledge on ASB before the study at all, highlighting the need for education on ASB. This insight aligns with the 27.5% of participants who responded 'a lot' when asked whether their knowledge improved after being provided with definitions of ASB. This, therefore, provides further evidence for the need to improve access and deployment of information ASB, the interventions, support, and reporting system.

Theme 3.

The response analysed infers that individuals expect disruptive behaviour, such as Robert's, from teenagers due to stigma, indicating possible prejudice of disruptive activities from young people, applied to this situation, at least. This is a frequent concern in literature, with ASB often being blamed on young people presumed to engage with ASB because of their age group (62), labelled in literature as hostility bias toward young people (63).

Contrariwise, the demographics collected may be associated with certain participant opinions. Of the respondents in the 55-75 age range (7 total), four participants mentioned involving parents, guardians, and caregivers (teachers) in their intervention recommendations for Robert and opinions on the situation. This infers that these individuals did not presume that 'kids will be kids' or that Robert's involvement in ASB was simply due to his youthful activities, more that there could be issues at home or a need for parental guidance. This further indicated that participants were being considerate of Robert's age, home situation, school life, and possible lack of parentally fulfilled onus, and furthers the opinion that individual inquiry into ASB engagers well-being or personal struggles is imperative to intervene and prevent ASB effectively.

Theme 4.

Despite information on ASB interventions being provided after the first case study, with CPNs being outlined as the new ASBO intervention, participants continued to mention using ASBOs in their intervention suggestions for the case studies. This either infers that participants did not read the information provided carefully enough, they did not learn the information within that short time, or that they experienced confusion. This also propels relevance for thorough education in ASB, as many individuals do not understand the difference between interventions or know what governmental updates have been made. This persistent mention of ASBOs is likely due to the notorious nature of the abbreviation, as discussed, with its frequent role in stigma of ASBO kids and negative connotations associated with it (to an extent becoming a slur used to offend in UK society).

Theme 5.

Many of the responses provided inferred that there was a need for personalisation of interventions for ASB, as many of the issues associated or inferred in the hypothetical case studies provided related to personal issues (home, work, school, mental health, disability), which are not addressed or acknowledged in current interventions. This is a prominent issue, as individuals with personal challenges will also engage with ASB, so, naturally, they will require personalisation, understanding, empathy, and support to fully disengage from ASB or worse behaviour, such as criminal activity.

This is particularly proven in the case of Danny Oakley, previously discussed, who stated that the ASB intervention they received did not recognise the various ACEs (adverse childhood experiences) that they lived through, and with intervention leading to home-schooling, Oakley's quality of life lessened, which influenced their engagement in ASB (64), furthering the need for personalisation of intervention. The responses inferring the need for inquiry into individual backgrounds and personal challenges encompasses the aim of the study and presents alignment between public opinion and that of the researchers: understanding individual motivations, causes, and influential factors of ASB is required to begin to personalise and improve intervention.

Theme 6.

In this theme of responses, participants provided importance of sympathy toward ASB engagers depending on circumstance or details mentioned in the case studies. The specific response discussed in this theme provided evidence for the study prediction that participants would sympathise with ASB engagers detailed to have emotionally difficult personal struggles, such as grief, even if the ASB that Sarah (case study 2) engaged with was particularly extensive (graffiti).

This is possibly influenced by the mention of the recent pandemic, as society is still recovering and may sympathise more due to personal relation to Sarah's grief and presumed emotional instability at the time of the ASB engagement. Moreover, it was mentioned that Sarah was a volunteer in her community, which may have elicited trust in

participants that she was actively engaged in bettering her community, not actively aiming to harm it. The consistent presence of consideration, empathy, and understanding taken by participants and their justification of such is something that could be integrated into intervention implementation and design.

This participant response was particularly intriguing as they refer to Sarah's mentioned past criminal record. The participant states that Sarah 'hasn't done anything wrong in a long time [so] a little warning' is enough, indicating that if Sarah had committed an offence recently, then this would have influenced the severity of the intervention suggested or extent of sympathy provided by this participant. This provides insight into how personalisation of interventions involving consideration of the personal struggles of ASB engagers may lead to lenience rather than intervention. Yet, it is contended that this may not be such an issue and may be necessary to deplete the association between governmental intervention and social control, behavioural control, and lack of sympathy for its citizens.

Contrariwise, one participant stated that Sarah 'should be arrested for ASB and possibly released with a fine or community service'. This participant's response was particularly contradictory to this theme of empathy and support, however, was not a prevalent one. It does infer that individuals may believe that more 'extreme' forms of ASB should result in individuals being detained. Yet, literature deems that aggressive punitive measures used for ASB exaggerate the behaviour severity and fail to address the root causes (66), such as housing issues, mental health, poverty, and substance misuse (67). Therefore, confounding perceptions such as these may require further education on ASB, rather than being used to influence intervention design/implementation.

Theme 7.

There is an inclination toward the importance of community collaboration with its community members and law enforcement/mental health professionals, collective responsibility, and engagement with interventions where individuals need support. This not only applies to the discussed topic of community policing as an intervention, but also applies to the community responsibility required to make effective change in ASB and

attitudes towards ASB that propel its prevalence.

There was a common inclination towards community effort in problem solving, coming to resolutions between the engager and the affected with a community member present to monitor the situation. If the issue or behaviour persists, then intervention from local councils or law enforcement should ensue, such as CPNs and civil injunctions. Participants inferred the introduction of a new step before governmental intervention: community intervention. Such approaches may save governmental time and financial resources, yet mainly deescalate cases of ASB where punitive measures may escalate them, aligning with literature that states punitive measures exacerbate the extremity of ASB, negatively influencing frequency of behaviour (24,66).

Theme 8.

With participants expressing disagreement with some of the ASB defined examples provided, with DIY being mentioned fourteen times as surprising, it may be inferred that ASB needs to be better defined in the UK. This applies to the previously discussed public inference of social control by ASB interventions, relating to the couple who were given an ASBO for loud sexual relations and arrested for breaching the intervention (68). Public perceptions towards the less severe forms of ASB indicate that these examples should not be intervened punitively at all.

This further infers a need for multiple levels of ASB interventions to be introduced, to avoid, what is perceived as, severe interventions being allocated to what individuals may deem a usual nuisance in life rather than behaviour that is on the edge of criminality. To further elaborate this point, some participants saw Sarah's ASB (case study 2) of graffiti criminals, due to the blurred line between vandalism and criminal damage. There are differing extremities in ASB definitions and official examples which need to be reviewed or considered through involving differing levels of interventions.

Theme 9.

This response was not a sympathetic one considering that Sam's mental health condition, anxiety disorder, was mentioned, with specific mention anxiety about leaving their home. The disregard of Sam's mental health when considering intervention aligns with literature that states how mental health is often failed to be recognised as a disability due to stigma (58). This result was predicted, however, was not consistent with every participant result, as participants also inferred that focus should be on the disabled neighbour's needs not being met for their visual impairment, such as allocation of a support assistance dog.

Moreover, participants confounded that dog bags should be readily available to the public in publicly accessible dispensers, seemingly relating to the issue of forgetting dog bags as Sam did, with participants stating that Sam was not the only member of society to forget things. This furthers the need for personalisation and community intervention for consideration of personal struggles and represents how a community may consider how the neighbour requires better support outside of the ASB case issue.

The PECBR model of ASB intervention design considerations.

After thematically analysing participant responses, common opinions, suggestions, critiques, and themes were collated and developed to create the following model, aligning with the literature discussed.

The themes used to create the PECBR model were chosen through reading each individual response to the study and noting which opinions were prevalent throughout, recording the number of times profound opinions and suggestions were present through a tallying system. Researcher discernment was used to group and apply said insights to create the following model of considerations.

PECBR: an ethical framework to guide the design of ASB interventions.

| |
|---|
| Prevent: proactive preventative measures for ASB, including access to mental health services, housing support, education, and active inquiries. |
| Personalisation: interventions are personalised to individual circumstance, needs, and evaluation case to case. |
| Empathy: understanding engagers and the affected of ASB, considering extraneous variables in case evaluation (disabilities, housing, employment, school life), and personal challenges. |
| Education: encouraging access to education of ASB on its consequences, impacts (social labelling, individual impact), and what constitutes as acceptable behaviour, to address misinformation. |
| Collaboration: collaborative efforts between stakeholders, community engagers, law enforcement, mental health professionals, social services, youth justice, housing association, educational institutions, and so on. |
| Consideration: consider the deployment methods of ASB interventions when delivering to vulnerable populations and minorities (language barriers, age, disability etc) to ensure inclusion and accessibility to services. |
| Community: encourage active collective responsibility, community support, social cohesion, equality, and consideration when engaging communities with interventions. |
| Balance: balance the deployment of punitive measures (CPWs, CPNs, Civil Injunctions, ABCs, fines, court sentences) with individual support, fair treatment, empathy, understanding, personalisation, and consideration. |
| Responsibility: hold individuals accountable for their behaviour, encouraging responsabilisation in communities and the public service sector, both for themselves and for their community members. |

PECBR model, Rachel Hill (Updated 2025).

The model describes the considerations that researchers should take when designing, creating, and implementing ASB interventions to improve ASB, support, efficiency, and understanding. The participants in this study generally criticised the current interventions as lacking personalisation, community engagement, consideration of thorough individual inquiry, and distrust in the interventions and deployment of said interventions.

Regarding personalisation, this discussion does acknowledge that with the influx of ASB reports, it is a great task to infer each individual case of ASB gets its own personalised intervention. Yet, with the introduction of technological interventions and voluntary community interventions, or even the discussion of such, may prove impactful to both engagers of ASB and those affected.

Participants noted that depending on the case, the punitive measures used in ASB interventions, such as fines or civil injunctions, were often too harsh for the engagement of ASB, and only temporarily addressed the surface-level issues. This model identifies how researchers should consider how to involve the community, inquire into personal difficulties, ensure fair treatment, inclusion and consideration of vulnerable individuals, maintain individual and collaborative responsibility, and encourage social cohesion when designing and deploying ASB interventions.

Discussion.

Within the research component of this study, participants were presented with hypothetical scenarios of ASB, with details on the engagers and individuals affected by the outlined ASB. This was integral to this research, as it tested whether respondents would sympathise with the engagers or the affected depending on the details provided, which was visible in the consistent lack of sympathy toward the older couple affected by Robert's ASB in case study 1, which was unexpected due to prevalent prejudice toward young people and the prejudiced association with ASB (ASBO kids), meaning the first prediction of this study was not met. The second prediction was that participants would sympathise with Sarah's case study due to mention of the individual losing her brother to covid-19, inferring struggle with grief. This prediction was met, as responses outlined that Sarah should be sympathised with and provided with grief support rather than given

punitive measures.

The third prediction related to participants not sympathising with Sam's case study, where they forgot to clean up their dog's mess with which their disabled neighbour kept stepping in. This prediction was partially replicated by participants, with one stating that Sam was not responsible enough to own a dog, and another disregarding the relevance of Sam's anxiety entirely, as predicted. However, participants also stated that Sam's intervention should be minor due to the lack of intent in the ASB, and focus should be on providing the neighbour with a support assistance dog or further disability support.

Research that discusses the influence of the situational characteristics of crime upon public opinion of such, as the circumstances with which a crime is committed has noticeable impact on jury decision-making regarding sentencing of individuals found guilty (24), may be applied to explain these results. For instance, the research found that an opportunistic robbery, one that was decided upon due to sudden opportunity, was treated less severely compared to one that was pre-meditated and planned precariously, providing ample evidence for influence of case study details upon public perceptions. Hence, Sarah's graffiti being detailed as a tribute to her brother may have lessened severity in participant responses. Though, the applied study used secondary observational research conducted in Tasmania and Victoria, inferring less applicability and generalisability to this discussion which focuses on ASB in the UK.

Yet, as the research was observational, the situations and interactions recorded were not a result of manipulation to variables in case studies described, therefore increasing research value, as data was not manipulated, only observed in natural environments. The research, however, outlines criminal case studies, not ASB case studies. By involving this research in this discussion, crime is unintentionally directly associated with ASB, propelling the previously outlined blurred line between ASB and crime. Yet, ASB will naturally be associated with the discussion of crime due to black and white thinking patterns surrounding a person's behaviour: there is either bad behaviour, or there is good behaviour. Why there must be simplified, distinct categories in what is bad and what is good behaviour is another discussion. Both crime and ASB are recognised as

unacceptable behaviour in society, or bad behaviour, so the effect of situational variables upon perceptions of individual intentions in this literature study remains applicable to this research in its influence.

The decision to include a hypothetical case study's age, gender or reference to mental health or the recent pandemic (Covid-19) was intended to test whether case study variables triggered or influenced harsher or more lenient suggestions of intervention provided by participants, keeping the scenarios relevant and generalisable. This may have been better tested using the same case study repeated, once before more in depth information was provided on ASB and once after. However, to encourage participant engagement and improvement of knowledge on ASB and its applications to everyday life, the inclusion of three different hypothetical ASB scenarios is supported.

The descriptive research design combined the collection of both quantitative and qualitative data, which was the chosen design as it is useful for trend analysis and for creating initial databases for new research to be developed upon in future intended research (69). A drawback to this design was a lack of comparison group to compare against, such as a participant group that was not presented with any information on ASB or definitions, before or after case studies, therefore overstepping of data representation can occur, as they are not comparatively tested, only independently (70).

Hence, the data collated from this study could have overstepping issues in representation and deduced inferences, such as associations between age and opinion/proposed ASB interventions for the case studies. This may be rectified by further research outside of this discussion, using the described research design and expanding the study by adding a comparison participant group to further test the results attained in this study.

Due to the utilisation of the researcher's broadest accessible community, Swansea University, many students participated in the study. 34.5% of participants gained in this study were higher education students. The presence of higher education graduates in the sample is unknown, however, presumed, due to 65.5% of the sample being aged 23-33 and the recent rise in higher education students.

In 2021/2022, there were 2.86 million enrolled university students across the UK, with a

new record of 767,000 UCAS applicants in 2022 (71). In comparison, there were 1.9 million enrolled university students in the UK in 2000/2001 (72). Despite many respondents being in higher education or presumed to be graduated, this does not limit the sample's generalisability or representation of the general public too much.

Due to the increase in university students in recent years in England and Wales, there has been a subsequent expansion in the number of individuals entering higher education, making university student samples more generalisable to newer generations. Higher education students often meet a diverse range of people from different backgrounds, ethnicities, and countries. With this comes an expansion of the world view, and their understanding of societal changes, politics, diversity, and influence upon surrounding communities.

Thus, higher education student samples provide valuable data. Contrariwise, the broader perceptions of higher education students produced will not be applicable to individuals who do not have the same experiences. If this presumption rings true, generalisability of the data and insights is impacted. However, expanding research to improve education of higher education students/graduate knowledge of ASB could create a domino effect because of this negative effect, whereby higher education students influence social group perceptions and knowledge on ASB also.

One fault of the online survey would be that respondents who were employed were not asked whether they were employed in relevant sectors (governmental, council, police) who may have outstanding knowledge in ASB, influencing their responses given. Types of employment roles were not included in exclusionary variables in the study due to the lack of time and need for as many participants as possible to increase statistical power of the study. Despite this being a weakness to one of this research's variables, it protects another.

Additionally, participant responses may have been altered due to participant effects, where individuals may complete questions and participating duties based on what they believe the experimenter requires or what they believe would be socially acceptable to choose or comment (61). The anonymity aspect of this survey would have aided in reducing this, as well as the lack of present physical experimenter or information about experimenters other than email addresses being withheld reducing this chance also.

However, participant effects may have remained.

As well as participant effects, it should be noted that responses collated may have been influenced by personal experiences. To measure whether this was a possible effect, the question 'has ASB ever personally affected you?' was included, to see if the participants may have differing opinions to other individuals due to past experiences. It was noticeable that participants frequently experienced ASB instances involving young people, with mention of a fear and discomfort around groups of young people, which could infer possible bias against young individuals. Moreover, participants mentioned instances of ASB which instead pertained to sexual harassment or abuse, presenting the minimisation of issues experienced and lack of understanding of ASB.

It is acknowledged that as the study topic, ASB, itself is highly multifaceted, it is difficult to ensure analysis and associations represent the general public's opinion despite the participant answers being affected by countless factors such as life experiences, demographics, opportunity, gender, location and so on. However, this was attempted to address some influential factors within the time scale and research method of choice: online forms collating minimal demographic information about participants.

Regarding the survey design, one user reported an issue with layout on their phone when attempting to complete the survey, as they could not find the 'submit' button. They had accessed the survey link which had been shared through an Instagram story 'link' feature, this issue was not existent when tested, and was not a reoccurring issue (to the researcher's knowledge), however this may be down to Instagram updates, or lack thereof, differing phone to phone. It is noted that online surveys developed on laptops can sometimes be presented differently to users when accessed through other technology, such as phones, android or iOS, or tablets, therefore despite testing beforehand on both laptop and phone (iOS and android), this issue may have still arisen.

However, the survey design itself was strong due to visual impairment being considered as green and shades of green/white are colour palettes that are more easily distinguishable to colour blind individuals (73). Yet, individuals with more severe visual disabilities were not supported in the design which did not have audio features built in. Therefore, if this research is replicated for expansion of future research, more

considerations of accessibility within the survey design should be enacted when replicating.

There was a criticism made when posting this online survey, the presumption that there would be a less varied audience reached when advertising the survey through social media and online purposes, with the presumption that older age groups of participants would not be aware of the survey let alone access it efficiently. Yet, this presumption is now an outdated one, as literature retorts that after the recent covid-19 pandemic, access to technology has increased drastically in older age groups due to technology reliance, such as facetime, applications, phones, tablets, computers, becoming a necessity to connect with the outside world amidst restrictions (74).

Moreover, in attempt to reach a wider audience, age wise, an email advertising the online study was circulated in some of Swansea University's academic departments, students and lecturers, with which after there was an increase in older aged participants (55-75) submitting responses (time-stamped survey responses), with 11 respondents being aged 34 and above.

Alternatively, as the survey ran for one week, there were limited participants collected. Though 58 were gathered, this research could be better expanded upon. With smaller research samples comes less statistical power of research, representation, and applicability (75). As the research was collecting both qualitative and quantitative data, the responses were not statistically analysed, therefore a statistical power was not procured, which may have better represented the power of the research. Nevertheless, for this study, the variance of participants demographically was not overly biased, however over 65% of participants belonged to the 23-33 age group, so age group variance of participants could have been more equally represented in a larger sample.

Regarding the safety of data collated and protected from participants, to decrease risk no information pertaining to participant location, contact information, or names were requested nor provided. The online form itself was made to be encrypted, with data submitted only being accessed by the researcher/author of this study, with this access being password protected to access the account, and code protected to access the raw data submitted. The researcher/author was the only individual exposed to said raw data, with supervisors only being exposed to data once analysed and presented in a

graphical format. Regarding the ethical nature of this study, ethical consent was attained before the study went live and presented to individuals, being labelled a low-risk study by the Swansea University ethics board.

Design implications for interventions.

As discussed, there have been literary criticisms, and now participant criticisms, of the current ASB interventions in the UK. The interventions require a new perspective and approach, which could utilise the insights from the designed PECBR model for considerations in design. As participants inferred surprise at the varying extremity of ASB examples, for instance DIY versus graffiti, it may be argued that multiple interventions relating to the severity of the ASB should be produced.

This may involve a colour coded scoring system, with differing levels of intervention provided based on the allocated scoring. Scoring systems do involve possible issues with labelling and prejudice, particularly with certain geographical areas over others. However, with sufficient training in such issues, the colour coding system of interventions may be used appropriately to allocate the correct level of punitive intervention depending on the ASB, the individual, and the circumstance. Incorporating technological interventions alongside current developing interventions simultaneously, to be applied to ASB based on extremity and improve intervention efficacy and consideration.

Technological intervention suggestions.

Online intervention for the spread of misinformation on ASB.

The introduction of a technological intervention for ASB has yet to be broached in accessed research. However, there has been a research study on the introduction of digital interventions for online pro-social behaviour (43). Within this study, researchers tested the use of flagging misleading information on online platforms, finding it was particularly effective, with other scholars stating that labelling information as 'disputed' reduces the chance of consumers sharing that content online (43, 76).

The scholars stated that the effectiveness of this intervention on anti-social behaviour

decreases when the flagging notifications are presented after individuals open the link, however this effect may be decreased if the intervention is deployed before the individual reads the media link.

This intervention may be effective in preventing, what was existent in the participants of this study, the belief that ASBOs are the current ASB intervention. This issue remains harmful to ASB intervention as it propels the use of labelling young people as 'ASBO kids', seen in recent media articles (77), alongside the continued use of 'ASBO' pertaining to ASB intervention discussion (78), and information sites such as 'Problem Neighbours' discussing 'ASB and children' with various public comments blaming 'the youths' for local ASB (79). This enforces issues of miscommunication whereby ASBOs are believed to remain operating by the general public, where individuals may not know to search whether this is correct or not.

Flagging such articles before individuals are exposed to the media may decrease chances of reading misinformation yet does not prohibit the public's access to the article, allowing freedom of choice. Such systems are in place regarding misinformation in platforms such as twitter, so the adjustment of these interventions is realistic. However, this may cause political and social issues pertaining to perceptions of ASB interventions and government intentions, due to the discussed view of the government attempting excessive control, as discussed before, so this intervention may require further development and consideration.

Community volunteers for local online forums.

Involving community volunteers directly in flagging misinformation and ASB labelling on local forums may quell this issue. Relating to the previously discussed community policing initiatives, a voluntary team may monitor local news and online forums to ensure that misinformation and online labelling relating to ASB does not ensue, such as local Facebook pages and discussion boards. Not only would this intervention avoid financial burden upon local councils due to voluntary reliance, it also involves the community directly, increasing effectiveness through personalisation and peer trust. For instance, local volunteers are more likely to be aware of community members with

disability or personal challenges than individuals outside the community, so they may intervene more appropriately with consideration of such. The intervention may also be more agreeable to public opinion as participants of this study stated community was necessary to consider, aligning with the PECBR model.

Digital CPN and civil injunction notices.

Digital CPN and civil injunction notices may save local councils and the government resources (financial cost, time cost) through a paper-free initiative, aiding environmental causes also. Having online, digital notices means that CPNs and civil injunction orders may be sent in bulk, in timed emails, increasing organisation and decreasing workload. Digital notices may address the discussed issue of falsely recorded addresses, a lack of received letters, or removal of letters.

To implement the intended effect for young ASB engagers where parents or guardians may find the letter first, email notifications of ASB may be sent to parents or guardians. Yet, this approach has the same possible consequence as the letter notification, with a lack of knowledge on the young individual's situation at home, such as abuse or neglect, which may be exacerbated by notifications sent to abusers. Though this issue may not be as relevant to consider with older individuals, aligning this intervention with individual inquiry may be valuable.

The digital intervention may further be dependent on individuals recording online contact details or having done so when they are reported for ASB, which may not be as applicable for individuals with accessibility issues to the internet, online forums, and technology, such as individuals with disability, individuals experiencing poverty, or personal choice against online platform usage.

Digital training for ASB engagers.

Digital training for ASB engagers may be developed as a less punitive consequence of

ASB. These courses may be given as a choice when initial ASB interventions, such as CPNs and civil injunctions, are breached: to complete a course or proceed with the original consequence. The training may teach individuals about the impact of ASB on individual lives, the interventions implemented to avoid ASB, and the support available to both the engager and the affected.

Similarly, speed awareness courses may be outlined. These training courses could prevent further ASB engagement and possible criminal activity development. Literature infers that speed awareness courses are effective, particularly due to the time that individuals need to commit to the training, the dangers outlined in speeding, and the cost outweighing the benefit for individuals attending the course (80). Further literature states drivers were more than four times likely to disagree with speeding being safe after the course (81).

A learning course would align with the participant perceptions in this study, as participants stated that Robert, case study 1, needed to be taught about the effects of his behaviour, and what it would mean if he continued it. The responses also stated at points that all three case studies required less punitive interventions, which would be addressed through ASB training courses.

A technological dashboard for ASB information.

Another technological intervention could be an online dashboard that collates all information on ASB including, but not limited to, definitions, interventions, support, contacts, reporting systems, and an area for submitting public opinion on ASB interventions, experiences, and initiatives.

Originally, it was planned to develop and involve an interactive dashboard to provide said definitions and examples of ASB to participants, rather than text examples, and test the effect of introducing this dashboard upon participant perceptions of ASB. Due to limitations of time, this was not enacted, and participants were presented with a text study instead, yet the design implications for a technological dashboard will be outlined for further research.

The information dashboard would be interactive, collating definitions of ASB, interventions, and integrated ASB report sections so the public can make reports to address the 93.1% of participants who stated that they were unsure as to how to make an ASB report, with some stating that they did not know they could. Moreover, participants presented a low amount of knowledge on ASB, with participants using technical ASB terms more in case study responses 2&3 after being presented with ASB information compared to case study 1, and 27.5% of participants stated that their knowledge of information improved 'a lot' since exposure to information. Thus, supporting the relevance for a technological information dashboard.

It is noted that there are multiple web pages online on ASB, yet they are all separate and with various updates such as the CPNs taking over the ASBOs as leading intervention, with this possibly complicating the informative delivery. Providing clarity on ASB is particularly imperative to develop as ASB information is often miscommunicated due to presumptions or confusion with ASB being criminal, seen in this study's respondents who stated confusion between ASB example extremity and criminality.

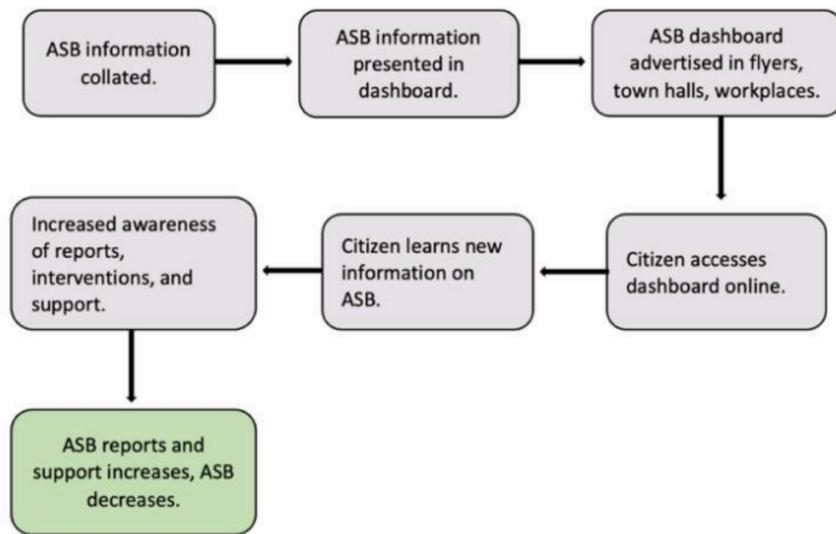
Literature discusses that in order to create better delivery of information to the general public, the way the content is created affects the extent of impact made (82), with the importance of consistency playing a role in effectiveness of delivery. The literature discusses how the government delivered intervention to the Covid-19 pandemic, and whether thorough transparency of the creation and implementation of the interventions may have better delivery. Transparency, consistency, and clarity can instill public trust in the government and implement interventions (83, 84).

In the case of ASB technological interventions, this may be achieved through advertising one virtual space for ASB information, intervention design, data, support, contacts, and reporting systems. Thus, the delivery of the dashboard is important to consider in order to ensure that public trust with the government and knowledge on implemented initiatives improves rather than remain stagnant.

The dashboard would need to consider disability in its design, such as visual impairments including colour-blindness (colour palettes) (73), or reduced sight (including audial interaction), visual subtitles to any videos for hearing impairments, language for learning difficulties including dyslexia, and mental impairments.

The importance of considering disability in design relates to accessibility assurance for the wider population, ensuring no demographic fails to access the information due to lack of consideration of disability, recognising the importance of equity, empathy, and ethical consideration of design (85). Nonetheless, there may be issues with access to an online dashboard, as general successful access relies on the presumption that every user will have access to Wi-Fi, at home technology, or publicly accessed technology (libraries, schools, work), and the ability to access such technologies, which does conjecture accessibility issues.

As mentioned, despite intention, due to time constraints and the need to gather participants quickly, the development of the dashboard was decided against, for now. This research paper intends to provide relevance for the development of this dashboard by Swansea Council and researchers in the coming years as this project expands. The theorised effect of the dashboard is presented in the following diagram.



Future applications

This research has begun the groundwork for understanding the implications for future ASB technological interventions and how they can be developed effectively, with a newly gained understanding of public opinion, across various age groups, on ASB, interventions, and their applications.

This research has delved into public perspectives to elicit future research into developing and personalising technological interventions, including misinformation and community flagging systems, digital CPN and civil injunction notifications and informational online dashboards, which stands independent amidst surrounding literature. Further research should be enacted to analyse community engagement in ASB intervention and development, and whether, similarly with New York's BOV, the community could intervene successfully with ASB to reduce frequency and increase support and understanding.

Further study into developing technological interventions could investigate inclusion of online support (counselling, therapy, contact) and online training courses for ASB engagers is supported by this study.

It is also notable that in order to create any effective interventions, bettering data collection techniques is required also. This may be achieved through introducing an online data collection system that categorises data through a data algorithm, as data collection of ASB reports is reported to be inconsistent with some being on file (paper copies; computer files), meaning data is lost, damaged, or forgotten (86).

As this is not an intervention that affects the public directly, but improves data handling of governments, this is simply mentioned in this discussion, intended for discussion

Conclusion.

To surmise, this research has procured newfound understanding of the UK's public perceptions toward ASB cases, procuring suggestions for improved personalisation of approaches and the lack of consistent knowledge on ASB and its definitions. Gained understanding was applied to infer design implications such as disability awareness, inclusion, ethical consideration, community engagement, delivery, for technological interventions including misinformation and labelling community detection, digital CPN and injunction notices, ASB training courses, and informational dashboards.

The research and discussion represent the value in creating new lines of communication between the public and government on ASB for the development and deployment of ASB interventions in the UK, but also for enhancing society's quality of life, social cohesion, and trust between the community and government initiatives.

In order to understand how to help the community with ASB, the community must be directly involved in design and implementation. Through utilising public opinion and models like PECBR, designing personalised technological interventions may be the turning point in addressing ASB.

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