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## FROM SILENCE TO SAFE REPORTING: DESIGNING A TRUST-CENTRED DIGITAL SUPPORT PATHWAY FOR ADOLESCENTS IN UZBEKISTAN

### Abstract

Violence against children is widespread in Uzbekistan, yet children rarely report it themselves. Nearly two-thirds of children aged 1–14 experience violent discipline, while only 44 of 1,064 complaints received by the Children's Ombudsperson in 2024 were submitted by children. Although national law recognizes a child's right to report violence directly and the 2026–2030 Strategy provides for a state data-sharing platform, there is no practical, child-facing route connecting the two. Using a qualitative multiple-case study, this paper compares digital and AI-supported child-protection tools in Central Asia, Europe and the United States. Four conditions are examined: anonymity, freedom from surveillance, credibility and routing to a person able to act. The analysis identifies the functions and safeguards required for a digital reporting channel in Uzbekistan and proposes a phased pilot. The study does not establish that such a channel would reduce violence; that question requires empirical testing.

**Keywords:** violence against children, child protection, Uzbekistan, digital reporting, anonymity.

## ОТ МОЛЧАНИЯ К БЕЗОПАСНОМУ ОБРАЩЕНИЮ: РАЗРАБОТКА ЦИФРОВОГО МАРШРУТА ПОДДЕРЖКИ ДЛЯ ПОДРОСТКОВ В УЗБЕКИСТАНЕ, ОСНОВАННОГО НА ДОВЕРИИ

### Аннотация

Несмотря на широкое распространение насилия в отношении детей в Узбекистане, самостоятельные обращения детей остаются редкими. Почти две трети детей 1–14 лет сталкиваются с насильственными методами воспитания, однако в 2024 году только 44 из 1 064 жалоб детскому омбудсмену поступили непосредственно от детей. Закон закрепляет право ребёнка на прямое обращение, а Стратегия на 2026–2030 годы предусматривает электронную платформу обмена данными, но практический канал между ними отсутствует. На основе качественного сравнительного анализа цифровых инструментов защиты детей в Центральной Азии, Европе и США статья рассматривает анонимность, защиту от наблюдения, доверие и перенаправление обращения специалисту. Определяются необходимые функции и гарантии безопасности и предлагается поэтапный пилотный проект. Исследование не доказывает, что такой канал снизит уровень насилия: для этого необходима отдельная эмпирическая оценка.

**Ключевые слова:** насилие в отношении детей, защита детей, Узбекистан, цифровое обращение, анонимность.

## SUKUTDAN XAVFSIZ MUROJAAT QILISHGACHA: O'ZBEKISTONDAGI O'SMIRLAR UCHUN ISHONCHGA ASOSLANGAN RAQAMLI QO'LLAB-QUVVATLASH YO'LAGINI LOYIHALASH

### Annotatsiya

O'zbekistonda bolalarga nisbatan zo'ravonlik keng tarqalgan bo'lsa-da, bolalarning o'zlari mustaqil murojaat qilishi juda kam uchraydi. 1–14 yoshdagi bolalarning deyarli uchdan ikki qismi zo'ravon tarbiya usullariga duch keladi, biroq 2024-yilda Bolalar ombudsmaniga kelib tushgan 1064 ta shikoyatdan faqat 44 tasi bevosita bolalar tomonidan berilgan. Milliy qonunchilik bolaga zo'ravonlik haqida mustaqil murojaat qilish huquqini beradi, 2026–2030-yillarga mo'ljallangan strategiya esa davlat idoralari o'rtasida ma'lumot almashish platformasini nazarda tutadi. Biroq ushbu huquqni amalda qo'llash imkonini beradigan, bolalarga mo'ljallangan raqamli kanal mavjud emas. Maqolada Markaziy Osiyo, Yevropa va AQShdagi raqamli himoya vositalari sifatli qiyosiy keys-stadi usulida tahlil qilinadi. Tahlil anonimlik, kuzatuvdan himoyalani, ishonchlilik va murojaatni yordam bera oladigan mutaxassisga yo'naltirish shartlariga asoslanadi. O'zbekiston uchun zarur funksiyalar va xavfsizlik kafolatlari belgilab berilib, bosqichma-bosqich pilot loyiha taklif etiladi. Bunday kanal zo'ravonlikni kamaytirishini mazkur tadqiqot isbotlamaydi; buning uchun alohida empirik baholash zarur.

**Kalit so'zlar:** bolalarga nisbatan zo'ravonlik, bolalarni himoya qilish, O'zbekiston, raqamli murojaat, anonimlik.

### Introduction

Child-protection systems depend on harm becoming known to someone able to act. In many cases, the child is the only person who knows what is happening, so the way a child can communicate that knowledge is central to protection. In Uzbekistan, violence includes physical and psychological abuse, sexual abuse, neglect, exploitation and bullying, while much of it remains hidden. Around 62% of children aged 1–14 experience violent discipline, yet only

44 of 1,064 complaints reaching the Children's Ombudsperson in 2024 were filed by children (UNICEF Uzbekistan, n.d.; Gazeta.uz, 2025). The UN Committee on the Rights of the Child has also described violence as underreported and socially invisible and noted the absence of a dedicated hotline for child victims (UN CRC, 2022).

Article 5 of the 2024 Law on the Protection of Children from All Forms of Violence grants children a right

to report directly. The 2026–2030 Strategy also provides for a unified electronic platform for agencies to exchange information about children needing protection and alleged perpetrators. These reforms strengthen the response after a case becomes known, but do not create a practical route through which a child can initiate contact safely. Existing services largely depend on spoken contact with adults, which may be impossible for children living with the person causing harm.

This paper argues that the design of first contact affects whether children can disclose abuse. Whether a child can approach a service is governed by properties of the service itself, which this paper calls the disclosure architecture of a channel. It does not claim that digital technology itself prevents violence or replaces trained professionals. Instead, it identifies channel features documented in existing services and proposes a pilot that could test whether a child-facing route increases safe disclosure.

### Research questions

Central question: What kind of digital tool is needed in Uzbekistan to help children report violence safely and enable earlier detection?

SQ1. What is the scale of violence, how often do children report it themselves, what barriers prevent disclosure, and what do current arrangements offer?

SQ2. What do regional and international digital and AI-based tools demonstrate about preventing or responding to violence against children?

SQ3. Which functions and safeguards should a tool for Uzbekistan include?

Why children do not disclose: international evidence

Research indicates that children often attempt to tell someone but face barriers to complete disclosure. In interviews with 60 young people, Allnock and Miller (2013) found that 48 (80%) had attempted disclosure before age 18. Across 203 disclosures, 117 (58%) were acted upon; the remaining two in five were not. Barriers included the absence of a trusted person, manipulation by the perpetrator, shame—particularly in sexual-abuse cases—and fear that confidentiality would not be respected. A 2024 scoping review similarly found that self-reported abuse remains substantially higher than official figures (McPherson et al., 2024).

Anonymity can make online help-seeking feel safer. In a survey of 1,308 young people, 80% said internet anonymity influenced their decision to seek help online (Pretorius et al., 2019). Yet anonymity alone is insufficient: 82.95% pointed to a recognised health-service logo and 54.97% to endorsement by a school as markers of credibility, while 55.96% said uncertainty about reliability had deterred them. A channel therefore needs both privacy and visible evidence that it connects to real assistance.

Written contact can reach children who cannot speak privately. Goodman et al. (2023), analyzing 41,561 contacts to a US sexual-assault hotline, found that the youth share of contacts rose from 41% to 56.5% during the first year of the pandemic and that text-based contact grew while telephone contact did not. The share of young people living with the person who assaulted them also rose, from 59.3% to 73.3%. This suggests that written channels may serve children for whom a call could be overheard.

Digital tools require caution. Scripted mental-health chatbots such as Woebot (Fitzpatrick et al., 2017) and Wysa (Inkster et al., 2018) have been studied in limited contexts, but neither was designed for child protection. Evidence about scripted systems cannot establish how a generative chatbot will respond to a child describing abuse, although 19.2% of US respondents aged 12 to 21 already report using AI chatbots for mental-health advice (McBain et al., 2026). General Comment No. 25 on children's rights in the digital environment also warns that mandatory identity verification and mass surveillance may interfere with privacy (UN CRC, 2021). Direct reporting by children is, moreover, structurally underserved: of 258 child-abuse-related applications identified in the app stores between 2014 and 2023, 17 allowed a concern to be reported and only six were designed for children themselves (Carlick & May-Chahal, 2025).

### Violence against children in Uzbekistan

Available data indicate both prevalence and barriers to seeking help. Around 62% of children aged 1–14 experienced violent discipline; approximately one in four experienced bullying at school. In an October 2024 survey of 1,879 young people aged 14–30, 17.6% said they would contact police if violence occurred, 3.8% named the 1146 helpline, 11.4% would tell no one because the issue was internal to the family, and 16.2% did not know where to turn. A further 35.9% declined to answer. Among respondents aged 14–17, 32.4% could name no source of help. Because the survey was conducted through a Telegram bot and participants could not be individually verified, its results indicate trends rather than a statistically representative national estimate (Institute for the Development of Social Protection & UNICEF, 2024).

Social expectations help explain this silence. The Uzbek concept of *uyat*—shame—can discourage disclosure (Karabay et al., 2024), particularly where sexual violence is concerned and victims fear blame (Equality Now, 2021). Research on digital parenting in Uzbekistan describes hierarchical family structures, the normalisation of physical discipline and limited opportunities for children to express their views (Loblay et al., 2025). The mahalla has a dual role: it can connect families with social support, but as a close-knit community it may not offer the confidentiality a child needs. International recommendations call for mahalla representatives to identify violence and refer cases, while also cautioning against reconciliation practices that treat domestic violence as a private matter (UN CRC, 2022; CEDAW, 2015).

A reporting channel cannot reach every child who is being harmed. Some children may not recognize familiar punishment as violence; others may know where to seek help but fear exposure or doubt that anyone will act. These barriers are distinct and require complementary responses: accessible reporting, awareness-raising and reliable follow-up.

What current reforms provide – and what is missing

The 2024 Law recognizes physical, sexual and psychological violence, neglect, exploitation and bullying. It permits direct applications to state bodies and organizations and recognizes information from individuals, the internet and social networks as possible triggers for protective measures. It also requires a free, confidential, 24-hour hotline. The 2026–2030 Strategy commissions a

unified electronic platform for exchanging information among relevant agencies.

The platform, as described in the Strategy, is primarily a repository and information-sharing mechanism. It does not itself provide a child-facing point of entry for cases not yet reported. Current options—including 1146, emergency numbers 102 and 112, and Inson social-service centers—mainly depend on synchronous spoken contact or adult intermediaries. Thus, the legal right to report directly lacks a practical digital route. This gap is notable given internet penetration of 89.0% (Kemp, 2025) and Telegram's reported reach of some 76% of internet users in Uzbekistan (UzDaily, 2025).

#### Methodology and analytical framework

This is a qualitative, comparative study based on documentary evidence. Since Uzbekistan does not yet operate a child-facing digital reporting service, there are no local users or outcomes to evaluate. The study therefore examines documented services developed elsewhere and compares their design features. Cases were included if the service had operated at a documented point, its access and design were described in an independent source or clearly identified institutional documentation, and it used digital channels relevant to Uzbekistan's context.

Four conditions structure the analysis; together they describe the disclosure architecture of a channel, that is, the properties that determine what it costs a child to make contact. (1) Anonymity: how much identifying information a child must disclose to make contact. (2) Freedom from surveillance: whether a child can seek help without family members or others discovering the contact. (3) Credibility: whether the child can reasonably trust that the service is genuine and connected to assistance. (4) Routing: whether the report reaches a trained person able to assess urgency and take action. The framework concerns first contact, not whether a disclosure is subsequently believed or acted upon.

Five services were selected for different reasons. Say Something provides the strongest experimental evidence for anonymous, student-initiated reporting. Childline illustrates a long-running service across telephone and digital channels. Sophia is an anonymous messaging-based service available in several languages, including Russian, in Moldova. U-Report demonstrates the reach of a messaging channel already used to survey young people in Uzbekistan, although it is not a reporting-and-referral service. The 1146 helpline represents the existing Uzbek service against which a new channel would need to be assessed. Evidence is uneven: one service has been tested in a randomized trial, another is discussed in a systematic review, and some report mainly their own operational figures.

#### Technology for detection and reporting

AI systems are increasingly used to detect abuse through institutional monitoring, online content analysis, victim identification and risk prediction. For example, a programme in Kazakhstan used AI-analyzed cameras to flag an assault on a child in a medical-social institution (Elorda Info, 2025). Other initiatives seek to identify online abuse or help investigators prioritise cases (Bilyalova, 2025; Kolbasin, 2025; Clarke, 2026; UNICRI, 2020), and models

attempt to predict which children are at risk (Alkhatabi et al., 2023). Such systems may detect harm without requiring a child to disclose, but they operate from the institution's perspective: the child is not necessarily involved and may not know monitoring is taking place.

Detection systems also inherit limits from their data. Gu et al. (2026) report a model identifying intimate-partner-violence risk before victims sought help, but people who never disclose are underrepresented in the data. A system trained on existing reports may therefore be least informative about those who remain silent. Child-initiated reporting serves a different function: it creates a route through which a child can voluntarily share information and reach a person able to respond.

#### Comparative cases

Say Something enables students in participating US schools to submit anonymous written reports of threats or harm. A trained counsellor triages reports and routes them to relevant personnel. More than 60% of US states operate such systems (CDC, 2025). A cluster-randomized trial in 19 middle schools found increased confidence and intention to report, improved perceptions of school safety and lower reported exposure to violence, although the findings may not generalize beyond the study setting and the second cohort was affected by the pandemic (Hsieh et al., 2022; Hsieh & Heinze, 2023).

Childline demonstrates that child-initiated support can be sustained over decades and adapted from telephone to digital contact. Systematic evidence mapping found that children's helplines can support wellbeing, confidence and coping, while online chat may offer greater privacy than a telephone call (Stoilova et al., 2019; Gill & Elliot, 2022).

Sophia, developed by Spring ACT, is an anonymous service accessible through Telegram, WhatsApp and Viber. It stores information in a separate secure vault and has been deployed in Moldova in Romanian, Ukrainian and Russian. Its access design is relevant, but it was built for adults, lacks child-specific safeguarding, and its outcomes have not been independently established (Spring ACT, 2025). That absence is not peculiar to Sophia: the World Health Organization attributes the scarcity of outcome research on such services to "the difficulty of evaluating programmes for which anonymity of the help-seeker is central" (WHO, 2022). Its generative chatbot should not be treated as evidence that generative AI is safe for child-protection intake.

U-Report is a UNICEF polling platform rather than a reporting-and-referral service. Its relevance is practical: Uzbekistan has already used a Telegram-based channel to reach young people at national scale, including in a survey about violence. This shows that a familiar messaging channel can support outreach but does not establish that young people would use it to report abuse.

The 1146 helpline provides a route to support, but spoken, synchronous contact may be difficult when a child lacks privacy. The comparison does not imply that digital reporting should replace telephone services. Rather, multiple routes are needed because children's circumstances differ.

Table 1. Comparison of five services

| Service | Anonymity | Freedom from surveillance | Credibility | Routing | Child-facing evidence / |
|---------|-----------|---------------------------|-------------|---------|-------------------------|
|---------|-----------|---------------------------|-------------|---------|-------------------------|

|                     |         |            |            |         |                                 |
|---------------------|---------|------------|------------|---------|---------------------------------|
| Say Something (US)  | Met     | Partly met | Met        | Met     | Yes; randomized trial           |
| Childline (UK)      | Met     | Partly met | Met        | Met     | Yes; systematic review          |
| Sophia (Spring ACT) | Met     | Met        | Partly met | Met     | No; self-published evidence     |
| U-Report (UNICEF)   | Met     | Partly met | Met        | Not met | Partly; self-published evidence |
| 1146 (Uzbekistan)   | Not met | Not met    | Partly met | Met     | Yes; no evaluation identified   |

The comparison suggests that each condition is met by at least one service, but no reviewed service meets all four conditions for children in Uzbekistan's context. The closest examples are not directly transferable: Say Something is school-based and US-specific, Childline is a national institution elsewhere, and Sophia was designed for adults. Uzbekistan therefore needs a context-specific combination of established functions rather than simple adoption of a single model.

#### Discussion: alternative explanations

The low level of child-initiated reporting may have more than one explanation. An awareness explanation points to young people who do not know where to seek help: 16.2% of survey respondents did not know where to turn, and 32.4% of those aged 14–17 could name no source. This supports clearer information and education. A normalization explanation holds that some children and adults do not recognize physical punishment as violence; only 42% of survey respondents considered physical punishment unacceptable in all circumstances. This points to work on attitudes and understanding of children's rights.

A third explanation is perceived futility: children may believe reporting will not help. In Allnock and Miller's study, two in five disclosures did not receive a response. This points to improvements in the response system, not merely a new reporting interface. The present document-based study cannot determine the relative causal importance of these explanations. They may affect different children and can coexist. A digital channel primarily addresses the cost and risk of making first contact; education can address lack of awareness, while service capacity and follow-up address doubts about whether reporting helps.

#### Functions required for a channel in Uzbekistan

The comparative evidence supports six core requirements: anonymous first contact; written and asynchronous communication controlled by the child; visible institutional backing; rapid routing to a trained person; operation through a platform children already use; and plain-language information about what constitutes violence and what protections the law provides. These functions already exist separately in the reviewed services. The design challenge is to combine them with child-specific safeguards and reliable local referral arrangements.

#### A phased pilot design

Stage 1: launch a rule-based Telegram service for anonymous written intake and referral. Telegram is proposed because it is familiar to young people and was used by the state for the 2024 youth survey. The service would not counsel, diagnose or interpret a child's account.

It would use predictable, pre-approved prompts to collect only necessary information and pass a report to an appropriate route, such as 1146, a call center or a designated specialist at an Inson center. A rule-based design avoids introducing a generative model into a safety-critical first contact before its behavior has been validated.

Stage 2: develop an integrated platform with educational materials, videos and campaigns explaining violence and legal protections. A conversational element could allow children to describe their situation, while a machine-learning layer might flag acute risk in information the child voluntarily submits. A specialist—not the model—would assess the case and decide the response. The platform could connect the National Agency for Social Protection, 1146, call centers and Inson centers, while maintaining aggregate statistics to improve monitoring.

Stage 3: integrate child-originated reports into the unified electronic platform and extend connections to the ministries and agencies named in Decree UP-256. The evidence reviewed here supports testing anonymous intake and referral first; it does not establish that an AI analytical layer will work as intended. That component requires separate validation for accuracy, bias, escalation and safety.

#### Safeguards and implementation

Anonymity and mandatory reporting can conflict. A specialist cannot arrange direct protection if they do not know where the child is, while professionals may have a duty to report serious violence. The channel should therefore be anonymous by default and explain, before disclosure, that direct intervention may require the child to share their location. The child should retain control over whether to provide identifying details, with the limits of confidentiality explained in plain language. The service should make clear that the aim is to prevent people in the child's household from learning that contact was made, while not promising absolute secrecy where action is required to protect the child.

Privacy must be built into the channel. The design should minimize data collection and retention, avoid notifications by default, explain how messages and device settings can affect privacy, and avoid requiring installation of a separate application if a familiar messaging channel can be used safely. Access controls, secure storage, limited staff permissions and documented deletion rules are necessary. The service should collect no more information than needed for the purpose, consistent with the principles in General Comment No. 25 and the relevant national law.

A reporting service is only useful if receiving services can respond. A pilot should define referral partners,

responsibility for triage, response-time expectations, escalation procedures and arrangements for cases outside working hours. Rollout should be staged against the capacity of 1146, call centers and Inson centers. If reports increase

beyond available capacity, the channel could create expectations that the system cannot meet. Staff need training in child-sensitive communication, risk assessment, confidentiality and referral.

Table 2. Principal risks and mitigations

| Risk                                               | Mitigation                                                                                                                 |
|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| A household member discovers contact               | Messaging-native access; no notifications by default; clear guidance on device privacy and deletion.                       |
| Anonymity prevents intervention                    | Explain from first contact that action may require the child to share location; seek details with the child as risk rises. |
| Mandatory reporting conflicts with confidentiality | Explain limits before disclosure; trained staff decide how to respond in each case.                                        |
| Report volume exceeds capacity                     | Stage the rollout; agree referral partners and monitor response times from the outset.                                     |
| Children do not trust the service                  | Visible endorsement by a recognised public institution and clear explanations of what happens next.                        |
| Service ends when funding stops                    | Place it within the National Agency for Social Protection with a defined budget and platform link.                         |

### Policy implications

The Strategy's unified platform is an opportunity to include child-originated reports from the outset. A service housed within the National Agency for Social Protection, connected to the platform and referral services, would have an institutional owner and a budget line. This is preferable to a temporary project operating separately from the public protection system. However, institutional integration should not mean that every child's report becomes broadly visible: role-based access and data minimization are essential.

Two conditions should guide implementation. First, assign a clear institutional owner and sustainable funding. Second, link the pace of expansion to the capacity of services receiving reports. The pilot should involve adolescents in its design and testing, because the rights framework requires children's participation in services intended for them. The current study did not consult children, so its specification should not be treated as a finished design.

### Conclusion

Uzbekistan has recognized children's right to report violence directly and has commissioned infrastructure for agencies to share information, but it lacks a practical channel connecting a child's knowledge of harm to the formal protection system. The low proportion of child-initiated complaints and the survey findings on uncertainty, silence and non-response indicate that first contact remains

a major challenge. Existing spoken services may be inaccessible when children cannot speak privately or fear that adults in their household will discover the disclosure.

A review of documented services identifies four conditions for a child-facing channel: anonymity, freedom from surveillance, credibility and routing to a trained person. No reviewed service combines all four in a model directly transferable to Uzbekistan. A phased approach is therefore proposed: first, a rule-based anonymous written intake and referral service on a familiar messaging platform; second, an integrated platform with education and carefully validated risk flagging; and third, connection with the national electronic platform. Human specialists should retain responsibility for decisions and interventions.

The study does not demonstrate that a digital channel will reduce violence or increase disclosure in Uzbekistan. It provides a design specification grounded in documented services and identifies what a pilot should test: whether children can access it safely, understand its limits, trust it, and receive timely help. The pilot should be co-designed with children, independently evaluated and expanded only when referral services can respond. Digital reporting is one part of a broader response that must also address awareness, social norms, confidentiality and the quality of follow-up. The difference between a case known at the time and a case known years later is the difference between harm that is interrupted and harm that has already run its course.

### REFERENCES

1. Alkhatabi, F., Alhuthil, R., & Al Khatib, H. (2023). Applications of artificial intelligence in predicting the risk of child abuse: A literature review. *International Journal of Pediatrics and Adolescent Medicine*, 10(1), 1–6. [https://doi.org/10.4103/ijpam.ijpam\\_5\\_23](https://doi.org/10.4103/ijpam.ijpam_5_23)
2. Allnock, D., & Miller, P. (2013). No one noticed, no one heard: A study of disclosures of childhood abuse. NSPCC.
3. Bilyalova, Yu. M. (2025). Iskusstvennyy intellekt v profilaktike kiberbullinga i drugikh form onlayn-agressii sredi nesovershennoletnikh [Artificial intelligence in preventing cyberbullying and other forms of online aggression among minors].
4. Carlick, S., & May-Chahal, C. (2025). Children's access to child protection social work through mobile apps. *The British Journal of Social Work*. <https://doi.org/10.1093/bjsw/bcaf274>
5. Centers for Disease Control and Prevention. (2025). Preventing violence using technology: Anonymous reporting systems. <https://www.cdc.gov/firearm-violence/php/research-summaries/technology.html>

6. Clarke, A. (2026, April 13). Met considering using AI to help online child sexual abuse cases. BBC News. <https://www.bbc.com/news/articles/c86evlqx102o>
7. Elorda Info. (2025, December 30). Il pomog vyavavit' fakt nasiliya nad rebenkom v psikhonevrologicheskom tsentre [AI helped detect a case of violence against a child in a psychoneurological centre].
8. Equality Now. (2021). A culture of shame: Sexual violence and access to justice in Uzbekistan.
9. Fitzpatrick, K. K., Darcy, A., & Vierhile, M. (2017). Delivering cognitive behavior therapy to young adults with symptoms of depression and anxiety using a fully automated conversational agent (Woebot): A randomized controlled trial. *JMIR Mental Health*, 4(2), e19. <https://doi.org/10.2196/mental.7785>
10. Gazeta.uz. (2025, March 26). Every fifth complaint to the children's ombudsperson concerns violence.
11. Gill, C., & Elliot, C. (2022). Enhancing Childline's counselling model: Early implementation experiences. NSPCC.
12. Goodman, K. L., Kamke, K., & Mullin, T. M. (2023). Online help-seeking among youth victims of sexual violence before and during COVID-19 (2016–2021): Analysis of hotline use trends. *JMIR Public Health and Surveillance*, 9, e44760. <https://doi.org/10.2196/44760>
13. Gu, J., Villalobos Carballo, K., Ma, Y., Bertsimas, D., & Khurana, B. (2026). Leveraging multimodal machine learning for early detection of intimate partner violence. *npj Women's Health*, 4, 15.
14. Hsieh, H.-F., & Heinze, J. (2023). Evaluating the effectiveness of the Say Something Anonymous Reporting System (Final research report, Award No. 2017-CK-BX-0002; NCJ 306552). U.S. Department of Justice, National Institute of Justice.
15. Hsieh, H.-F., Lee, D. B., Zimmerman, M. A., Pomerantz, N., Cunningham, M. C., Messman, E., Stoddard, S. A., Grodzinski, A. R., & Heinze, J. E. (2022). The effectiveness of the Say-Something Anonymous Reporting System in preventing school violence: A cluster randomized control trial in 19 middle schools. *Journal of School Violence*, 21(4), 413–428. <https://doi.org/10.1080/15388220.2022.2105858>
16. Inkster, B., Sarda, S., & Subramanian, V. (2018). An empathy-driven, conversational artificial intelligence agent (Wysa) for digital mental well-being: Real-world data evaluation mixed-methods study. *JMIR mHealth and uHealth*, 6(11), e12106. <https://doi.org/10.2196/12106>
17. Institute for the Development of Social Protection under the National Agency for Social Protection, & UNICEF. (2024). Otnoshenie molodezhi k nasiliyu nad det'mi [Youth attitudes toward violence against children]: Information-analytical brief.
18. Karabay, A., Akhmetova, S., & Durrani, N. (2024). Lessons learned from the experiences of domestic violence service providers in times of crisis: Insights from a Central Asian country. *International Journal of Environmental Research and Public Health*, 21(10), 1326. <https://doi.org/10.3390/ijerph21101326>
19. Kemp, S. (2025, March 3). Digital 2025: Uzbekistan. DataReportal. <https://datareportal.com/reports/digital-2025-uzbekistan>
20. Kolbasin, V. V. (2025). Primenenie tekhnologiy iskusstvennogo intellekta v bor'be s seksual'nym nasiliem v otnoshenii nesovershennoletnikh [The application of artificial intelligence technologies in combating sexual violence against minors]. *Obshchestvo i Pravo*.
21. Loblay, V., Khan, Q., Hickie, I. B., Ekambareshwar, M., Song, Y. J. C., Tosheva, D., & LaMonica, H. M. (2025). Developing a conceptual framework for cultural adaptation of digital parenting interventions: A mixed-method grounded theory study from Uzbekistan. *SSM – Mental Health*. <https://doi.org/10.1016/j.ssmmh.2025.100556>
22. McBain, R. K., Cantor, J. H., Breslau, J., Diliberti, M., Zhang, L. A., Zhang, F., Burnett, A., Kofner, A., Rader, B., Pataranutaporn, P., Stein, B. D., Mehrotra, A., & Yu, H. (2026). AI chatbot use and disclosure for mental health among US adolescents and young adults. *JAMA Pediatrics*.
23. McPherson, L., Gatwiri, K., Graham, A., Rotumah, D., Hand, K., Modderman, C., Chubb, J., & James, S. (2024). What helps children and young people to disclose their experience of sexual abuse and what gets in the way? A systematic scoping review. *Child & Youth Care Forum*, 54, 515–544. <https://doi.org/10.1007/s10566-024-09825-5>
24. Pretorius, C., Chambers, D., Cowan, B., & Coyle, D. (2019). Young people seeking help online for mental health: Cross-sectional survey study. *JMIR Mental Health*, 6(8), e13524. <https://doi.org/10.2196/13524>
25. Republic of Uzbekistan. (2024). Law on the protection of children from all forms of violence (No. O'RQ-996, adopted 14 November 2024; in force 15 May 2025). <https://lex.uz/en/docs/7219508>
26. Republic of Uzbekistan. (2025). Strategy for the protection of children from all forms of violence, 2026–2030, approved by Presidential Decree No. UP-256 of 24 December 2025. <https://lex.uz/docs/7938812>
27. Spring ACT. (2025). Sophia chatbot. <https://springact.org/sophia-chatbot/>
28. Stoilova, M., Livingstone, S., & Donovan, S. (2019). Outcomes and effectiveness of children's helplines: A systematic evidence mapping. NSPCC.
29. Tian, T., Katz, I., & Shang, X. (2024). Unveiling child sexual abuse disclosure in China: An ecological exploration of survivors' experiences. *Children*, 11(6), 688. <https://doi.org/10.3390/children11060688>
30. UNICEF Uzbekistan. (n.d.). Ending all forms of violence against girls and boys. <https://www.unicef.org/uzbekistan/en/ending-all-forms-violence-against-girls-and-boys>
31. United Nations Committee on the Elimination of Discrimination against Women. (2015). Concluding observations on the fifth periodic report of Uzbekistan (CEDAW/C/UZB/CO/5).
32. United Nations Committee on the Rights of the Child. (2021). General comment No. 25 on children's rights in relation to the digital environment (CRC/C/GC/25).

- 
33. United Nations Committee on the Rights of the Child. (2022). Concluding observations on the fifth periodic report of Uzbekistan (CRC/C/UZB/CO/5).
  34. United Nations Interregional Crime and Justice Research Institute. (2020). AI for Safer Children.
  35. UzDaily. (2025, October 22). Telegram — 76% reach, YouTube — no. 1, e-commerce on the rise: Inside Uzbekistan’s digital landscape.
  36. World Health Organization. (2022). What works to prevent online violence against children? WHO Violence Prevention Unit.

*Annexes in the source article: Annex A, full comparison of child- and survivor-initiated services; Annex B, sources of the four analytical conditions.*