

NATIONAL SOCIAL WORK MODEL FOR WORKING WITH CHILDREN WITH DEVIANT BEHAVIOR IN THE CONDITIONS OF UZBEKISTAN: THEORETICAL- METHODOLOGICAL FOUNDATIONS AND PILOT RESULTS

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Abstract. The article analyzes the theoretical, legal and institutional foundations for shaping a national social work model for working with children with deviant behavior in the conditions of Uzbekistan. The aim of the study is to scientifically substantiate a child- and family-centered model that unites prevention, early intervention, rehabilitation and monitoring within a single case-management system. Within a mixed-methods framework, the study draws on content analysis of normative-legal documents and scientific sources, a comparative study of international experience, a questionnaire survey (n=550), in-depth interviews (n=80), and the results of pilot monitoring carried out in five territorial units. The analysis showed the need to strengthen inter-agency information exchange, early identification, family services and outcome-evaluation mechanisms within the current system. The proposed model is based on coordinated cooperation among "child–family–school–mahalla–Inson Center–territorial agencies." Pilot indicators show a downward trend in deviant behavior and school truancy cases, alongside an upward trend in help-seeking for psychological support, parental involvement, social activity and academic performance. The scientific novelty of the article lies in proposing a four-stage model that integrates national institutions with modern social work technologies, together with evaluation indicators and implementation mechanisms.

Keywords: deviant behavior, child, social work, case management, prevention, early intervention, rehabilitation, mahalla, "Inson" center, monitoring.

INTRODUCTION. Deviation from social norms in the behavior of children and adolescents is not merely an individual-psychological problem, but a complex sociological phenomenon linked to the relationships among the family, education, the peer environment, the mahalla, the digital information space and child-protection institutions. Failure to identify deviant behavior at an early stage increases the risk of school disengagement, aggression, delinquency, addiction to harmful habits and social isolation. For this reason, modern social work relies not on

punishment or a one-time warning, but on assessing needs and risks, supporting the family, drawing up an individual plan and continuously monitoring outcomes [9; 13; 14]. In Uzbekistan, the normative base for protecting children's rights has developed considerably in recent years. The Law "On Guarantees of the Rights of the Child" establishes the basic principles of state protection of the rights and legitimate interests of the child [2]. The Law "On Prevention of Neglect and Juvenile Delinquency" regulates the powers and cooperation of the subjects of prevention [3]. The Law "On Protection of Children from All Forms of Violence," adopted in 2024, and the national strategy for 2026–2030 further systematized protective measures [4; 7].

Pursuant to Presidential Decree No. PF–82 of 1 June 2023, the establishment of the National Agency for Social Protection and the "Inson" social service centers in districts and cities created an institutional foundation for developing professional social services at the mahalla level [5]. UNICEF assessments indicate positive changes in child protection and the strengthening of integrated social services in Uzbekistan, while also pointing to the need for further development of the capacity of professional social service workers and inter-service coordination [10; 11]. The urgency of the problem lies in the fact that, in the current system, the activities of education, internal affairs, healthcare, the mahalla, the "Inson" center and non-governmental organizations are often carried out in parallel. As a result, risk factors are identified late, children and families undergo repeated assessments, continuity of services is disrupted, and there are no unified criteria for measuring outcomes. This article proposes a national model aimed at filling this institutional gap.

RESEARCH AIM, QUESTIONS AND SCIENTIFIC NOVELTY. The aim of the study is to develop a national social work model — corresponding to the legal, cultural and institutional conditions of Uzbekistan — that unites the stages of prevention, intervention, rehabilitation and monitoring in working with children with deviant behavior, and to assess its practical potential.

Research questions: 1) What are the main institutional and methodological limitations of the current system? 2) Which elements of international approaches can be adapted to national conditions? 3) What components should a case-management model oriented toward the needs of the child and family consist of? 4) What conclusions do the pilot monitoring results allow regarding the model's practical potential?

Research hypothesis: if, in working with children at risk of deviant behavior, early identification, family support, school and mahalla resources, professional case management and regular monitoring are integrated into a single system, indicators of behavioral risk will decrease, while the use of support services and indicators of social integration will increase.

The scientific novelty of the article consists of the following: first, a four-stage national model for working with children with deviant behavior in the conditions of Uzbekistan was

conceptually substantiated; second, case-management linkages among “child–family–school–mahalla–Inson center–territorial agencies” were developed; third, process, outcome and sustainability indicators for evaluating the model’s effectiveness were proposed; fourth, the principle of preserving the mahalla and family was integrated with international ecological and systemic approaches.

THEORETICAL-METHODOLOGICAL FOUNDATIONS AND LITERATURE REVIEW. In explaining deviant behavior, R. Merton’s strain (anomie) theory shows that a mismatch between socially prescribed goals and the legitimate means of achieving them can intensify behavioral deviations [16]. According to H. Becker’s labeling theory, attaching labels such as “problematic,” “difficult to raise” or “prone to crime” to a child reinforces secondary deviance [17]. For this reason, the national model must give priority to language and practice that are free of stigmatization and grounded in strengths. U. Bronfenbrenner’s ecological systems theory explains a child’s behavior through the interaction of the microsystem (family, school, peers), the mesosystem (the connections among these environments), the exosystem (the mahalla, services, parents’ working conditions) and the macrosystem (values, law, the economic environment) [15]. This approach makes it possible to assess deviant behavior not merely as a “defect” of the child, but as the result of inter-systemic incongruity.

In modern social work, the Risk–Need–Responsivity principle requires matching the intensity of intervention to the level of risk, attending to changeable criminogenic needs, and taking into account the individual characteristics and motivation of the child [19]. The strengths-based approach, in turn, envisions mobilizing not the problem but resources — family support, ability, school belonging, sport, art, professional interest and a positive peer network. UNICEF’s concept for strengthening child-protection systems views an effective legal framework, a professional social-work workforce, coordinated case management, a data system, financing and accountability as a single integrated system [12]. The INSPIRE strategies recommended by WHO and partner organizations also emphasize the need to harmonize parental support, a safe environment, education and life skills, law enforcement, and response services [13].

RESEARCH METHODOLOGY. The study was organized in a mixed-methods design. At the theoretical stage, a content analysis was conducted of Uzbekistan’s normative-legal documents on child protection, prevention of juvenile delinquency and social services, materials from UNICEF, WHO and UNODC, and the scientific literature on deviantology and social work. In the comparative analysis, elements of early intervention, restorative approaches, family preservation and community-based services in Scandinavian countries, the United States and European countries were studied. The empirical component drew on a questionnaire survey (n=550), in-depth interviews (n=80), and pilot monitoring data from five territorial units, conducted in 2023–2025. Survey respondents included social workers, psychologists, educators and parents. The sample was formed on a purposive-quota basis. Interviews were

conducted with representatives of social protection, education, the mahalla, state agencies and non-governmental organizations. Quantitative data were structured for processing using SPSS 26.0, and qualitative data using MAXQDA.

Table 1. Research design and data sources

Stage	Method	Coverage	Analytical task
Theoretical-legal	Content analysis	Laws, strategies, scientific sources	Identifying legal and conceptual foundations
Comparative	Analysis of international experience	Scandinavia, USA, Europe	Selecting adaptable practices
Quantitative	Questionnaire survey	n=550	Assessing problems, needs and the state of services
Qualitative	In-depth interview	n=80	Identifying institutional barriers and practical proposals
Pilot	Before–after monitoring	5 territorial units, 2024–2025	Descriptive evaluation of changes in model indicators

The study adopted the principles of the best interests of the child, confidentiality, do-no-harm, avoidance of stigmatization and data anonymization as methodological criteria. Prior to submission for publication, the exact names of the regions, the distribution by respondent group, the survey scales, the raw data, ethical consent, and a full account of the statistical tests must undergo final verification based on the author’s field documentation.

RESULTS. 1. Legal and institutional status of the current system. The analysis showed that the legal framework for ensuring children’s rights and safety in Uzbekistan has expanded considerably. The 2024 Law No. O’RQ–996 clearly defined forms of violence, the competent authorities, the application of protective measures and inter-agency cooperation [4]. A 2025 government resolution strengthened the procedure for notifying the “Inson” center and internal affairs bodies of cases of risk or violence, assessing the situation and organizing individual measures [8]. At the same time, normative capacities do not automatically translate into effective services in practice. Based on a content analysis of respondent and expert opinions,

the main problems were grouped as follows: a) duplication of inter-agency tasks; b) the absence of a unified assessment tool; c) the limited number of professional case managers; d) weak family-oriented services and systematic work with parents; e) insufficient digital information exchange and outcome indicators; f) weak practice of involving the child in the decision-making process.

Table 2. Problems in the current system and model solutions

Identified problem	Social consequence	Proposed solution
Late identification and reactive measures	Intervention only after the problem has deepened	Early-warning system at school and mahalla level
Inter-agency fragmentation	Repeated referrals and service interruption	Unified case conference led by the “Inson” center
Stigmatizing attitude toward the child	Secondary deviance and distrust	Strengths-based individual development plan
Family resources not taken into account	Repeated risk and slow rehabilitation	Family preservation and support for parenting competencies
Ambiguity of monitoring criteria	Difficulty in demonstrating effectiveness	Process, outcome and sustainability indicators

2. Structure of the national social work model. At the center of the proposed model are the child and his or her family. The model views the child not as a delinquent or a “problematic person,” but as a developing subject shaped by the interaction of risk and protective factors. The model consists of four interconnected stages: prevention, intervention, rehabilitation and monitoring. At each stage, tasks are clearly distributed among the school, the mahalla, the “Inson” center, healthcare, internal affairs, youth structures and NGOs.

Table 3. Stages, tools and expected outcomes of the national model

Stage	Main tools	Lead subject	Expected outcome
Prevention	EWS (early-warning system), psychological and social	School, mahalla	Early risk identification, prevention of new cases

Stage	Main tools	Lead subject	Expected outcome
	screening, life-skills training, parenting programs		
Intervention	Comprehensive assessment, individual development plan, case conference, referral	“Inson” center case manager	Continuity and needs-appropriateness of services
Rehabilitation	Psychological support, family counseling, return to education, mentoring, career guidance	Inter-agency team	Behavioral stabilization and social integration
Monitoring	Reassessment every 3 months, digital record, indicators and repeat risk analysis	“Inson” center and territorial group	Sustaining outcomes, reducing repeat deviance

3. Pilot monitoring results. Certain elements of the model were piloted in five territorial units in 2024–2025. A descriptive comparison of baseline and endline monitoring indicators showed that cases of deviant behavior decreased from 18.5% to 7.2%, and school truancy decreased from 12.3% to 4.1%. At the same time, help-seeking for psychological support, parental involvement, social activity and academic performance increased. These dynamics indicate the model’s practical potential; however, drawing a firm conclusion about causal effect would require a control group, raw data, confidence intervals and effect sizes.

Table 4. Before–after indicators of pilot monitoring

Indicator	Before, %	After, %	Difference, pp	Relative change
Cases of deviant behavior	18.5	7.2	-11.3	-61.1%
School truancy	12.3	4.1	-8.2	-66.7%
Help-seeking for psychological support	8.7	23.4	+14.7	+169.0%

Indicator	Before, %	After, %	Difference, pp	Relative change
Parental involvement	15.2	42.6	+27.4	+180.3%
Social activity	22.1	48.3	+26.2	+118.6%
Academic performance	45.6	62.8	+17.2	+37.7%

Source: calculated by the author based on the pilot monitoring data provided. The table is descriptive in nature; since raw data are not available, no claim to inferential statistical significance is made.

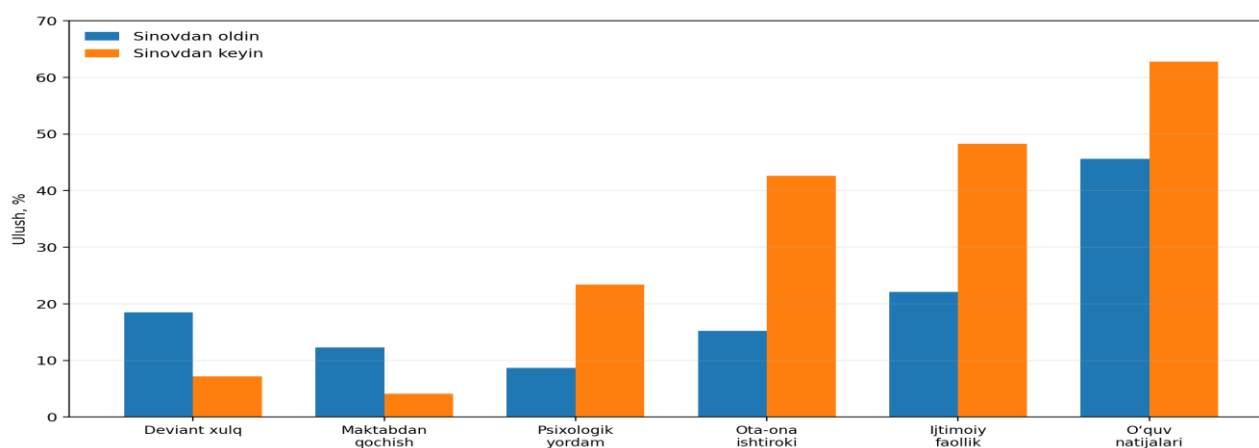


Figure 2. Comparison of pilot monitoring indicators

DISCUSSION. The results obtained show the importance of a coordinated system, rather than the independent measures of separate organizations, in working with children with deviant behavior. From the standpoint of the ecological approach, change in the child is not limited to individual counseling; factors within the family, school, peers, mahalla and service system must be changed simultaneously [15].

In the pilot results, the increase in help-seeking for psychological support is not negative; on the contrary, it can be interpreted as an indicator of the openness of support services and a reduction in stigma. The increase in parental involvement demonstrates the effectiveness of engaging the family as an active partner in rehabilitation, rather than as its object. This is consistent with the principles of family preservation and community-based services in international child-protection practice [12; 14].

A distinctive feature of the national model is that it combines the social capital of the mahalla institution with the professional service capacity of the “Inson” centers. The mahalla has the capacity for early risk detection, mobilizing social resources and supporting the family; the “Inson” center provides professional assessment, case management, referral to services and monitoring. However, confidentiality, ethical boundaries and professional guidelines must be strictly defined so that mahalla activists do not exert informal pressure on the child or breach confidentiality. A weakness of the model is that the pilot data presented do not include the names of the regions, the distribution of respondents, a control group, missing observations, the reliability of measurement instruments, or full statistics. For this reason, the results are assessed as conceptual and pilot evidence. In future research, it would be appropriate to apply a quasi-experimental design, propensity score matching, repeated-measures analysis, and inter-coder reliability for the qualitative interviews.

MECHANISM FOR PRACTICAL IMPLEMENTATION OF THE MODEL.

Implementation of the model should be organized step by step. At the first stage, the existing service map, specialist capacity and risk groups in the district or city are identified. At the second stage, a unified assessment form and referral algorithm are introduced for the school psychologist, social pedagogue, mahalla social worker, internal affairs inspector, and health and youth representatives. At the third stage, a case manager is assigned at the “Inson” center for every high-risk case, and a 30–90-day individual development plan is drawn up. At the fourth stage, outcomes are reassessed at 3, 6 and 12 months.

Table 5. Indicators for evaluating the model’s effectiveness

Indicator type	Key indicators	Measurement period
Process	Time to first assessment; number of case conferences; share of referrals to services	Monthly
Short-term outcome	School attendance; repeated disciplinary cases; participation in counseling; parental involvement	Every 3 months
Medium-term outcome	Deviant-behavior scale; psychological well-being; academic performance; peer relations	6 months
Sustainability	Repeat offending; dropping out of school; repeat family risk; social integration	12 months

Indicator type	Key indicators	Measurement period
System effectiveness	Inter-agency response time; continuity of services; user satisfaction; specialist caseload	Semi-annually

CONCLUSIONS AND RECOMMENDATIONS. The study showed the need to shift, in the conditions of Uzbekistan, from reactive control and punishment toward a preventive, family-oriented and evidence-based social work system for children with deviant behavior. Current legal reforms, the National Agency for Social Protection and the “Inson” centers create a real institutional foundation for implementing the national model. The proposed four-stage model unites early identification, individual case management, comprehensive rehabilitation and outcome monitoring within a single system. Its main strength lies in integrating the social resources of the mahalla and family with professional social-service technologies, turning the child into an active participant in the decision-making process, and establishing criteria for measuring outcomes.

Practical recommendations: 1) strengthen specialized case-management capacity for children at “Inson” centers; 2) approve a unified risk- and needs-assessment tool for schools, the mahalla and territorial services; 3) incorporate parenting-competency, mentoring, restorative-communication and life-skills programs into the territorial package; 4) create an inter-agency protocol defining the boundaries of confidentiality and information exchange; 5) evaluate the model through an expanded pilot study involving a control group; 6) introduce an open, anonymized annual monitoring report on outcomes. Thus, the national social work model can serve as a systemic mechanism aimed not at short-term suppression of the external manifestations of deviant behavior, but at reducing its social causes, strengthening the resources of the child and family, and ensuring sustainable social integration.

LIMITATIONS OF THE STUDY. The empirical data presented in the article are based on aggregated percentage indicators from the primary source. Because raw data, a detailed passport of the regions and the sample were not provided, reliability coefficients, standard errors, confidence intervals, and t-test or regression results have not been re-verified. For this reason, the pilot results were interpreted as a descriptive trend. Prior to final publication in the journal, the author must confirm all empirical claims using field data and ethical documentation.

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