

A Call to Action – A Unified Approach to Ending Violence

“Public Safety Programs to Address Violence Prevention at UTHSC”

*2026 Frank M. Norfleet Forum for the Advancement of Health
“Violence Prevention through a Public Safety Lens”*

Altha J. Stewart, MD
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FINANCIAL DISCLOSURE/CONFLICT OF INTEREST

Dr. Stewart is President of the American Association for Community Psychiatry, but the opinions expressed in her presentation today are her own and do not reflect the views or policies of the AACCP.

She is a board member of the Sozosei Foundation, a philanthropic organization of Otsuka Pharmaceutical but has no financial disclosures or conflicts of interest to report regarding the content in this presentation.



Program Philosophy:

*“Risk Factors
Are Not
Predictive Factors
Due To
Protective Factors”*

Speaker's recap from the day

Sequential Intercept Map (SIM) for Youth at Risk of/or Involved in Justice Systems in Memphis/Shelby County, TN

**[Post-SIM session programs developed by CYAW
and community partners – 2017-present]**

SC/YFRC

COMMUNITY

*CYAW-TN LEGIS/MRC
CYAW-DCS/PCAT-S
CYAW-TCCY/RRED
CYAW-SCG/YAC
CYAW-OJDP/GIFTS
CYAW-OJDP/IMPACT
CYAW-UCI/WRAPAROUND
FRAYSER
CYAW-UCI/ICCW
CYAW-AECF/PLAAY
CYAW SAMHSA/PLAAY
CYAW-KWFF/SOULSVILLE
HEALTH HUB
CYAW-TCCY/PLAAY
CYAW-GIRLS 901

CYAW and CYAW+partners
MSCS
SC Govt

SCHOOL-BASED BEHAVIORAL HEALTH CENTER

-Parent referral, school admin/teacher referral, school counselor referral

CYAW-DCS/PCAT-S
CYAW-MSCS/PROJECT AWARE

MSCS-CYAW/EVENING WELLNESS CTNRS
MSCS-AHS/SBBHL
MSCS/Project STAND

SCHOOL-BASED LAW ENFORCEMENT

Delinquent act committed in school setting
-Municipality – 40 hours of training for SRO (CIT-Y Memphis Model)

COMMUNITY LAW ENFORCEMENT

Delinquent act committed in community

*CYAW-PREV MED/ MVIP (MPD)

Dept. of Children's Services
-CPS hotline (routed through Nashville)
-Will get in touch with parent/guardian
-2 liaisons at Juvenile Court – try to keep child with family

MOBILE CRISIS
-Onsite assessment of care
LAKESIDE & ST. FRANCIS
-If medical necessity criteria are met (Lakeside for MH crisis)

*AHS CHILDREN'S CRISIS SERVICE

DETENTION INTAKE

DETENTION FACILITY

-135 beds, 60 staff
-Avg. Daily Pop less than 12 yrs.
-On Assessment Tool used to determine if detention is necessary – if criteria not met
-Detention hearing w/in 24 hours – hold or release?
-Medical/mental health services on-site – Columbia Suicide Screen used

LEAP PROGRAM

-Phone-in program serves as alternative to transport to detention

ISSUE SUMMONS

-Release to parent
-Delinquent behaviors
-Parent may be involved
-Recent JJ contact
-Avoid transport or detention.
-Reduced greatly kids going into system

WARN & RELEASE

NIGHT COURT

-Truancy and absenteeism
SHAPE
-7 misdemeanor charges
-80-82% success program
COMMUNITY SERVICE
-When needs are identified, referrals can be made if needs are outside scope of BH center

JUDICIAL PROCESSING

SHELBY COUNTY JUVENILE COURT

3rd oldest court in country (~200 employees; 1 judge, 12 magistrate)
DA Determines if Charges will be Filed (Judicial Track)
-File-Proceed with Judicial Hearing
-Notice of Transfer (to Adult Court)
Plea Deal with Public Defender
-Heard by Magistrate
Judicial Diversion
-Guilty plea (not entered in record)
-if successful, case dismissed

EVALUATION & REFERRAL UNIT (E+R)

Judicial Intake
-Administrative screen for probable cause
-Family meets with Juvenile Services Counselors (information gathering)
-Juvenile Court process described, rights explained
-YASI used for pre-screening (if score high); CRAFT substance use screen; CASI (to determine level of service appropriate); JIFF
-Always a focus on detention alternative
-Assign to counselor
-If parent requests services, referrals are made to community services
-If youth admits, case goes straight to probation (with attorney & magistrate approval)
Non-Judicial Intake
-CPSS trauma screening (if low on trauma use full YAS)
-Refer to community services as needed (set up first appointment, no follow-up)
Case Monitoring (During Court Process & Post-Adjudication)
-Can monitor adjudicated cases if necessary (ordered by court)
-Maintain contact with youth/families and service providers

Family Referral to Court
-No charges
-Walk-in

DIVERSION

Non-Judicial Diversion

-If child admits to charge, goes straight to probation (attorney) – signed by judge
-Graduated response grid
-Doesn't formally go to court
-May be referred to youth court, community service, warn & counsel, referrals out to other community agencies/services/supports, ceasefire program (to get out of detention)

Criminal Court (Adult)
-only most serious cases

Adjudicated Delinquent

No further action if determined that youth is NOT in need of rehabilitation

Sentencing Phase
-E+R provides info
-School records
-Parent input
-Design order that fits the needs of kid

DISPOSITION

Community Supervision

Secure Confinement

PROBATION

If in need of rehabilitation
-Auxiliary probation (low level)
-Intensive probation (staffed by Court)
-Services/restitution/community service may be ordered
YOUTH SERVICES BUREAU
CHILD PROTECTIVE BUREAU
EVALUATION & REFERRAL UNIT*

EVENING REPORTING CENTER

-Community-based alternative to detention for a youth under supervised probation who need additional supervision and a structured environment (during times they are most likely to recidivate)

Psychiatric Facility

Youth Development Center
-Most severe charges

Community Residential
-Less severe charges

Dept. of Children Services
-If in state system – need judicial review on regular basis
-Family meeting to determine needs + strengths (use CANS)
-Determinate – release 18 yrs old
-Indeterminate – state makes decision about release date

RE-ENTRY

CYAW-SAMHSA/SCN
CYAW-TCCY/UTHSC YOUTH REENTRY
CYAW-OJDP/SC YOUTH REENTRY

AFTERCARE
-DCS monitors for period
-most kids going home – home-based services offered
-After 90 days at home – custody is transferred back to family

Community-Based Behavioral Health Services

** ALL CYAW COMMUNITY PROGRAMS REMAIN AVAILABLE TO YOUTH @RISK OF JUSTICE INVOLVEMENT UPON COMMUNITY

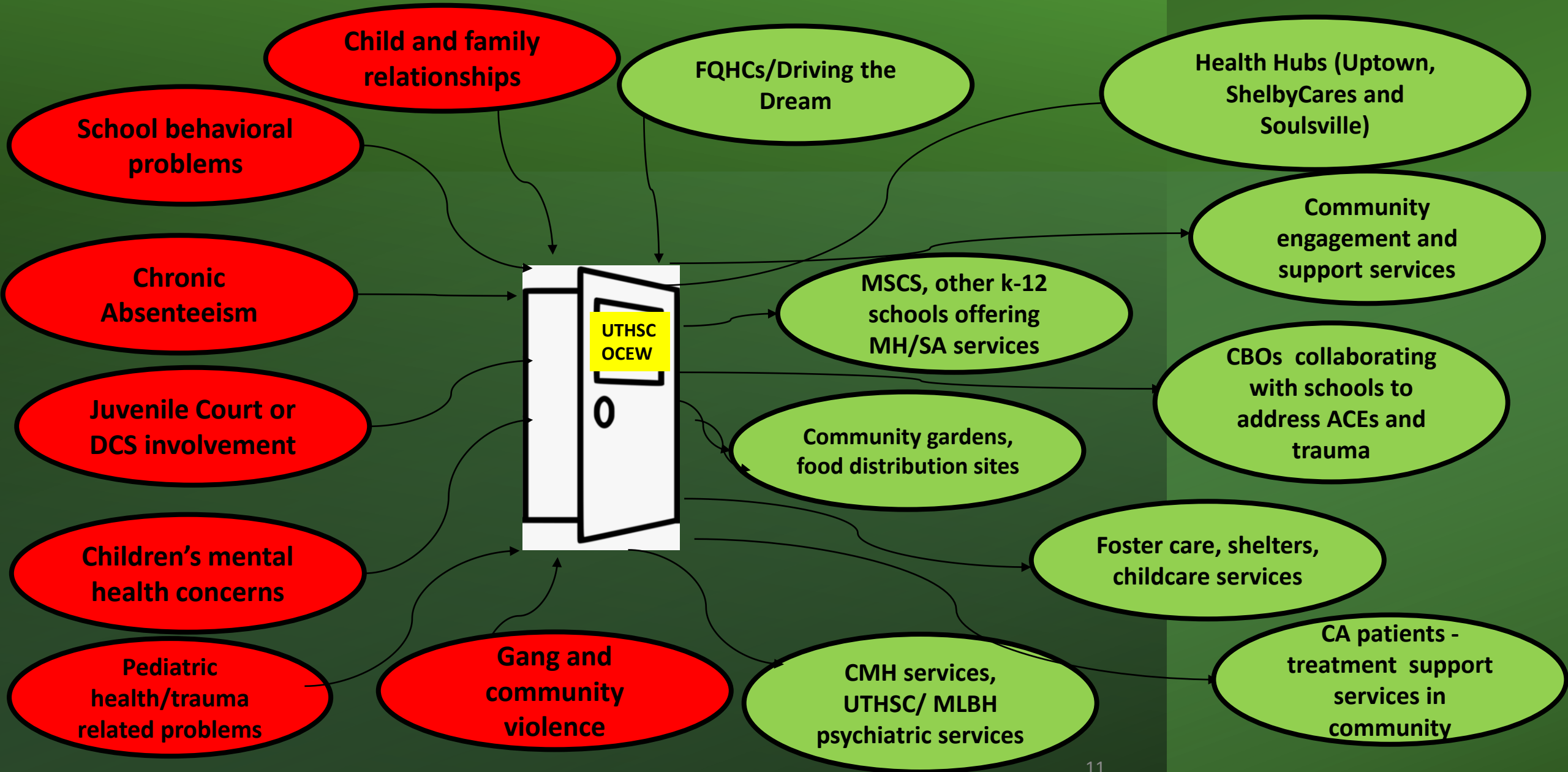


**Our Call to Action –
What Will UT Health Science Center
Contribute to the Effort to End
Violence in Memphis/Shelby County?**

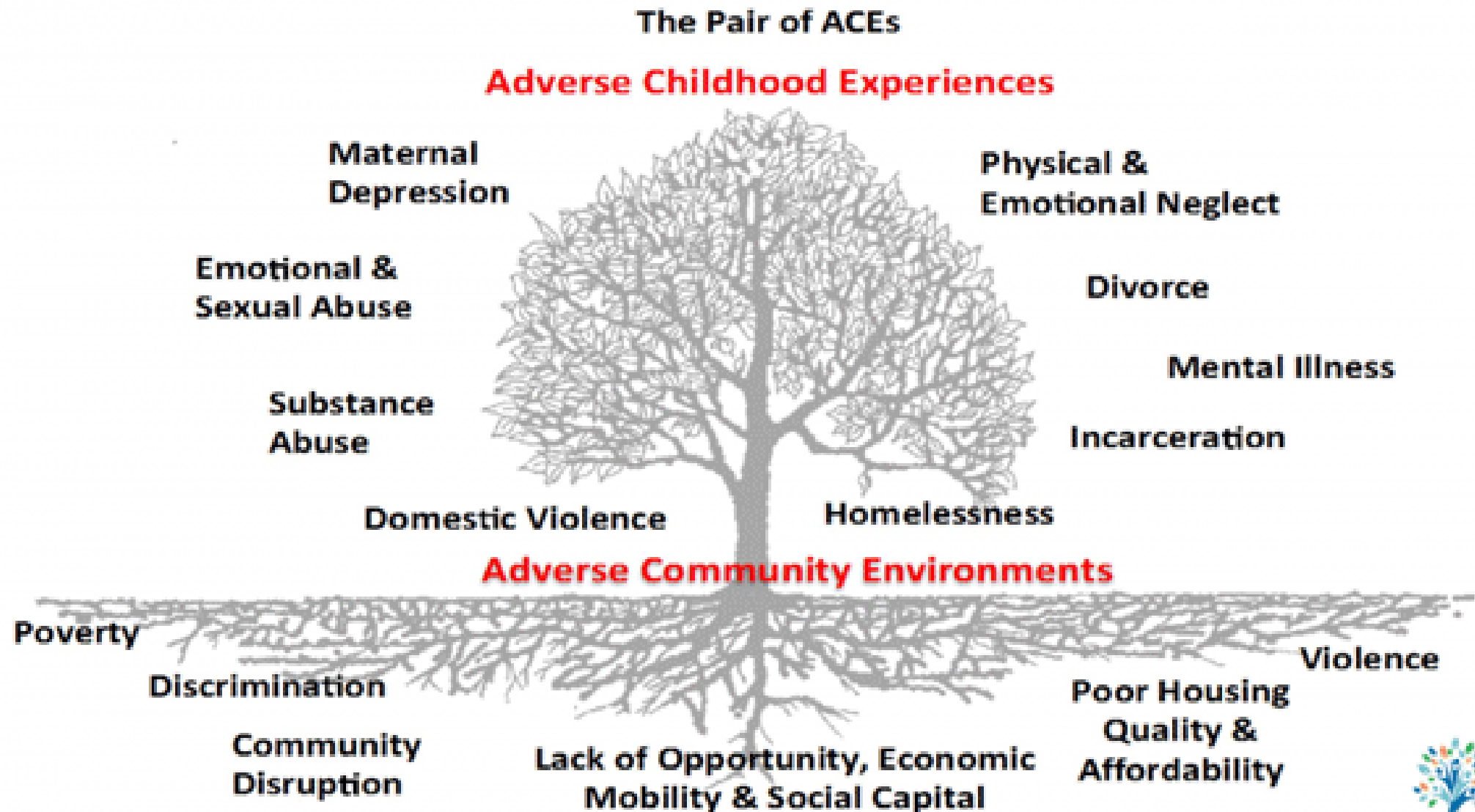
Participate in Planning

S	SPECIFIC	WHAT DO WE WANT TO HAVE HAPPEN?
M	MEASURABLE	HOW WILL WE KNOW WHEN IT IS COMPLETE?
A	ATTAINABLE	DO WE HAVE A PLAN TO COMPLETE IT?
R	RELEVANT	WHY IS IT WORTH OUR TIME?
T	TIMELY	WHEN WILL WE MAKE IT HAPPEN?

Create a System of Care (“Through Any Door”)

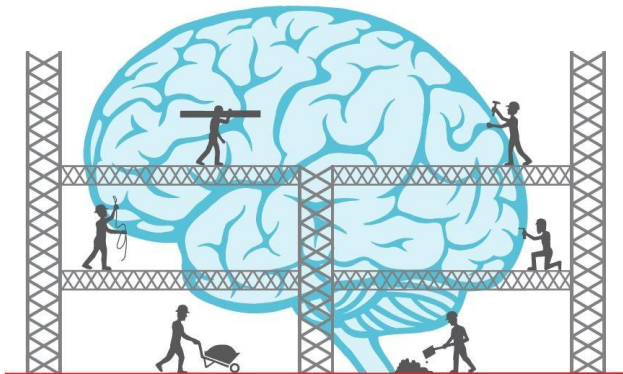


Understand the Role of ACEs



Move from ACEs to PCEs to HOPE

**BUILDING STRONG BRAINS
TENNESSEE**



**RESILIENT
TENNESSEE
COLLABORATIVE:**
Building Strong Brains



HOPE
HEALTHY OUTCOMES
FROM POSITIVE EXPERIENCES

HOPE

Healthy Outcomes from Positive Experiences

Building a Brighter Future for Youth

Positive Relationships



*Caring Connections
& Supportive Role Models*

Safe Environments



*Spaces Where Youth
Feel Secure & Valued*

Engagement & Opportunities



*Activities that Inspire
Growth & Learning*

Emotional Well-Being



Coping Skills & Resilience

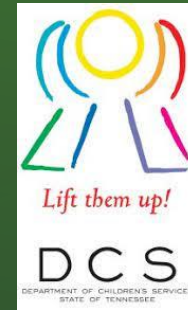
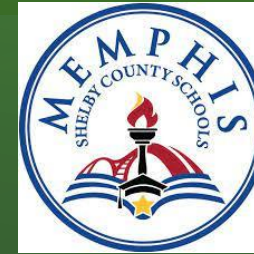
**HEALTHY
OUTCOMES**

Positive Experiences Create Positive Lives

STRENGTHEN UTHSC COLLABORATIONS

- **METHODIST/LE BONHEUR (HVIP)**
- **REGIONAL ONE (Traumatic injuries and psychological and physical sequelae)**
- **CITY OF MEMPHIS (MPD, CVIP)**
- **SHELBY COUNTY GOVERNMENT (COMMUNITY SERVICES, SCSO)**
- **ALLIANCE HEALTHCARE SERVICES (crisis services and various MH treatments)**

Commit to Community Partnerships





**"It always seems impossible
until it's done."**

- Nelson Mandela

Altha J. Stewart, M.D.

**Senior Associate Dean for
Community Health Engagement**

**Director, Office of Community Engagement
and Wellbeing**

**Founding Director, Center for Youth
Advocacy and Well-Being**

**Director, Division of Public
and Community Psychiatry**

UT Health Science Center

901-448-6600

astewa59@uthsc.edu

