

**2025 SUMMIT** 

September 15-17, 2025 New Orleans Cutting Out Stigma: Early Evidence of Feasibility, Acceptability, and Impact from a Barbershop-Based Stigma Reduction and Health Promotion Intervention in the Southern US

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### HIV Nationally and in Tennessee

### **National**

- Black Americans face the most severe burden of disease
  - 13% of US population
  - >40% new HIV infections
  - Lifetime HIV risk among Black MSM 1 in 3
  - Lifetime HIV risk among Black men 1 in 21
- Status quo approach may worsen racial inequities

#### Tennessee

- 20,200 people living with HIV
- Memphis (Shelby County) 2<sup>nd</sup> highest incidence in country
- Inequities by race mirror national picture
- Young Black mean least likely to engage in care



# Why Stigma?

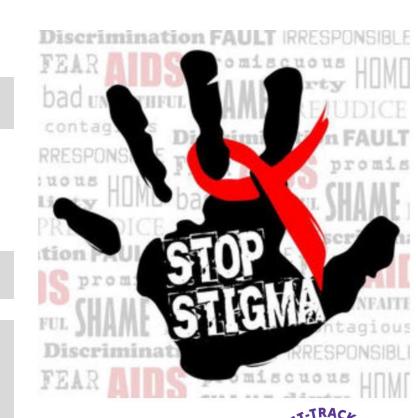
"... It's kind of just **like a plague** they don't want to get near."

"Kinda like you're an abomination"

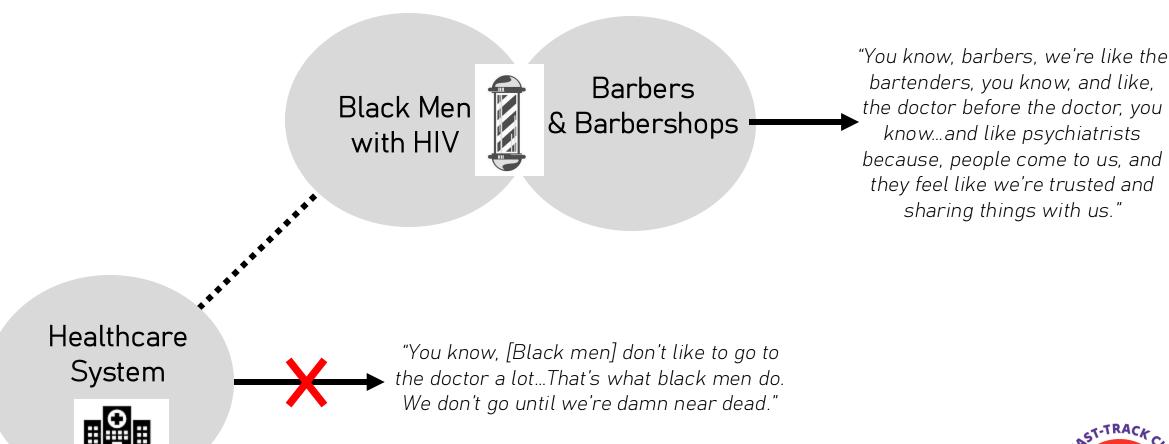
"... If I get (HIV) and it's positive, I'm out of here. Like suicidal ideation type thing."

"I'd rather get shot than say I got AIDS."

"I feel as though it would need to be .....repainted ... to come up with a different name for something instead of AIDS... ... You have to rename it. I don't know. I don't want to hear AIDS."



## Why Barbers? -> Meeting Men Where They Are





## Shared Leadership Model

- Community partners included on study team )co-PIs & Barberlinvestigators)
- Acknowledgement of mutual contribution, benefit, & voice
- Community partners compensated as content experts
- Barbers trained as Mens Health Ambassadors





Nate King & Steve Nelson Barber Investigators presenting at National HIV Meetings

@\_@



HIV/AIDS/STIs - Original Article

Establishing an Academic–Community Partnership to
Explore the Potential of Barbers and Barbershops in the
Southern United States to Address Racial Disparities in HIV
Care Outcomes for Black Men Living With HIV













# Study Aims and Study Schema

### Intervention Schematic

Study Objective

To assess the implementation and preliminary effectiveness of barbershop-based stigma reduction and multimedia intervention.

6-month Pilot Implementation Trial

Data Collection includes quantitative and quantitative data collected at baseline, study end, and continues to be on going



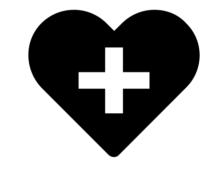
Barbershop Conversations

With referral to community resources



Multimedia Campaign

Weekly social media posts
Billboards



Improve Men's Sexua Health

> Reduce Community HIV Stigma

Ongoing weekly or monthly coaching to enhance training

## Intensive Men's Health Ambassador Training

### TRAINING CURRICULUM

Men's Sexual Health

Understanding the HIV Care Continuum

How Stigma Causes Sickness

HIV and the Church

Preventing HIV with PrEP

Living with HIV today

Mental Health

Role and Impact of Community Health Workers

Communication Strategies

Community Resources for Health

67 Barbers trained as health ambassadors









## Multimedia Campaign











Billboards

# Framework for Measuring Impact of COS

R How well does COS REACH the target population

Preliminary EFFECTIVENESS of COS

ADOPTION of COS by barbers

IMPLEMENTATION – feasibility, acceptability, appropriateness

MAINTENANCE/sustainability of COS over time

52

Enrolled in implementation trial



M

# COS Reached 4,400 Barbershop Client Encounters

59% of barbers spoke to 6 or more clients/week about health & sexual health topics





# COS Reached 25,000 people/month via Social Media

	Facebook <b>f</b>			Instagram 🧿			Combined
	Followers	Reach	Impressions	Followers	Reach	Impressions	IG & FB Reach
Cutting Out Stigma	113	1,357	2,868	141	1637	1813	2,994
COS Barbers	1,025	12,309*	26,099*	1,063	12,341*	13,598*	24,650*

Reach = number of unique people who have seen content

**Impressions** = number times the content is displayed on a platform regardless of whether it was clicked on or not. Impressions include unique and repeated views of your content by the same user.



<sup>\*</sup>estimated

## COS Is Feasible and Acceptable to Barbers

Measure	Scale	Baseline (n=67)	Study End (n=31)
Enthusiasm	0-100	92	93
Readiness	1-5	4.6	4.8
Feasibility	1-5	4.9	4.9
Acceptability	1-5	4.7	5.0
Appropriateness	1-5	4.7	4.9

All implementation outcomes were high after training, and remained high (or increased) after the 6-month pilot



## Measuring Impact

### FGDs with 10 barbers

 Barbers enjoyed serving as community leaders through COS "Cutting Out Stigma kinda made me a pillar in my community." "I felt like I was doing something positive for the people."

- Clients were receptive to receiving information and to hearing about referrals
- Condom distribution was successful and helped identify clients (especially youth) who needed more information or resources
- Barbers are enthusiastic about continuing and expanding the program

"I created relationships with other barbers in the city that I hadn't met yet."

"It was refreshing to be able to use my business to help further something."



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COS Barbers

### Middle TN Barber Cohort

Steve Nelson Nate King

#### **SCHD**

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